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Stanislaus County Behavioral Health and Recovery Services

Mental Health Services Act
Innovation Final Reports FY 2016-17

February 2018



Behavioral Health and Recovery Services



WELLNESS • RECOVERY • RESILIENCE

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**INN14 Father Involvement Project
Implemented by Center for Human Services (CHS)**

FINAL REPORT

Issue Addressed

The issues addressed by the innovation project:

- There is a lack of structured opportunities for fathers to support each other, increase social connectedness, access concrete supports, and increase parental competencies that can increase mental health protective factors.
- Families are not aware of or connected with resources that are available for father engagement activities.
- There are both unique and shared challenges amongst Stanislaus County communities related to father engagement and involvement. Individual communities are providing father engagement activities in an isolated manner. Connection and learning is lacking between communities.
- County-wide awareness needs to be strengthened regarding the benefits of father involvement, which can reduce the incidence and severity of mental health conditions and negative outcomes, as well as lead to healthy child development.

To address these issues the Father Involvement Project proposed the creation of a collaborative learning network that brought organizations and community groups together to achieve positive results for fathers, particularly those at risk of, or experiencing mental illness.

The learning questions that were explored through this project included:

1. How will participation in a learning network impact the growth and development of its members?
2. How will the learning network impact the quality (e.g. best practices) and quantity of father involvement activities? What will the learning network discover about impacting the quality of father involvement activities for fathers at risk for or experiencing mental illness?
3. Will participation in father involvement activities across the county increase as a result of the learning network? Will participation by fathers at risk for or experiencing mental illness increase as a result of the learning network?
4. Will fathers at risk for or experiencing mental illness, and their families, benefit from participating in the project activities, in particular increased protective factors?
5. By implementing what is learned from the network, will father involvement activities be successful in reaching and further engaging unserved and underserved fathers who are at risk for or who have a mental illness?

The overarching learning outcome is to inform the behavioral health field about how developing and using collective wisdom through a learning network focused on increasing protective factors in a non-mental health setting would support fathers at risk for, or who have a mental illness.

Description of Project

The Father Involvement Project created a collaborative learning network that brought organizations and community groups together to achieve positive results for fathers, particularly those at risk of or experiencing mental illness.

Agency partners for the Father Involvement Project included:

- El Concilio (Council for the Spanish Speaking)
- AspiraNet
- Parent Resource Center
- Manos Unidas
- Sierra Vista Child and Family Services
- Modesto City Schools
- Center for Human Services

These partners represent a rich array of culture, history, diversity and family strengthening expertise, as well as a desire to better understand how to engage and involve more fathers in their communities, in particular, those at risk for or having a mental illness.

In order to provide support and technical assistance to the Father Involvement Project partners, a Project Liaison was hired to coordinate the development of the work and all project activities. The Project Liaison also provided oversight of training and education efforts and worked individually with network partners to provide support for father involvement activities identified for their agencies or communities.

The overall project goal was to learn how to collaborate better by increasing father involvement and positively impacting fathers and families at risk for or with a mental illness. The organizations listed in this project all have participated in a collaborative before. However, what was different about this project is that the partnering agencies were eager to learn together how to best expand their *collective* knowledge and capacity to positively affect father involvement and protective factors for fathers at risk or experiencing mental illness, and do so in non-mental health settings.

The Father Involvement Project expected to learn how to best increase interagency and community collaboration to improve protective factors, parental competency, and social support for fathers at risk for or experiencing mental illness.

Through promotion of interagency collaboration, this project introduced to the mental health system a community defined approach that had been successful in a non-mental health context. It utilized the development of a collaborative learning network as the key strategy to achieving positive results for fathers at risk for or experiencing mental illness.

Our hypothesis was by increasing and improving father activities through the learning collaborative, the participants at risk or those with mental illness will be reached as a sub-group of fathers involved, and it will result in better outcomes for those fathers who are at risk of or experiencing a mental illness. The anticipated successful outcomes of this Innovation project included the learning, strengthened relationships, and coordinated activities of all the partners involved and the resulting impact will involve increased access and promoting positive outcomes for fathers involved. It is also expected that other participating fathers will benefit from the positive outcomes as well.

The strength of the network was founded and maintained by the intentional commitment of its members. Each of the collaborative partners in the Father Involvement Project believed that developing this learning community was essential in order to reach fathers who are at risk for or are experiencing mental illness, and to improve father involvement and protective factors county-wide.

Analysis of the Effectiveness of Project

The Project Liaison worked with the learning network members and project evaluator to collect and analyze the data. The network incorporated evaluation into the monthly agendas, prompted ongoing conversations about what is being learned. The diverse group of learning network members worked together to design culturally appropriate evaluation tools to use in both the network meetings and for father involvement activities.

Summary of project learning questions:

LEARNING QUESTION 1:

How did participation in the learning network impact the growth and development of its members?

Partners were invited to reflect on the network and their personal connections to father involvement issues in two e-surveys. The first survey was completed in February 2016 and the second in July 2017. The maximum score for each question was 5. Participation in the Father Involvement Network had a moderate, but not strong, relationship to increased knowledge of related topics. In both surveys, partners reported feeling only moderately knowledgeable about father involvement issues, although scores for July 2017 were slightly higher than those from February 2016. It is important to remember that the persons completing the survey in 2017 may not have been the same as did so in 2016. In both surveys partners expressed a strong personal connection to father involvement issues. In fact, answers to the first survey were high enough that it was not possible to see any increase as the project progressed.

LEARNING QUESTION 2 & 3:

Will the learning network impact the quality and quantity of father involvement activities, especially for fathers at risk for experiencing mental illness?

Will participation in father involvement activities across the county increase as a result of the network and will participation by fathers at risk of mental illness increase as well?

Building a Foundation

The Father Involvement Project first built a foundation for increased and improved services for fathers in Stanislaus County by constructing a Matrix of Best Practices and distributing a Needs Assessment Survey. The matrix identified existing activities available for fathers in Stanislaus County and the survey focused on identifying gaps in services. The Project Liaison developed the Matrix of Best Practices in January 2016 based on interviews with the Core Partners and others engaged in father involvement activities in Stanislaus County and surrounding areas.

The matrix project produced a list of nine existing father involvement programs, each including an activity description, costs associated with implementation, whether it was a local/state or national program, whether it was a Promising Practice or Evidence Based, and its Mental Health impact on fathers. This research also generated a list of eight events in Stanislaus County that bring fathers and their children together in a common activity or celebration. The results of this project were disseminated to all partners.

Between February and June 2016, network members recruited 101 men to complete a survey about community resources and services for fathers. The survey results highlighted the most helpful resources for men, the obstacles that prevent men from using these services, which groups of fathers need the most support, and what topics fathers would most like to know more about. The Father Involvement Needs Assessment Report was distributed throughout the network and to community partners.

Promising Strategies:

The Father Involvement Learning Network developed and implemented three promising strategies for outreach and service to fathers; the Our Story Father Conference, Father Cafes, and Boot Camps for Dads. These practices have contributed to a positive dialogue about how to increase the capacity of fathers to learn about their children, partners and themselves.

Our Story Father Conference

The first annual “Our Story Father Conference” was convened in April 2017. This was the network’s largest collaborative activity of the project. The network gathered over 100 fathers from diverse communities: South East Asian, Caucasian, African-American, and Latino. Community Leaders, including partners, engaged in meaningful conversations about fatherhood experiences and a panel of speakers told the father-daughter and father-son story from three very unique perspectives.

The network gathered nearly 60 feedback surveys from attendees focusing on feelings of connectedness, learning, and information gained. The majority of dads who attended felt connected and supported and found the conference to be empowering. The network partners collected participant contact information to continue development of support systems such as Father Cafes. Network partners have begun leadership transformation with some fathers who participated in the conference.

Father Cafes

Father Cafes bring men together to discuss shared experiences, challenges, and rewards of parenting. Through common stories and shared learning, participants had the opportunity to strengthen and embrace their own parenting style and contribute to the learning of others. In collaboration with the network, North Modesto Family Resource Center launched their first Father Dinner – now named Father Café – in February of 2017. Since then, numerous community-based organizations including; The Bridge, Newman Family Resource Center, Patterson Family Resource Center, Turlock Family Resource Center, Ceres Partnership Family Resource Center and Oakdale Workforce Development, have sponsored father dinners, celebrations, and cafes.

Boot Camps for New Dads

Boot Camp for New Dads is a hands-on program for first time dads that is coached and taught by fathers and facilitators from the Father Involvement Learning Network. Boot camps bring veteran dads (with children 3-6 months) and rookie dads (with newborn infants or expecting a child) together to share experiences and support one another. The network launched the first boot camp in Stanislaus County in June 2017. Over the span of three hours, participants engaged in story-telling, dad and baby interaction, and discussed critical topics such as Baby Blues, Shaken Baby Syndrome, and Post-Partum Depression. Dads also engaged in meaningful conversations to breakdown traditional gender stereotypes and beliefs.

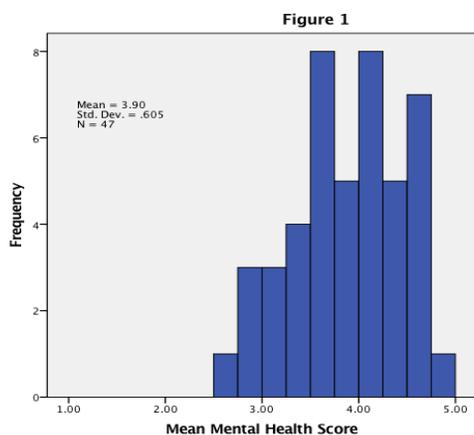
LEARNING QUESTION 4:

Will fathers at risk for experiencing mental illness, and their families, benefit from participating in the project?

Data were collected in summer 2016 and spring 2017 to assess the mental well-being and family protective factors of 48 men participating in father involvement programs throughout the county. Men from five agencies/programs volunteered to participate: The Bridge (n=10), On My Shoulders (n=24), the Father Involvement Program (n=2), Manos Unidas (n=3), Nurturing Father (n=1), and Uplift (n=8). Data from these sources is aggregated for the purposes of this report. The men reported a variety of ethnic orientations. The majority of fathers (42%) were long-term participants, having taken part in father-centered programs and activities for more than a year and only 15% were new to the program into which they were recruited. Most respondents (67%) said this group was the first father program in which they had been involved.

Mental Health

The *Warwick-Edinburgh Mental Well-being Scale (WEMWBS)* was used to assess the mental health of men participating in these programs.ⁱ The men rated 21 feelings about their lives on a 5-point frequency scale ranging from, “None of the Time” to “All of the Time.”



The distribution of mean scores is shown in Figure 1. In this sample, 8.5% scored less than 3.00, indicating that they experienced positive well-being rarely or none of the time, and an additional 6.4% said they did so only some of the time. These groups are likely at risk for experiencing mental illnesses such as depression or anxiety.

Men at risk for mental illness (n=7) were compared to others participating in father groups to see whether they were more likely to

benefit from services focusing on protective factors such as parental resilience, social connections, concrete support in times of need, and social/emotional competence of children. In the *Strengthening Families* approachⁱⁱ protective factors are the building blocks of a strong and healthy family. Participants in this survey completed the *Parents Assessment of Protective Factors (PAPF)* either before or after the mental health measurement. The *PAPF* is a reliable measure of four protective factors.

Men at risk for mental illness, as defined above, were statistically lower than others in parental resilience and social connections. They also differed from the highest well-being group (those with 4.00 and above) on concrete support. It appears likely that this group would benefit from participation in father involvement groups.

LEARNING QUESTION 5:

By implementing what is learned by the network, will father activities be successful in reaching and further engaging unserved and underserved fathers who are at risk for or who have a mental illness?

Yes, the network will continue to serve fathers and will increase outreach to them. It has formed six groups of volunteers from partner agencies to focus on different areas: the Father Conference, Curriculum and Materials, Education, Father Friendly Environments, Touring/visiting other father engagement programs, and Events.

The Father Involvement Project has produced a solid collaborative learning network, infrastructure for increasing and improving programs and activities for fathers, and a support system for capacity building surrounding father involvement efforts in Stanislaus County.

Some data elements are incomplete. Data and analysis of outcomes is based on 18 months of implementation, 6 months short of a proposed project timeline of 2 years. The project was delayed in starting, by 6 months, due to difficulties recruiting/hiring a Project Liaison whose role was central to implementation of planned activities. Extension of the project was denied by BHRS and the project ended according to the original timeline on June 30, 2017. This impacted project activities, strategies, data collection and learning about what is possible with interagency collaboration focused on supporting father involvement.

What was learned?

A number of key aspects of learning were begun from this project:

- Establishing a learning network to focus on father engagement and father-specific needs was well-received. The response included a broad & diverse array of partners from all sectors (faith based, non-profit, government, education, youth, community members, fathers, law enforcement, etc.).
- The learning network was a great conduit for training purposes and this was one of the best strategies to train and educate partners on best practices for father engagement and family strengthening.
- There was a great deal of interest, cross-collaboration and shared resources sustained by partners as it related to a focus on father-specific outreach and activities.
- Network partners took what they learned through the Network and were able to implement/pilot programs, groups or engagement strategies in their programs or at their sites.
- Fathers responded well to opportunities for building social connections with other fathers.

- The project created a new venue for fathers to share their perspectives on needs and programming unique to them.
- Collaborative agency partners learned some of the major concerns and needs of local fathers, which began to help guide efforts to establish specific programs (such as the Father Conference, Bootcamp for New Dads and Parent Cafes for fathers).

Recommend this Project to Others?

CHS believes there is value and would recommend a project like this to any community interested in engaging and supporting fathers, specifically those at risk of mental illness.

Continue the Project Under a Different Funding Source?

CHS submitted a proposal to Sutter Health's Community Benefit Program in 2017 and was granted funding to continue three activities; 1) Boot camp for New Dads Program, 2) Father Involvement Network and 3) technical assistance to father involvement groups established during the project.

Materials Developed to Communicate Lessons Learned and Project Results

This report will be posted at www.stanislausmhsa.com. No additional reports, manuals, or materials were developed for distribution.

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ⁱⁱ *Parents' Assessment of Protective Factors: User's Guide and Technical Report*. September 2014. Authors: Vonda L. Kiplinger and Charlyn Harper Browne.

INN-15 Youth Peer Navigator Innovation Project
Operated by Stanislaus County Behavioral Health and Recovery Services

FINAL REPORT

Issue Addressed

To understand the issue to be addressed, it is important to understand how the Innovation Project was developed. This innovation project is the direct result of input from youth involved in the Stanislaus County's Juvenile Justice System. Youth involvement first took shape in 2013 when Juvenile Justice began incorporating a Youth Leadership service program and chartered a chapter of "Youth in Mind"; a youth led non-profit advocacy organization for children, TAY, and TAYA mental health constituents. Offering peer support and community resources, the focus is promoting mental health recovery, self-care management, well-being improvement, and mental illness stigma reduction. The innovation project proposal was based on the input of the youth and the following information that explains why the change to the existing mental health is being proposed.

Youth from low-income households are at increased risk for mental health disorders.¹ Youth involved in the child welfare and juvenile justice systems are at even higher risk for having a mental disorder. An estimated 60-70% of youth entering California's Juvenile Justice system today suffer from mental health issues; over 50% of children and youth in the child welfare system have a diagnosable mental health condition; and youth of color experience disparities in prevalence and treatment for mental health issues.²

Many youth also face co-occurring substance abuse and mental health problems. The ability to navigate through the mental health system is vital to wellness, recovery, and resiliency for children, TAY, and TAYA, yet can be difficult and confusing for both youth and caregivers.

According to research from the Ontario Centre of Excellence for Child and Youth Mental Health, peer involvement in mental health services, with peers taking on a mentorship role working alongside case managers and/or youth clients to help them navigate the system, is used extensively in cancer care and in adult mental health care. To a lesser extent, youth peer navigators are being utilized in the area of mental health. Some findings conclude that the benefits of patient navigation include reduced hospitalization rates, better services to marginalized populations, and improved quality of life for individuals.³

Furthermore, research shows that peer involvement is being used successfully in a number of promising programs with youth. Outreach services for TAY with substance abuse problems involve former clients working alongside outreach staff or other workers and acting as peer educators or helpers. Peers with lived experience and street knowledge, and with knowledge of existing youth networks and social norms, may be more easily accepted by marginalized youth.⁴

¹ Berkeley Center for Criminal Justice (2010), Juvenile Justice Policy Brief Series: Mental health issues in California's juvenile justice system

² Kataoka, Zhang, and Wells (2002), Find Youth Info, Prevalence of Mental Health Disorders Among Youth

³ Ontario Centre of Excellence for Child and Youth Mental Health (January 2012), Evidence-in-Brief: Peer Navigators in youth mental health services.

⁴ Ibid.

Having lived experience and having navigated the mental health system, Youth Peer Navigators can also help youth overcome access issues due to personal factors, including cultural and spiritual barriers, lack of transportation, language barriers, concerns about confidentiality, not knowing where to go, feeling embarrassed about asking for help, and distrust of service providers.

As Youth in Mind members have lived experience and have themselves struggled with navigating the mental health system, the group theorized that having a peer to support the journey towards recovery would lead to more timely and appropriate linkages, along with more positive mental health outcomes.

Many youth served in Children's System of Care (CSOC) have not successfully been engaged by traditional methods of engagement into treatment. As a result, they can become more seriously ill, have more aggressive behavior, and have higher rates of re-incarceration or re-institutionalization. This project was designed to increase the quality of services, including better outcomes through youth peer support in multiple areas of the CSOC. Although youth peer navigation is not new, most of the evidence regarding peer navigation effectiveness is in the area of medical health, substance use, and adult mental health. We were interested in learning about the effectiveness of youth peer navigation in multiple settings of the CSOC, as well as learning what aspects of youth peer navigation are most beneficial to youth of multiple ages.

The Youth Peer Navigator Project was an integrated youth-centered approach to help young people with serious mental illness (SMI) or serious emotional disturbance (SED) navigate through the Stanislaus County Behavioral Health service system and improve their mental health and well-being. Youth Peer Navigators (YPN) between the ages of 21-28 provided mental health education, connections to community resources, mentoring, and peer support. This project provided youth peer navigation services to children, transition-age youth (TAY), and transition-age young adults (TAYA), ages 6-19 years of age in Behavioral Health and Recovery Services Children's System of Care. Included were youth involved with Child Welfare (Katie A/ Pathways to Well-being), Juvenile Justice, and those youth involved with multiple service providers (special education & mental health, etc.). All youth in the program were receiving services in the CSOC and were diagnosed with a SMI or SED.

Special attention was given to youth who were at risk of or were hospitalized in a psychiatric treatment facility, or who were in custody in Stanislaus County Juvenile Hall and the Juvenile Commitment Facility and diagnosed with a mental disorder/emotional disturbance. A referral form and process, as well as the Interagency Resource Committee were utilized to help determine priority based on need.

The specific issues addressed by the project included the following:

- A. There are challenges to successfully engage the targeted population by traditional methods, and mental health recovery is challenging when youth are not engaged.
 1. Many youth do not follow up for needed mental health services when released from custody or after psychiatric hospitalization.
 2. Youth may lack knowledge about their mental health condition and may not be aware of prevention activities.
 3. Youth may not understand the roles of different professionals and agencies.
 4. Many youth are embarrassed to ask for help due to the stigma and discrimination associated with mental health and/or juvenile justice involvement and often do not know where to go to access needed services (mental health, health care, and youth leadership opportunities).

5. Youth often may distrust service providers until rapport can be established.
- B. The targeted population often lacks strong protective factors which can exacerbate mental illness and/or juvenile justice involvement.
1. Youth may need coaching in positive communication with their parents, friends, and professionals.
 2. Youth sometimes do not have emotional, family or community support.
- C. Navigating the mental health formal and informal system can be difficult and confusing for youth and/or caregivers.
1. Many youth lack transportation and support.
 2. Youth may not know how to anticipate difficulties with upcoming meetings, appointments, and/or court dates.

Description of Project

The Youth Peer Navigator Project was an integrated youth-centered approach to help young people with Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED) navigate through the Behavioral Health & Recovery system services and improve mental health outcomes and well-being. This innovation project explored changing an existing mental health system practice/approach by engaging youth and their families in a manner that was proven promising in other areas, as well as less extensively for youth in behavioral health systems. The expectation was that by making this change, the project would increase the quality of services, including better outcomes.

The expected outcomes include:

- Increased engagement of youth in navigating the mental health system.
- Increased youth connection to natural and community supports.
- Increased protective factors for participating youth.
- Decreased criminal recidivism for participating youth.
- Decreased psychiatric re-hospitalization for participating youth.
- Increased skills/development for Youth Peer Navigators within their roles.

It was expected that the Youth Peer Navigators (YPN) would provide the support and mentorship individualized for each youth at any given point during the service. The activities were flexible within the parameters of a supporting/mentoring role. Examples of activities that the YPN provided are as follows:

- Listen to the youth's experiences-successes and failures.
- Assist understanding of education and treatment terminology.
- Explain the role of different professionals and agencies.
- Coach youth in positive communication with their parents, friends, and professionals.
- Attend meetings with youth and the treatment team, IEP's, court, Child-Family Team Meetings, or any other meetings in which the youth request the presence of a YPN.
- Debrief and assist understanding of difficult or complex meetings with the youth.
- Provide peer-based support to youth in understanding shame, disappointment, anger, and stigma about behavioral health problems.
- Provide peer-based emotional support to help reduce fears of accessing mental health care.
- Teach wellness recovery management.

- Teach and mentor transitional living skills.
- Assist youth to develop a family/community based support system.
- Assist youth with becoming engaged in positive youth development community activities.
- Assist with the coordination of and transportation to and from needed services.
- Help navigate communication with health care providers.
- Advocate for youth's rights within the mental health, child welfare, and juvenile justice systems.
- Attend weekly YPN support and supervision meetings.
- Participate in the youth leadership activities in the county.

The YPN provided peer-based support and assistance with navigation of services. YPN did not replace the role of professional health care providers. While the practice of support and linkages previously depended on clinicians, case managers, and other adult staff, the YPNs were a key source for engagement of youth. YPNs were selected based on their advanced stage of behavioral health recovery and were monitored and supported by Licensed Mental Health Professionals, including supervision.

Analysis of the Effectiveness of Project

Data collection and evaluation was focused on the proposed impact that the project activities would have on the youth clients' mental health and wellbeing, as well as their perception of the quality of services they received. There was also a component of the evaluation focused on process and supports needed for the Youth Peer Navigators to be successful in their role.

Multiple methods of data collection, both qualitative and quantitative, were utilized to address the learning questions, and included the following:

- Collection of youth client demographics to understand the population to be served and to determine if the program is more successful with specific sub-populations.
 - Source: Electronic Health Record (EHR).
- Tracking of clients' linkages to other services and/or community support:
 - Each YPN collected data regarding linkages of the youth with whom they supported, using tracking forms to determine if youth were effectively connected to resources and supports. The YPNs and supervisor helped develop the tracking forms, making changes in the early stages of the project as appropriate to best identify the results and track youth clients' outcomes.
 - Each YPN documented weekly the youth clients' linkages and connections to services and community/other support.
 - Source/Tool: Tracking forms (See Attachment #1).
- Tracking of clients' progress through YPN documentation:
 - Each YPN collected data regarding the process of working with each client, as well as the progress made.
 - Each YPN documented weekly the clients' progress and successes, as well as the challenges and what they did to overcome the challenges.
 - Discharge data was collected to determine if the clients met goals/were successful.
 - Source/Tool: Tracking forms (See Attachment #1); Electronic Health Record (EHR).
- Tracking and analysis of clients' incarceration data:

- Incarceration data is available for all youth open to services in the Children's System of Care.
- Clients' incarceration data was compared pre and post YPN engagement to help assess if the YPN services helped decrease re-incarceration.
- Source: ICJS jail database.
- Tracking and analysis of clients' hospitalization data:
 - Hospitalization data is available for all youth open to services in the Children's System of Care.
 - Clients' hospitalization data was compared pre and post YPN engagement to help assess if the YPN services helped decrease re-hospitalization.
 - Source: Electronic Health Record (EHR).
- Documentation of YPN successes and challenges:
 - Each YPN documented weekly the success and challenges that they experienced while working with the clients.
 - The YPNs also participated in two focus groups facilitated by the program evaluator to collect data regarding what the YPNs needed to be successful. This data was instrumental in helping us learn what worked to engage and connect youth, and what was important from the YPN perspective.
 - Sources: Tracking forms and focus groups (See Attachment #2).
- Measurement of Developmental Assets and Quality of Program:
 - DAP (Developmental Assets Profile©) and YAPS (Youth and Program Strengths©) survey tools were used to measure strengths and protective factors, as well as program quality (See Attachments #3 and #4).
 - Administered by YPN at time of youth client's first engagement, every 4 months and at discharge of program to measure any changes in the eight asset categories of the DAP.
 - Paper and electronic version of the tool were used.
 - Source: DAP and YAPSS – Search Institute® tools and reports.

Unique Youth Clients and Progress Data

The total number of unique youth clients served during the operational time of the project (October 2015 through June 2017) is 88. The Youth Peer Navigators were asked to collect data regarding each youth client’s demographics and progress, including successes and challenges, using the EHR and tracking forms.(see Attachment #1) Below is a summary of this information as of June 30, 2017.

CHART 1 – YOUTH CLIENT DEMOGRAPHICS

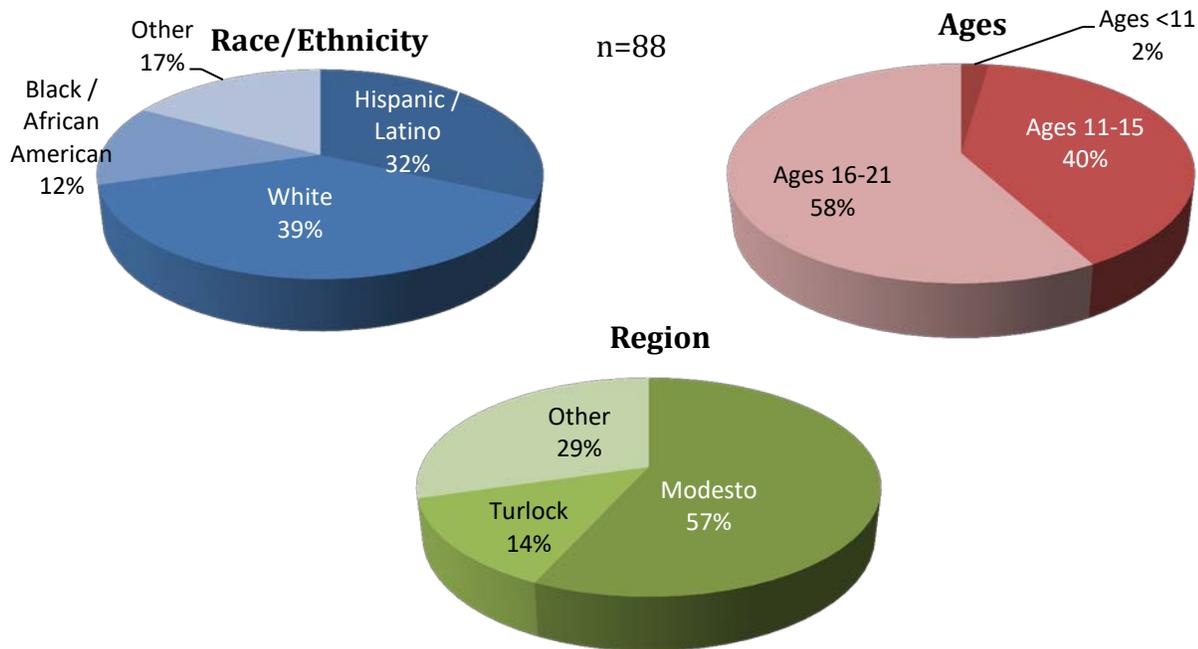


TABLE 1

Unique Youth Client Summary Data October 26, 2015 - June 30, 2017		
	<i>Number</i>	<i>Percent</i>
Total Unique Clients:	88	
Clients who reached goals	12	14%
Clients who terminated services before reaching goals, with satisfactory progress	17	19%
Clients who terminated services before reaching goals, without satisfactory progress	0	0%
Clients who were opened to treatment	0	0%
Clients who relocated with satisfactory progress	12	14%
Clients who relocated with unsatisfactory progress	1	1%
Clients who are still active	23	26%
Clients who did not engage	23	26%
Clients Closed in the Program:	42	48%
Clients closed who made satisfactory progress or reached goals	41	98%
Clients closed who did not make satisfactory progress	1	2%

The YPNs also documented narratives regarding the client progress, and used this information during supervision sessions and meetings with clients. In addition, the YPNs documented their own thoughts, questions, successes and challenges as a journaling practice. This process allowed the YPNs to reflect on their work and what was going well and the areas for which they may need assistance from their supervisor. This feedback loop proved important for this type of position, and the YPN focus group confirmed this.

Youth Client Encounters, Referrals, and Linkages

One of the primary roles of the Youth Peer Navigators is to connect youth to resources within the behavioral health system and in the community, both formal and informal. By building rapport and trust, the YPNs help the participating youth locate and engage in the support and services that will assist them in recovery. The YPNs tracked the encounters, the referrals, and the linkages for each client with whom they worked and supported. The majority of the referrals were successful, defined as the youth making an appointment and/or engaging at least once with the youth client. Over the course of the project there was 20% of referrals that were not followed through and 17% unknown outcomes of the referral. Although it is difficult to track this process at times and encourage the youth clients to follow through, it was learned that this was a critical component to linking youth to support and services.

TABLE 2

Youth Client Encounters, Referrals, and Linkages		
October 26, 2015 - June 30, 2017		
	<i>Number</i>	<i>Percent</i>
Total Unique Clients:	88	
Total Weekly Encounters (Weekly Navigation Forms):	1,697	
Average number of weekly encounters per client	19	
Range of weekly encounters	0-60	
Clients with Referrals:	39	44%
Total referrals made	127	
Average number of referrals per client referred	3.3	
Range of referrals per client referred	1-10	
Of the 127 Referrals Made:		
Referrals not followed through	26	20%
Referrals with an appointment	20	16%
Referrals where client engaged at least once	56	44%
Referrals made but had no program openings	4	3%
Referrals without an outcome reported	21	17%

Referrals to community resources included Haven Women’s Center, Community Based Organizations, public benefits assistance programs, and other behavioral health service programs.

Incarceration

Below is a summary of the incarceration outcomes for the project:

- Of the youth clients referred to the YPN program, 27 were involved with Juvenile Probation
 - Of the 27 involved with Juvenile Probation, 5 were re-incarcerated

- Of the 5 re-incarcerated, only 1 was re-incarcerated with a new charge
 - Of the 5 re-incarcerated, 4 were re-incarcerated due to a probation violation
 - Of the 4 re-incarcerated due to probation violation, 3 were participating in the Juvenile Justice Drug Court program (for substance use issues)
 - Juvenile Hall is used for sanctions when the strict Drug Court curriculum and high accountability is violated

Youth Peer Navigators have been able to engage this youth population quite successfully, contributing to the reduction of recidivism for 81% of the youth clients served in the program. The YPN's role of support and mentor seems to resonate with the youth involved with Juvenile Probation.

Hospitalization

As described in the analysis section, the number of youth clients referred to the YPN program with recent hospitalizations was 10. Of the 10 clients, only 3 have been re-hospitalized after working with YPNs and other behavioral health programs. Since most of the clients who have been hospitalized were connected to behavioral health teams already, the YPNs functioned as part of a support system. The YPN provided critical peer support to help the youth de-stress and re-focus on more therapeutic activities in a less clinical environment. This role has proven quite effective to help prevent re-hospitalizations, contributing to a 70% success rate.

Program Quality

The primary focus of this innovation project was on increasing the quality of services, including better outcomes, thus measuring program quality was at the core of the project evaluation. The YPN program quality was inextricably linked to better outcomes for the youth clients and Youth Peer Navigators mentoring activities with the youth clients was the heart of the learning opportunity for better youth client outcomes.

The Youth and Program Strengths (YAPS) Survey© (Search Institute ®) was used to measure the youth's perspective of program quality. The youth were asked to complete the YAPS when first enrolled in services, every 4 months and when exiting the program. As described by the Search Institute⁵, this data indicates the YPN program quality based on the youth's perspective of the supports and opportunities in the program, which in turn, help guide the choices they make, success in school, their health, and how they contribute to community life. As noted above, the clients' perspective is critical for this project and the clients' outcomes.

A total of 89 pre survey responses were collected, for this analysis we will concentrate on the post survey responses as the results indicate the youth's perspectives of the program after experiencing the program. The pre survey data is only shared in Table 3 as a reference to compare the post survey average scores.

⁵ Search Institute, 2017, www.search-institute.org.

TABLE 3

Pre Survey Youth Demographics			
n=89			
		Number	%
Gender	Female	19	21%
	Male	69	78%
	Unknown	1	1%
Grade	4-6	8	9%
	7-8	20	22%
	9-12	61	69%
Race/Ethnicity*			

*Race/Ethnicity breakdown not available

A total of 50 post survey responses are included in this data, meaning that the data includes only youth taking the survey the second or subsequent time after enrolling in the program and/or at the time of exiting the program. Table 4 shows the demographic make-up of the post survey sample:

TABLE 4

Post Survey Youth Demographics			
n=50			
		Number	%
Gender	Female	7	14%
	Male	43	86%
Grade	4-6	5	10%
	7-8	14	28%
	9-12	21	42%
	Other	10	20%
Race/Ethnicity	African American or Black	3	6%
	Hispanic or Latino	27	54%
	White	19	38%
	Other	1	2%

The survey asked youth to respond to questions regarding eight different categories. In Table 5, the average score for each category is shown for the pre and post surveys and compared; the percentages for each quartile are then illustrated for the post survey only (Low = 1st quartile; Fair = 2nd quartile; Good = 3rd quartile; Excellent = 4th quartile).

TABLE 5

Category	Average Score (Pre) Scale of 0 to 40	Average Score (Post) Scale of 0 to 40	Change from Pre to Post	Low	Fair	Good	Excellent
Physical and Psychological Safety	29	33	↑	11%	9%	22%	59%
Providing Appropriate Structure	33	34	↑	0%	15%	28%	57%
Providing Supportive Relationships	31	33	↑	2%	22%	22%	54%
Providing Opportunities to Belong	33	36	↑	0%	11%	24%	65%
Building Positive Social Norms	33	34	↑	4%	17%	22%	57%
Supporting Efficacy and Matterng	30	31	↑	3%	28%	31%	38%
Providing Opportunities for Skill-Building	31	33	↑	7%	17%	20%	57%
Integrating Family, School, and Community Efforts	32	34	↑	4%	13%	26%	57%

1. Physical and Psychological Safety – *The degree to which youth feel physically and psychologically safe in the program; safety is a fundamental program component.*

The “Physical and Psychological Safety” measure had the highest percentage of low scores. Looking more closely at this measure, Hispanic/Latino youth responded with “Low” scores (15%) compared to the white respondents (6%). However, Hispanic/Latino respondents also had a higher percentage of “Excellent” scores (62%) compared to white respondents (50%). This suggests that there may need to be more attention given to safety, especially with some Hispanic/Latino youth.

2. Providing Appropriate Structure – *The degree to which youth feel the programming provides appropriate structure; well-run, organized, and with sufficient dependability and structure.*

The YPN program scored well in this category, with the second highest percentage of “Good” or “Excellent” scores (just behind “Providing Opportunities to Belong”). All “Fair” scores came from those who participate in the program 3 days or less per week, with 71% more coming from those participating 0-1 day per week. It seems that those participating more frequently generally score this area higher, which makes sense when relating consistency to dependability and structure.

3. Providing Supportive Relationships Program – *The degree to which youth feel programming provides supportive relationships with adults and other youth in the program.*

Considering that fundamentally one of the goals of the YPN program was to connect youth with a mentor and peers, this category is an important measure for the program. It plays a large role in how impactful the program is for youth. Although the small percentage of those in the “Low” score area are those who participate 0-1 days per week, the group of youth participating 4 or more days per week were the highest percent in the “Fair” score area. This could be due to that group being the most difficult population to reach and support, and therefore meet with YPNs more often, but it is not verifiable. It is important to note that 90% *agree* or *strongly agree* that “There is at least one staff member I can talk to if I have a problem.” In addition, 85% indicated that they *often* or *very often* “Develop good relationships with adults” when they spend time in the program.

4. Providing Opportunities to Belong – *The degree to which youth feel programming provides opportunities to belong; emotional attachment to the program.*

This category had the highest average score, as well as the highest percentage of “Excellent” and “Good” scores. The subgroup that had the highest percentage of “Excellent” scores (77%) was the youth who had been in the program more than six months, and conversely, those with the lowest percentage (38%) were those in the program less than 3 months. In addition, 100% of the youth participating in the program 4 or more days per week scored in the “Good” or “Excellent” range. Overall, 93% of the youth *agree* or *strongly agree* that “I can be myself at this program” and 92% *agree* or *strongly agree* that “I am proud to be part of this program.” This suggests that the YPN program staff were inviting and accepting, and valued the youth for who they are.

5. Building Positive Social Norms – *The degree to which youth feel programming builds positive social norms and values.*

Hispanic/Latino youth scored slightly higher in this area (81% “Good” or “Excellent”) compared to white youth (75%). Also, those participating 4 or more days per week scored much higher (100%) compared to those participating 0-1 days per week (62%). When they spend time in the program, 85% of the youth indicated they *often* or *very often* were “Encouraged to stay away from alcohol, tobacco, and other drugs” and “Encouraged to do things to help others”.

6. Supporting Efficacy and Mattering – *The degree to which youth feel programming supports efficacy and mattering, feeling capable and competent in the program, and invited to contribute or help make program decisions.*

The score for this category was the lowest of the eight. White youth in the program 3-6 months had the highest percentage scoring “Low” (11%) in this area, while Hispanic/Latino youth had the highest percentage scoring in the “Excellent” quartile (43%). Surprisingly, those participating 4 or more days per week were twice as likely as the others to be in the “Fair” quartile. Overall, youth responded to questions in this category in a more neutral/middle of the road manner. For example, 26% responded that they were *sometimes* bored, 22% indicated that they *sometimes* do something they are passionate about and gives them joy and energy in the program, and 22% responded that they *sometimes* help make decisions.

7. Providing Opportunities for Skill-Building– *The degree to which youth feel programming provides opportunities to identify interests and get better at skills.*

The subgroup with the highest “Excellent” percentage (65%) was the youth who have been in the program more than 6 month. This may suggest that it takes some time to identify interests and build skills. At least half of those who have been in the program less than three months scored in the highest quartile in this area. With regard to “Learning how to solve personal life problems”, 80% of the youth indicated that they did this *often* or *very often* in the program. In addition, 85% *often* or *very often* learned “how to cooperate with others” at the program.

8. Integrating Family, School, and Community Efforts – *The degree to which youth feel programming integrates the efforts of family, school and the community, partnering with and involving these entities.*

One of the goals of the YPN program was to connect youth with community, and integrate their existing support systems as much as possible. The Hispanic/Latino subgroup scored higher in this area (85% in “Good” or “Excellent” quartiles) compared to White youth (75%). Over a quarter (26%) of the White subgroup were in the “Low” or Fair” quartiles, in addition, 35% of the youth who participated 0-1 days per week were in the “Low” or Fair” quartiles compared to 0% of those who participated 4 or more days per week. There were some very positive responses regarding integration:

- **91% agree or strongly agree**, “The staff makes sure my parents know what we are doing in the program”.
- **85% agree or strongly agree**, “This program tries to involve my family in some activities”.
- **80% agree or strongly agree**, “This program helps me see how what I learn in school is useful in life outside of school”.

Developmental Assets

Measuring the change in the youth client’s developmental assets was also a core component of the evaluation of this project as that is the measurement chosen to indicate better outcomes for the youth involved. The YPN program quality is connected to better outcomes, as measured by the YAPS tool, but *The Developmental Assets Profile*® (DAP) (Search Institute ®) specifically measures changes in the areas of strengths and supports youth need in their lives to prepare for a positive future and make positive life choices. The list and categorization of the 40 Developmental Assets® and their definitions can be reviewed from Attachment #5.

The DAP was used to measure the youths’ developmental assets pre and post participation in the YPN program. The youth were asked to complete the DAP when first enrolled in services, every 4 months, then at the time of exiting the program. As described by the Search Institute, this data indicates the level of assets youth experience at the start of the program compared to post enrollment, based on the following⁶:

1. Composite asset scores falling into four levels: challenged (0-29 out of 60); vulnerable (30-41); adequate (42-51); and thriving (52-60), and combines the Internal asset score (30 points) and the External asset score (30 points).
2. Internal and external asset scores, showing levels of supports from families, schools, and communities (external) and personal strengths and competencies (internal).
3. Levels of eight Developmental Assets categories.
4. Five asset-building contexts scores.

⁶ Search Institute, 2017, www.search-institute.org.

A total of 89 pre survey responses were collected; the sample is identical to that of the YAPS and the demographic makeup can be viewed in Table 3. It should be noted that there was a discrepancy of one between the number of pre surveys and number of clients served. This could be due to a duplicate survey or a post survey entered as a pre survey. This discrepancy of one should not affect the analysis of results.

A total of 50 post survey responses were collected; the sample is identical to that of the YAPS and the demographic makeup can be seen in Table 4. The data includes only youth taking the survey the second or subsequent time after enrolling in the program and/or at the time of exiting the program.

Data from the pre and post DAP surveys are explored and compared below. The DAP is validated as a pre and post measure of change over time⁷, and in this case, is used to indicate better outcomes of youth receiving YPN program services.

External and Internal Assets

When Behavioral Health and Recovery Services was developing the Youth Peer Navigator Innovation Project, it was clear that the targeted youth population for the program were those who were likely to be lacking in both external and internal developmental assets. The goal was to provide peer support from youth with lived experience who could relate to, and guide the youth clients, building both internal and external assets for the youth to be served. The eight categories of developmental assets are concisely summarized below by the Search Institute and reflect the goals of the program⁸.

⁷ Search Institute, 2017, www.search-institute.org.

⁸ Search Institute, 2017. *Strengths and Support in the Lives of Stanislaus County Behavioral Health and Recovery Services Youth Report*.

FIGURE 1

THE EIGHT CATEGORIES OF DEVELOPMENTAL ASSETS	
External Assets	Internal Assets
 <p>SUPPORT Young people need to be surrounded by people who love, care for, appreciate, and accept them.</p>	 <p>COMMITMENT TO LEARNING Young people need a sense of the lasting importance of learning and a belief in their own abilities.</p>
 <p>EMPOWERMENT Young people need to feel valued and valuable. This happens when youth feel safe and respected.</p>	 <p>POSITIVE VALUES Young people need to develop strong guiding values or principles to help them make healthy life choices.</p>
 <p>BOUDARIES AND EXPECTATIONS Young people need clear rules, consistent consequences for breaking rules, and encouragement to do their best.</p>	 <p>SOCIAL COMPETENCIES Young people need the skills to interact effectively with others, to make difficult decisions, and to cope with new situations.</p>
 <p>CONSTRUCTIVE USE OF TIME Young people need opportunities—outside of school—to learn and develop new skills and interests with other youth and adults.</p>	 <p>POSITIVE IDENTITY Young people need to believe in their own self-worth and to feel that they have control over the things that happen to them.</p>

Table 6 summarizes the External Assets, the key supports which provide the relationships, opportunities, and guidance from family, school, and community.⁹ The mean for every External Assets category increased, suggesting that there was a positive change for youth clients after participating in the Youth Peer Navigator program. It is important to note that the sample size was decreased for the post survey as not all youth clients completed a subsequent survey after the initial DAP. When taking into consideration the qualitative data from the tracking sheets, the hospitalization and incarceration outcomes, and the YPN documentation, it is likely that the increase in the mean scores for External Assets suggests positive outcomes in these areas.

⁹ Search Institute, 2017. *Strengths and Support in the Lives of Stanislaus County Behavioral Health and Recovery Services Youth Report.*

TABLE 6 - EXTERNAL ASSETS

Category	Mean Score (Pre) Scale: 0 to 30	Mean Score (Post) Scale: 0 to 30	Positive / Negative Change from Pre to Post
Support	20.7	23.6	↑
Empowerment	20.0	22.9	↑
Boundaries & Expectations	21.1	23.5	↑
Constructive Use of Time	16.2	17.9	↑
Overall External Assets	19.6	22.2	↑

KEY	Challenged (lowest level)	0-14
	Vulnerable	15-20
	Adequate	21-25
	Thriving (highest level)	26-30

In addition to the analysis of the mean, it is telling to compare the differences in assets by where youth clients score in the “Challenged” to “Thriving” spectrum. Chart 3 below illustrates this. According to the Search Institute, it is typical to expect between 5 and 15 percent scoring in the “Challenged” and “Thriving” ranges, while the rest usually fall in the “Vulnerable” and “Adequate” ranges.¹⁰ Therefore the asset categories that differ from these expectations should be noted, and offer some insight to where focused needs or strengths are with the youth participating in, and exiting from, the YPN program. The following points of concern and areas of strength to be noted are garnered from Chart 2:

- Post data for Support is very strong (48% “Thriving”).
- Pre data for Empowerment points to an area of concern (22% “Challenged”), but Post data is strong (42% “Thriving”).
- Pre data for Boundaries & Expectations points to an area of concern (20% “Challenged”), but Post data is strong (48% “Thriving”).
- Pre and Post data for Constructive Use of Time shows that this was an area of concern (44% “Challenged” Pre), and although the percentage has decreased, remains an area of concern (32% “Challenged” Post).

¹⁰ Search Institute, 2017. *Strengths and Support in the Lives of Stanislaus County Behavioral Health and Recovery Services Youth Report.*

CHART 2 - EXTERNAL ASSETS COMPARISON

**Comparison of
Pre (n=89) and Post (n=50) Percentages
by External Asset Category**

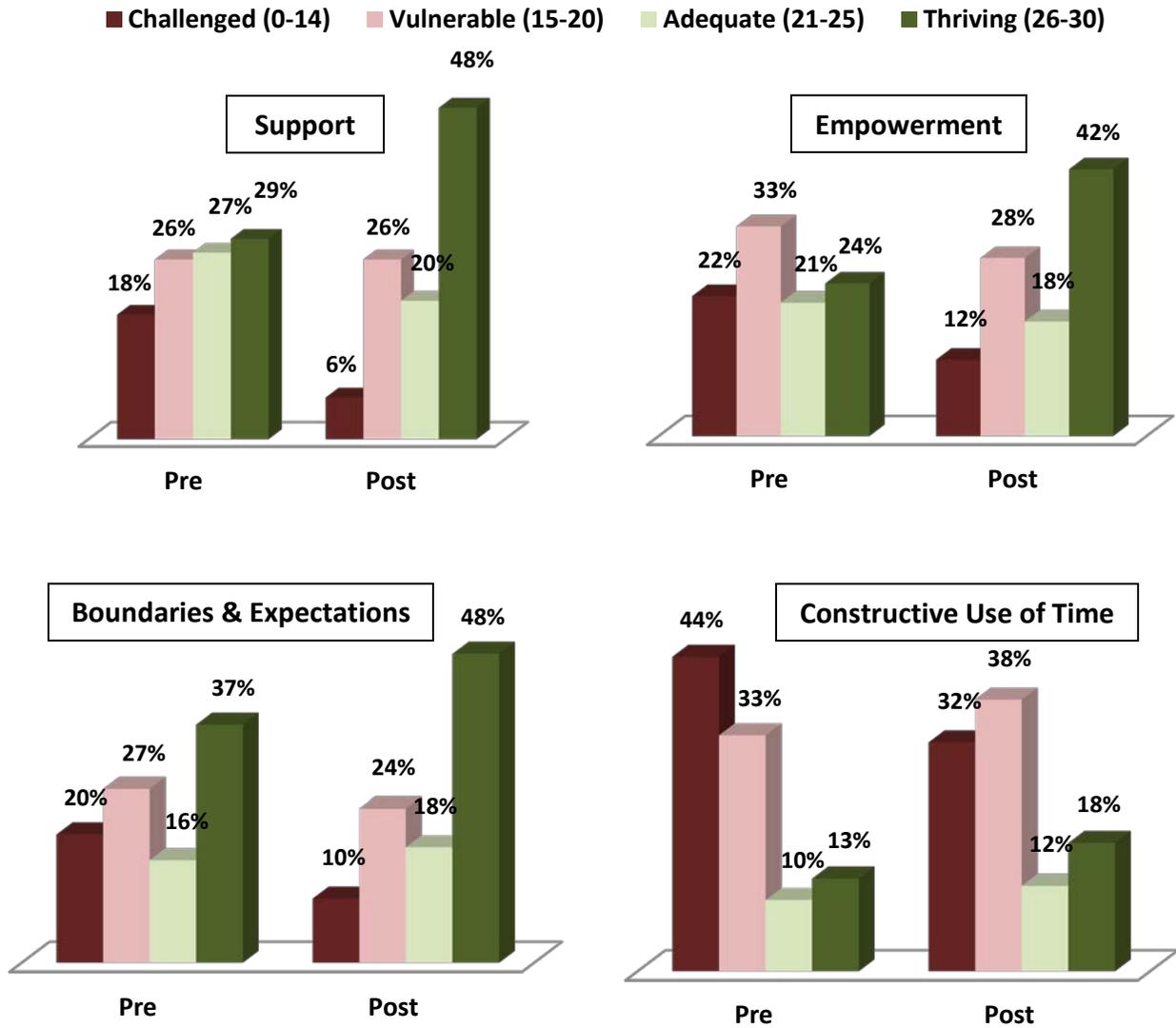


Table 7 summarizes the Internal Assets, the internal values and strengths, commitments, skills and self-perceptions that can lead to self-regulation, internal motivation, and personal character.¹¹ The mean for every Internal Assets category increased, suggesting that there was a positive change for youth after participating in the YPN program. It is important to note here that some youth did not complete a subsequent survey after the initial DAP and this reduced the sample size. However, when taking into consideration the qualitative data from the tracking sheets, the hospitalization and incarceration outcomes, and the YPN documentation, it is likely that the increase in the mean scores for Internal Assets suggest positive outcomes in these areas.

¹¹ Search Institute, 2017. *Strengths and Support in the Lives of Stanislaus County Behavioral Health and Recovery Services Youth Report*.

TABLE 7 - INTERNAL ASSETS

Category	Mean Score (Pre) Scale: 0 to 30	Mean Score (Post) Scale: 0 to 30	Positive / Negative Change from Pre to Post
Commitment to Learning	20.2	21.8	↑
Positive Values	19.5	21.8	↑
Social Competencies	19.0	21.3	↑
Positive Identity	18.3	20.5	↑
Overall Internal Assets	19.4	21.5	↑

KEY	Challenged (lowest level)	0-14
	Vulnerable	15-20
	Adequate	21-25
	Thriving (highest level)	26-30

In addition to the analysis of the mean, it is telling to compare the differences in assets by where youth clients score in the “Challenged” to “Thriving” spectrum. Chart 3 below illustrates this. According to the Search Institute, it is typical to expect between 5 and 15 percent scoring in the “Challenged” and “Thriving” ranges, while the rest usually fall in the “Vulnerable” and “Adequate” ranges.¹² Therefore the asset categories that differ from these expectations should be noted, and offer some insight to where focused needs or strengths are with the youth participating in, and exiting from, the YPN program. The following points of concern and areas of strength to note can be garnered from Chart 3:

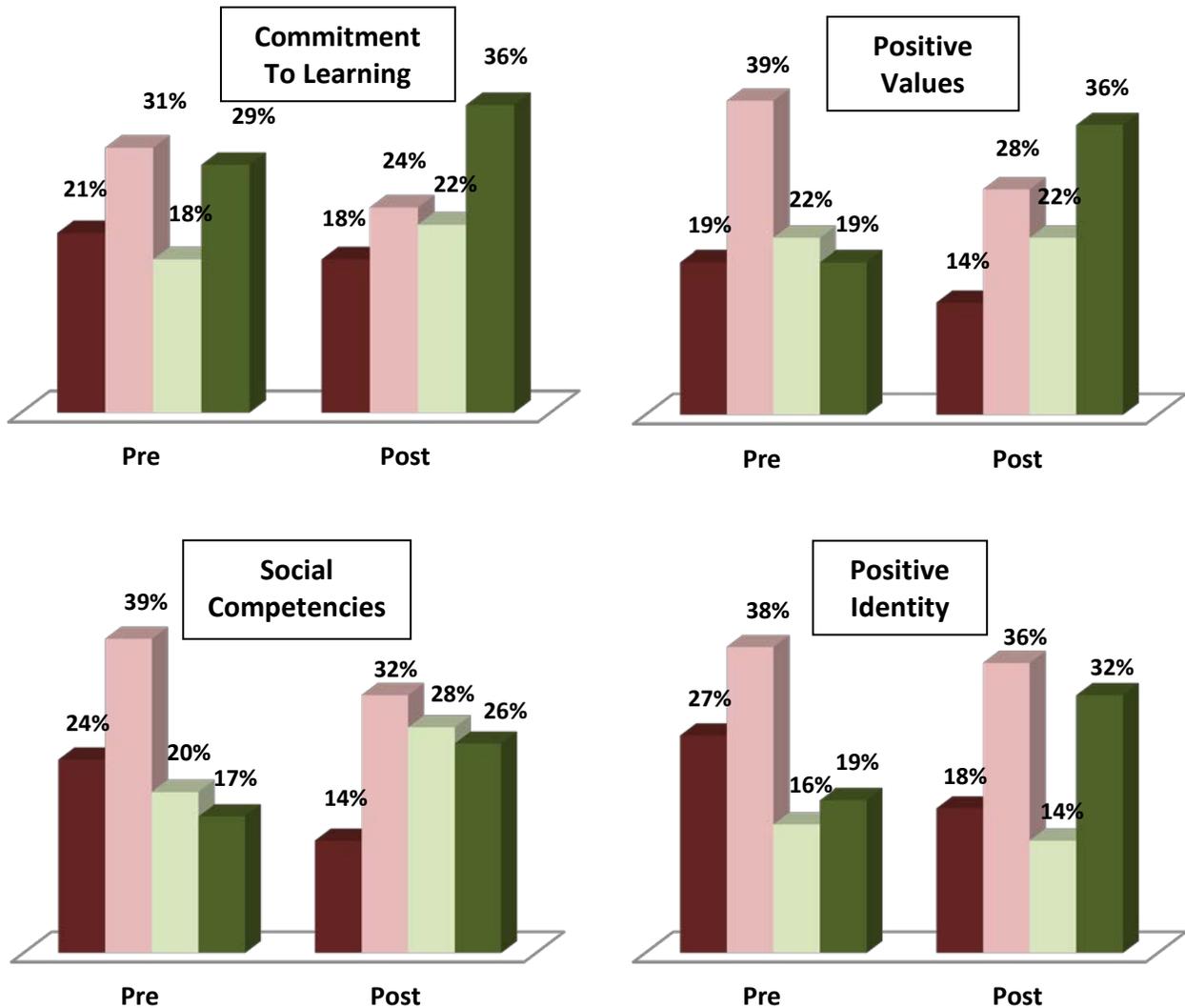
- Post data for Commitment to Learning is quite strong and improvement shown (36% “Thriving”), but the Pre data was also quite strong (29% “Thriving”).
- Post data for Positive Values is quite strong and improvement shown (36% “Thriving” from 19% “Thriving” for Pre data).
- Pre data for Social Competencies points to an area of concern (24% “Challenged”); Post data shows improvement (26% “Thriving”), but there is still work to be done in this area.
- Pre data for Positive Identity points to an area of concern (27% “Challenged”); Post data shows improvement (32% “Thriving”), but there is still work to be done in this area (18% “Challenged”).

¹² Search Institute, 2017. *Strengths and Support in the Lives of Stanislaus County Behavioral Health and Recovery Services Youth Report*.

CHART 3 - INTERNAL ASSETS COMPARISON

**Comparison of
Pre (n=89) and Post (n=50) Percentages
by Internal Asset Category**

■ Challenged (0-14) ■ Vulnerable (15-20) ■ Adequate (21-25) ■ Thriving (26-30)



Composite Assets Score

The Composite Assets Score gives an overall sense of how strong the foundation of Developmental Assets is for the youth clients participating in the YPN program.¹³ The Pre and Post DAP Composite Assets Scores are compared to illustrate outcomes for youth after enrolling in the YPN program. Below are the pre/post comparisons of the Composite Assets mean scores, as well as the percentages of youth, pre and post, in each level.

¹³ Search Institute, 2017. *Strengths and Support in the Lives of Stanislaus County Behavioral Health and Recovery Services Youth Report.*

Table 8 summarizes the Composite Assets mean scores. The mean increased, suggesting that there was a positive change for youth after participating in the Youth Peer Navigation program. As previously stated, the sample size decreased for the post survey as not all youth completed a subsequent survey after the initial DAP. But again, when reviewed with the numerous forms of other data collected and analyzed, it is likely that the increase in the mean score suggests positive overall outcomes for youth participating in the program.

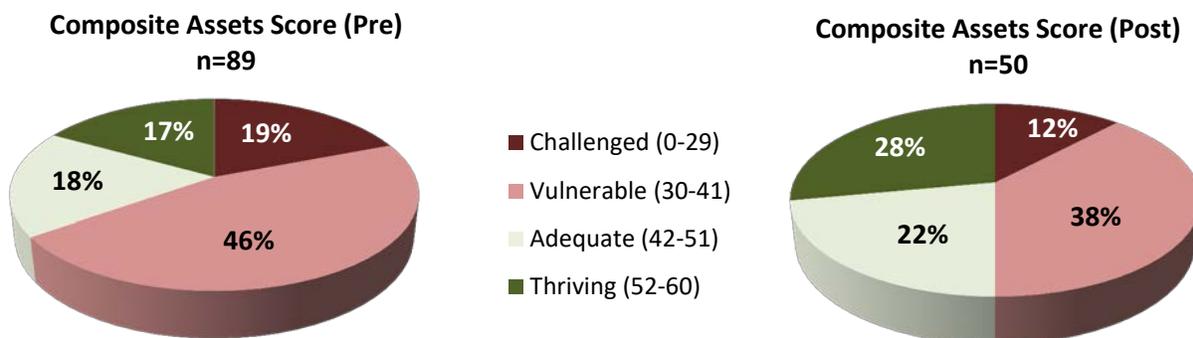
TABLE 8 - TOTAL ASSETS

Category	Mean Score (Pre) Scale: 0 to 60	Mean Score (Post) Scale: 0 to 60	Positive / Negative Change from Pre to Post
Total Assets	39.0	43.7	↑

KEY	Challenged (lowest level)	0-29
	Vulnerable	30-41
	Adequate	42-51
	Thriving (highest level)	52-60

Chart 4 also indicates positive changes for youth participating in the program. The baseline data illustrates that 65% of the youth scored in the “Challenged” (19%) or “Vulnerable” (46%) levels, experiencing the two lowest levels of assets upon entering the program. In comparison, the post data shows a decrease in percentage of those in the lowest two levels. The “Challenged” level (12%) and the “Vulnerable” level (38%) represent 50% of the youth, while 50% are “Adequate” or “Thriving”, an increase of 15 percentage points compared to baseline.

CHART 4 - COMPOSITE ASSETS COMPARISON



Five Asset-Building Contexts Scores

There are five contexts for building developmental assets: Personal, Social, Family, School, and Community. A description and examples of these assets can be reviewed in Attachment #6. The following data assesses the youths’ perceptions of supports and strengths across the context of personal, social, family, school, and community. In other words, it is important that we look at the roles of different entities in the youths’ lives for healthy development of assets. No new measurements are introduced here; instead, the scores from the above Developmental Asset categories are used in a different (contextual) manner.

The mean for every Context category increased, suggesting that there was a positive change for youth after participating in the Youth Peer Navigation program. These results are consistent with our other findings. The highest mean score for both Pre and Post results is in the area of Family Context. The lowest mean score for both Pre and Post results is in the area of Community Context. Although there was improvement, there remains work to be done in this critical area of connecting youth to the community (and vice versa).

TABLE 9 – ASSET-BUILDING CONTEXTS

Context	Mean Score (Pre) Scale: 0 to 30	Mean Score (Post) Scale: 0 to 30	Positive / Negative Change from Pre to Post
Personal	18.8	20.8	↑
Social	19.5	21.9	↑
Family	21.4	24.1	↑
School	21.1	23.0	↑
Community	17.6	20.4	↑

KEY	Challenged (lowest level)	0-14
	Vulnerable	15-20
	Adequate	21-25
	Thriving (highest level)	26-30

In addition to the analysis of the mean, it is telling to compare the differences in Contexts by where youth score in the “Challenged” to “Thriving” spectrum. Chart 5 below illustrates this. According to the Search Institute, it is typical to expect between 5 and 15 percent scoring in the “Challenged” and “Thriving” ranges, while the rest usually fall in the “Vulnerable” and “Adequate” ranges.¹⁴ Therefore the Context categories that differ from these expectations should be noted, and offer some insight to where focused needs or strengths are with the youth participating in, and exiting from, the YPN program. The following points of concern and areas of strength to note can be garnered from Chart 5:

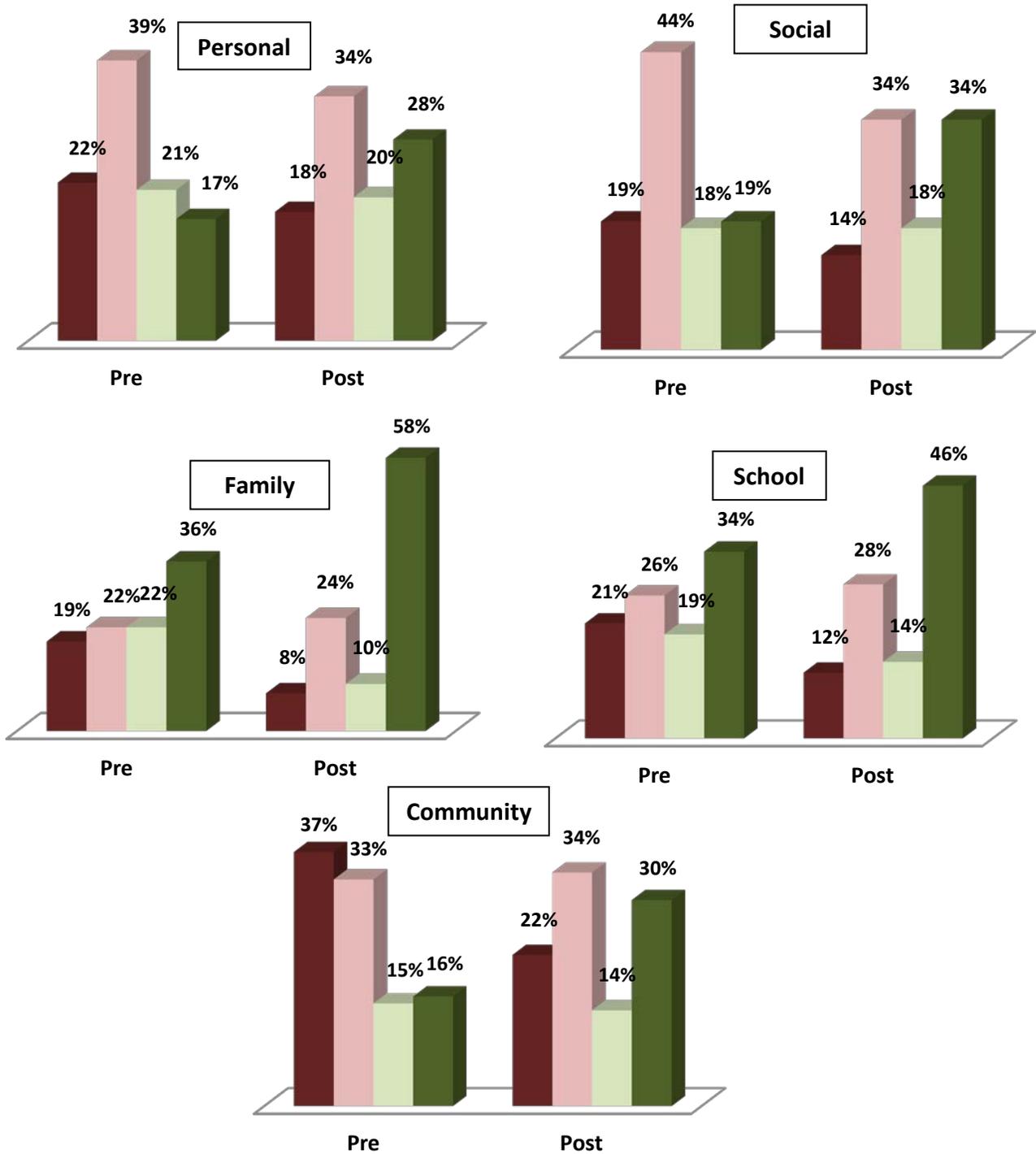
- Post data for Family is very strong and improvement was shown (58% “Thriving”), but the Pre data was also quite strong (36% “Thriving”).
- Post data for School is also very strong and improvement was shown (46% “Thriving”), but the Pre data was also quite strong (34% “Thriving”).
- Post data for Social is quite strong and improvement was shown (34% “Thriving” from 19% “Thriving” for Pre data).
- Pre data for Personal points to an area of concern (22% “Challenged”); Post data shows improvement (28% “Thriving”), but there is still work to be done in this area.
- Pre data for Community points to an area of concern (37% “Challenged”); Post data shows improvement (30% “Thriving”), but there is still work to be done in this area (22% “Challenged”).

¹⁴ Search Institute, 2017. *Strengths and Support in the Lives of Stanislaus County Behavioral Health and Recovery Services Youth Report*.

CHART 5 – ASSET-BUILDING CONTEXTS COMPARISON

**Comparison of
Pre (n=89) and Post (n=50) Percentages
by Asset-Building Contexts**

■ Challenged (0-14) ■ Vulnerable (15-20) ■ Adequate (21-25) ■ Thriving (26-30)



YPN Successes and Challenges

A critical part of the learning in this innovation project was to be gleaned by encouraging the Youth Peer Navigators to reflect on their work, both the successes and the challenges, and to share what they were feeling confident about and the areas in which they were struggling or challenged. This reflection process was considered important for the YPNs to be successful and grow in their peer support roles. It was also important to be able to use this information to improve the program, continuing with what has worked while revising the areas that were not working well.

The YPNs documented this process by journaling. They were then able to review their journal entries with their supervisor and/or the other YPNs in order to obtain guidance and learn how to handle specific and general areas of concern. They were also able to share their successes, documenting what went well in their daily work and longer term work with specific clients. Although this was not an easy process, and proved to be time consuming, it was worthwhile for growth and learning.

Successes

- Building rapport and relationships with clients that lead to trust and sharing.
- Witnessing a client's progress from where he/she initially began the program, and being proud of the client.
- Feeling effective when clients succeeded in reaching a goal, even when it was a small milestone; YPN celebrated their clients' successes with each other:
 - A client starting college
 - A client's grades improving
 - A client's social skills improving
 - A client recognizing that gang life and completing school were not compatible
 - A client who was booked on a violation, but used the experience to start attending all groups, probations meetings, and anything necessary to get out of probation
 - A client who obtained a job

Challenges and Areas of Growth/Learning

- Learning to engage youth who were not able to be engaged by clinical staff; YPNs shared that they learned to work well with clinicians and other behavioral health team members, and grew in their understanding of their role as a member of a team.
- Learning to be patient and support the client wherever he or she may be.
- Discovering that they have a special role in the time they spend with clients.
- Understanding that they are not the only one responsible for the clients' wellbeing – the client, other team members, and other support systems work together.
- Learning not to be afraid to ask for help when needed from others with more experience and different roles (e.g., Mental Health Clinicians).
- Understanding how important keeping promises and showing up are when you say you will be crucial when working with this vulnerable youth population.
- Growing personally and professionally by being responsible for own actions.
- Learning how to keep boundaries with clients.
- Realizing that the vision to “save clients” was not possible; supporting the work the client is doing in his/her recovery is the new vision.
- Learning how to manage time, and that saying “no” sometimes when appropriate is okay.

What was learned?

The learning questions for this Innovation Project and what was learned are summarized below.

1. Are Youth Peer Navigators effective within various mental health settings in engaging youth and their families in navigating the mental health system? Are the navigators more effective in specific settings?

Referrals to the YPN program came from various behavioral health settings, including Juvenile Justice Behavioral Health Program (55%), Family Partnership Center (32%), School Based Services (1%), Child Welfare Program (1%), and both internal and contracted Youth Outpatient Programs (11%). Since the majority of the referrals were from Juvenile Justice, many of the successes are also from the Juvenile Justice system. There is a close partnership between the YPN program and Juvenile Justice Behavioral Health (JJBH), and the program is housed at JJBH next to Juvenile Hall. This allows YPNs more access directly to clients in custody upon their release.

The YPN program has shown effectiveness in all of the behavioral health settings described above, however, there have been an increasing number of referrals from other parts of the Children's System of Care as the successes of the YPN program becomes more widely known. It is expected that this increase will continue, and it is expected that the program will continue to be successful in the various settings. The plan was to review and analyze data to compare results by programs within the CSOC to help determine if there are differences in outcomes between programs. However, as noted in the plan, this comparison is not meaningful due to the small number of youth clients across the programs.

2. Do Youth Peer Navigators help youth connect to natural and community supports?

Clients referred to YPN are already are connected to behavioral health services within the Children's System of Care. The YPN Project mission is to increase access to those services through transportation and support, but also to help the youth clients connect to other natural and community supports.

The YPN have been able to link clients to multiple resources and help clients identify natural supports and resources in their own communities. Through one-on-one interactions, and in partnership with the youth clients, the YPN were able to help youth clients determine what resources were available to them in their natural communities. The interaction with youth clients also allowed YPN to learn more about youth client needs, their goals, the resources they were already utilizing, and the support that they needed.

Part of the process that YPNs have used with clients is goal setting to identify what type of community supports and resources are needed. For example, since one of the protective factors for youth is social connectedness, the community resource used most often by the YPNs is Juvenile Justice's Youth Leadership and Drop-In Center, "The Spot". The Spot is a resource that enjoys high utilization by youth and providers due to its proximity to nearby Probation services and Juvenile Hall. The YPN engaged youth client referrals that were in custody by asking them to come by the Youth Leadership Center upon their release. The YPNs were charged with researching local resources available and how youth could connect to these resources. Once youth clients were connected to needed services, the YPN helped to ensure that transportation was not a barrier and helped provide transportation when needed.

3. Do Youth Peer Navigators contribute to increased protective factors? If so, which protective factors?

The data suggests that the Youth Peer Navigator program did contribute to increased protective factors. These factors include Social Connectedness, Social and Emotional Competence, and Concrete Support in Times of Need. One of the ways that YPN helped increase protective factors is by introducing youth clients to new peers in different settings outside of school. This gave the opportunity for youth clients to interact with peers and spend time in positive youth development programs. YPN have been keenly focused on helping client youth navigate to peer support with other youth who were learning to cope and be more resilient with the goal of increasing protective factors.

The YPN program contributed to increased social and emotional competence by helping clients identify stressors, anxieties, identify positive coping strategies and assisted clients with concrete support in times of need. The YPNs' lived experience helped them identify, and connect easier with the youth. This made mentoring an easier process and allowed the rapport to build. The YPNs also gave the clients positive role models and once rapport was established, someone to help them learn to navigate for themselves.

In addition, as described in the analysis section, the 40 Developmental Assets Profile tool measured key strengths and supports. There were several asset categories that were notably strong after youth participated in the YPN program. These include the external assets of Support and Boundaries & Expectations, as well as the internal assets of Commitment to Learning and Positive Values. For additional details, please see the analysis section, pages 8-21.

4. Do Youth Peer Navigators contribute to the reduction of criminal recidivism?

As described in the analysis section, Youth Peer Navigators have been able to engage this youth population successfully and contribute to the reduction of recidivism for 81% of the youth clients served in the program. The YPN's role of support and mentor seems to resonate with the youth involved with Juvenile Probation. For more details, please see the analysis section, page 8.

5. Do Youth Peer Navigators contribute to the reduction of re-hospitalization?

As described in the analysis section, the number of youth clients referred to the YPN program with recent hospitalizations was 10. Out of the 10 clients, only 3 have been re-hospitalized after working with YPNs and other behavioral health programs. Since most of the clients who have been hospitalized were connected to mental health teams already, the YPNs functioned as part of a support team, and provided an outlet to help the youth de-stress and re-focus on more therapeutic activities after release from the hospital. The data suggests that YPN support has proven effective to help prevent re-hospitalizations, contributing to a 70% success rate.

6. Does age play a role in improved outcomes for youth participating in this project?

Originally the evaluation plan was to review and analyze data to compare results by age of youth clients to determine if there were differences in outcomes by age. Doing this comparison is challenging due to the small number of youth clients in different age ranges.

There were 2 youth clients under the age of 11, 35 youth clients between ages 11-15, and 51 youth clients between the ages of 16-21. There is no evidence to suggest that age was a factor in improved outcomes for youth participating in this program, in fact, clients across all age groups were successful. There is no consistent trend evident to indicate that a particular age group was more successful or had more improvement compared to other age groups.

As the program continued, age was a factor in different approaches YPN utilized to assist youth clients. For example, a younger youth could gain needed socialization skills from attending the Youth Leadership Center accompanied by YPN. An older youth client could gain a more advanced interpersonal communication skills from going to a D.M.V. appointment. In both situations goals could be achieved, experience gained and outcomes improved by the approach and activities adjusted for age appropriateness.

Recommend this Project to Others?

This project is recommended for others to replicate due to the successful outcomes and projected need for such youth support services. Throughout this report, there have been lessons learned and recommendations for minor changes in implementation, supervision, documentation, and support for the Youth Peer Navigators and the program.

Highlights of Lessons Learned During Implementation

Hiring Staff

1. BHRS conducted a careful selection process in hiring the Youth Peer Navigators. The recruitment and hiring process began in July 2015 and concluded in September 2015 with hiring of two part-time Youth Peer Navigators. Candidates were carefully screened, interviewed and the selection process took longer than expected to ensure that YPNs had a strong balance of lived experience and interpersonal skills. In the start-up phase, a central focus was to ensure that the YPNs were well supported, understood assigned tasks and role expectation, and were introduced to BHRS CSOC programs as well as getting skills training. There was a change in program supervision mid-project which was challenging for the YPNs.
2. If this program is to be continued and/or replicated elsewhere, the recommendation is that the type and amount of documentation be balanced against what is necessary for program success. Feedback from YPNs and other program staff indicated that the amount of documentation required during this project may be too burdensome. A shorter version or a less frequent reporting is a possibility. Additionally it is recommended that regularly scheduled supervision and time for reflection for the YPNs is critical for their success and the effectiveness of the program.
3. Through the reflection and evaluation process at the end of the project, it became apparent that YPN had varying experience in relating to clinical/supervision staff. It is recommended that when assembling a team that includes YPN with lived experience clinical staff must regard youth experience and competence as valuable. The ability to be inclusive of diversity, varying backgrounds, as well as individual strengths are also important aspects to think about

when hiring in order to have a team that can relate to and better meet the needs of difficult-to-engage youth. Gender diversity is important as some youth clients will relate more willingly with a person of the same gender.

4. The YPNs shared in post-project debriefing that more clarity and ongoing support is beneficial to understand roles and expectations. It is recommended that the roles and expectations of YPNs be very clear from the beginning and that ongoing support/supervision continue to support and clarify roles/expectations.
5. The YPNs also articulated that additional YPNs were needed. As the program became more known, the demand for the YPN services increased, and there was consistently of list of clients waiting.

Program Structure

6. It is recommended that after hiring staff and before receiving client referrals foundational training be provided to YPNs. For example, YPNs participated in multiple trainings, although not all of the training occurred before the start of program operations. The trainings that the YPNs received throughout the duration of the project are as follows:
 - a. Peer Mentoring Training
 - b. Boundaries, Confidentiality, and HIPAA
 - c. Youth Mental Health First Aid
 - d. Mental Health First Aid
 - e. 40 Developmental Assets Model
 - f. Strength Based Case Management
 - g. Motivational Interviewing
 - h. Electronic Health Record
 - i. CPR/First Aid
 - j. Cultural Competency
 - k. Youth Co-Occurring Mental Health and Substance Use
 - l. Understand and Address Self Harm
 - m. Law and Ethics
 - n. WISE Peer Support 101
 - o. A.R.T. (Aggression Replacement Training)
 - p. Outdoor Youth Connection
 - q. Mentoring Summit

Although the volume of trainings may seem large, it is essential to keep in mind that the YPNs are young and most likely do not have advanced education or experience in the behavioral health field.

In post-project focus groups the YPNs indicated these trainings were very meaningful and helpful in their work. In fact, during the focus groups, all of the YPNs indicated that they desired more training in behavioral health and the 40 Developmental Assets. Additionally, the YPNs expressed a need have more training about what is available in behavioral health programs and services in the throughout BHRS and the community.

Documents/Documentation

7. It is recommended that attention be given to creating documents and protocols related to the required documentation before the program begins and be open to revision as the learning project data is collected and interpreted. Additionally, whenever possible, documentation and data gathering tools must be simple, easily understood, and useful to the YPNs and their supervisors.

Continue the Project Under a Different Funding Source?

The youth referred to the YPN program are some of the most difficult to engage youth in the behavioral health system. The value of the YPN with lived experience, closer in age to youth clients, and able to engage youth clients more easily is an invaluable resource to the behavioral health system. The YPN component of the Children's System of Care runs parallel to clinical services, and since they engage clients differently, many times over the course of the innovation project it helped avert incarcerations, hospitalizations, and other intensive forms of care. This is considered to be a cost effective way of supporting youth in treatment.

The successful outcomes and ongoing need for this program was discussed with MHSA stakeholders in April 2017 with a proposal that the YPN be continued with MHSA Community Services and Supports (CSS) funds in FY17-18 following the completion of the innovation-funded project. MHSA stakeholder support for continuation funding for Youth Peer Navigators was unanimously supported and the program will be funded with Community Services and Support General Systems Development funds on an ongoing basis.

Materials Developed to Communicate Lessons Learned and Project Results

This report will be posted at www.stanislausmhsa.com. No other reports, manuals, or materials were developed.

Youth Peer Navigator (INN SU-3807) Weekly Navigation Form

Name: <input style="width: 80%;" type="text"/>	Week of: <input style="width: 80%;" type="text"/>
DOB: <input style="width: 80%;" type="text"/>	Staff Provider Name: <input style="width: 80%;" type="text"/>
Case #: <input style="width: 80%;" type="text"/>	

1. Referral made to BHRS mental health (MH) treatment services or BHRS substance use disorder (SUD) treatment services (only programs with a treatment sub-unit).

Type	Sub-unit (SU) #	Successful Linkage (✓)	Results Code(s)	Result Codes
<input type="checkbox"/> MH	<input style="width: 80%;" type="text"/>	<input type="checkbox"/>	<input style="width: 80%;" type="text"/>	1. Open to the treatment program 2. Not open - program full 3. Not open - did not meet eligibility requirements 4. Not open - refused to participate 5. Unknown result
<input type="checkbox"/> SUD	<input style="width: 80%;" type="text"/>	<input type="checkbox"/>	<input style="width: 80%;" type="text"/>	

2. Other referrals made (check as many as apply):

Type	Referral Code(s)	Follow-Up Date(s)	Follow-Up Outcome Code(s)	Follow-Up Outcome Codes
<input type="checkbox"/> Community MH	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	1. Could not contact 2. Did not follow through 3. Appointment made 4. Engaged at least once 5. No program openings 6. No program available
<input type="checkbox"/> Community Resources	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
<input type="checkbox"/> Healthcare	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
<input type="checkbox"/> Employment	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
<input type="checkbox"/> Shelter / Housing	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
<input type="checkbox"/> SUD Services	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
<input type="checkbox"/> Other:	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	

3. Readiness Level (check one / refer to MHRIS):



4. Reason for closing:

Still Open:

- Client reached goals¹
- Client terminated services before reaching goals, **with** satisfactory progression²
- Client terminated services before reaching goals, **without** satisfactory progression³
- Client open to treatment⁴
- Client relocated **with** satisfactory progress⁵
- Client relocated **without** satisfactory progress⁶
- Client was never engaged⁷

¹ Youth has successfully completed services and has met the major goals set or received necessary/requested services.

² Youth did not complete the program, but was in the program long enough to have made significant progress towards achieving goals or receiving necessary/requested services.

³ Youth dropped out of services without making progress towards goals or receiving necessary/requested services.

⁴ Youth was open to Mental Health Services.

⁵ Youth moved out of county, but was in the program long enough to have made significant progress towards achieving goals or receiving necessary/requested services.

⁶ Youth moved out of county and did not make progress towards goals or receive necessary/requested services.

⁷ Client was open to the program, but decided not to participate and was closed without any services.

Attachment #1 (continued)

Referral Codes (Indirect Service Codes 501-512)			
	Mental Health Service		SUD Services
1	Josie's Place	1	Alcoholic Anonymous (AA) /Narcotic Anonymous (NA)
2	Parent Resource Center	2	Last Resort
3	Center for Human Services (CHS)	3	Juvenile Drug Court (JDC)
4	Sierra Vista	4	Steps to Freedom
5	El Concilio	5	Center For Human Services (SUDTY)
6	Aspiranet	6	Celebrate Recovery
7	The Bridge		
8	Turning Point Empowerment Center-MH		
9	Behavioral Health Recovery Services (BHRS)		
10	Juvenile Justice (BHRS)		
		50	Other
50	Other		
	Healthcare		Employment Services
1	Aspen Medical	1	Alliance Network
2	Golden Valley	2	BHRS Employment
3	Health Services Agency (HSA)	3	Empowerment Center-Employment
50	Other	4	Project Y.E.S. (Youth Employment Services)
	Shelter and Housing	50	Other
1	Hutton House (CHS)		Community Resources
2	Community Housing and Shelter Services	1	Red Shield
3	Gospel Mission	2	Police Activities League (P.A.L)
4	Salvation Army Shelter	3	Maddux Center
5	Pathways (CHS)	4	West Modesto King Kennedy Community Center
6	BHRS Housing	5	Boys & Girls Clubs of Stanislaus County
		6	Patterson Teen Center
		7	Grayson Community Center
		8	Faith Based Organizations
50	Other	9	Stanislaus County Office of Education (S.C.O.E.)
		10	Comeback Kids
		11	Promotores
		12	DMV, Social Security, Birth Certificate
		13	Immigration Support Services
		14	Social Services
		50	Other

**Youth Peer Navigation
Weekly Journal**

Name: Choose Date Format.

Successes:

-
-
-
-

Challenges:

-
-
-
-

Areas of Improvement:

-
-
-
-

Milestone(s) / Goal(s) Reached:

-
-
-
-

Additional Information / Other Comments:

DEVELOPMENTAL ASSETS PROFILE

Self-Report for Ages 11-18

NAME / ID: _____ TODAY'S DATE: Mo: _____ Day: _____ Yr: _____
 SEX: Male Female AGE: _____ GRADE: _____ BIRTH DATE: Mo: _____ Day: _____ Yr: _____
 RACE/ETHNICITY (Check all that apply): American Indian or Alaska Native Asian
 Black or African American Hispanic or Latino/Latina Native Hawaiian or Other Pacific Islander
 White Other (please specify): _____

INSTRUCTIONS: Below is a list of positive things that you might have in *yourself, your family, friends, neighborhood, school, and community*. For each item that describes you now or within the past 3 months, check if the item is true:

Not At All or Rarely Somewhat or Sometimes Very or Often Extremely or Almost Always

If you do not want to answer an item, leave it blank. But please try to answer all items as best you can.

Not At All or Rarely Somewhat or Sometimes Very or Often Extremely or Almost Always

I . . .

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Stand up for what I believe in. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Feel in control of my life and future. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Feel good about myself. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Avoid things that are dangerous or unhealthy. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Enjoy reading or being read to. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Build friendships with other people. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Care about school. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Do my homework. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Stay away from tobacco, alcohol, and other drugs. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Enjoy learning. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Express my feelings in proper ways. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Feel good about my future. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13. Seek advice from my parents. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Deal with frustration in positive ways. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Overcome challenges in positive ways. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Think it is important to help other people. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Feel safe and secure at home. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Plan ahead and make good choices. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Resist bad influences. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. Resolve conflicts without anyone getting hurt. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. Feel valued and appreciated by others. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 22. Take responsibility for what I do. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 23. Tell the truth even when it is not easy. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 24. Accept people who are different from me. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 25. Feel safe at school. |

PLEASE TURN OVER AND COMPLETE THE BACK.

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Attachment #3 (Continued)

Note: The term "Parent(s)" means 1 or more adults who are responsible for raising you.

Not At All or Rarely Somewhat or Sometimes Very or Often Extremely or Almost Always

I AM . . .

- 26. Actively engaged in learning new things.
- 27. Developing a sense of purpose in my life.
- 28. Encouraged to try things that might be good for me.
- 29. Included in family tasks and decisions.
- 30. Helping to make my community a better place.
- 31. Involved in a religious group or activity.
- 32. Developing good health habits.
- 33. Encouraged to help others.
- 34. Involved in a sport, club, or other group.
- 35. Trying to help solve social problems.
- 36. Given useful roles and responsibilities.
- 37. Developing respect for other people.
- 38. Eager to do well in school and other activities.
- 39. Sensitive to the needs and feelings of others.
- 40. Involved in creative things such as music, theater, or art.
- 41. Serving others in my community.
- 42. Spending quality time at home with my parent(s).

I HAVE . . .

- 43. Friends who set good examples for me.
- 44. A school that gives students clear rules.
- 45. Adults who are good role models for me.
- 46. A safe neighborhood.
- 47. Parent(s) who try to help me succeed.
- 48. Good neighbors who care about me.
- 49. A school that cares about kids and encourages them.
- 50. Teachers who urge me to develop and achieve.
- 51. Support from adults other than my parents.
- 52. A family that provides me with clear rules.
- 53. Parent(s) who urge me to do well in school.
- 54. A family that gives me love and support.
- 55. Neighbors who help watch out for me.
- 56. Parent(s) who are good at talking with me about things.
- 57. A school that enforces rules fairly.
- 58. A family that knows where I am and what I am doing.

THANK YOU FOR COMPLETING THIS FORM.

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Attachment #4

PROGRAM QUALITY

The next sets of questions are about your participation in [PROGRAM]. Some questions are about the staff (the adults leading the program, these may be teachers, parents, or other adults) and others are about your experience with the program.

The program leader will NEVER see your individual answers. Please answer honestly.

How much do you agree or disagree with the following?	Strongly Disagree	Disagree	Somewhat Disagree/Somewhat Agree	Agree	Strongly Agree
1. Staff really knows what they are doing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Staff are ready to go when our time together starts.					
3. There is at least one staff member I can talk to if I have a problem.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The staff lay out clear plans for what we are going to do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The staff in this program show that they enjoy working with young people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. We start and end on time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. The staff make sure we follow the rules all of the time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Rules are enforced fairly for everyone.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. The staff respect me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I feel like an important part of this program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I can be myself at this program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I am proud to be part of this program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. The staff makes sure my parents know what we are doing in the program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. This program tries to involve my family, in some activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. This program helps me see how what I learn in school is useful in life outside of school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When you spend time in this program, how often are you...	Never	Rarely	Sometimes	Often	Very Often
16. Encouraged to stay away from alcohol, tobacco, and other drugs?	<input type="checkbox"/>				
17. Learning how to cooperate with others?	<input type="checkbox"/>				
18. Encouraged to work hard at school?	<input type="checkbox"/>				
19. Given chances to be a leader?	<input type="checkbox"/>				
20. Learning how to solve personal life problems?	<input type="checkbox"/>				
21. Encouraged to do things to help others?	<input type="checkbox"/>				

Attachment #4 (Continued)

How often in this program...	Never	Rarely	Sometimes	Often	Very Often
22. Are you bored?	<input type="checkbox"/>				
23. Are you having fun?	<input type="checkbox"/>				
24. Do you wish you could stay longer?	<input type="checkbox"/>				
25. Do you make new friends?	<input type="checkbox"/>				

How often in this program do the other kids...	Never	Rarely	Sometimes	Often	Very Often
26. Seem to be bored?	<input type="checkbox"/>				
27. Seem to be having fun?	<input type="checkbox"/>				

How often do each of these people help or encourage you to develop your interests and talents?	Never	Rarely	Sometimes	Often	Very Often
28. Staff of this program	<input type="checkbox"/>				
29. Other young people in this program	<input type="checkbox"/>				

When you spend time in this program, how often do you . . .	Never	Rarely	Sometimes	Often	Very Often
30. Do something you are passionate about and that gives you joy and energy?	<input type="checkbox"/>				
31. Feel safe from someone hurting you by being mean	<input type="checkbox"/>				
32. Learn skills that you can use in a future job?	<input type="checkbox"/>				
33. Develop good relationships with kids your age?	<input type="checkbox"/>				
34. Learn skills like teamwork, leadership, or how to resolve conflicts peacefully?	<input type="checkbox"/>				
35. Help make decisions?	<input type="checkbox"/>				
36. Feel safe from someone hurting you physically	<input type="checkbox"/>				
37. Develop good relationships with adults?	<input type="checkbox"/>				

38. How long have you been participating in this program?	Less than a month	Between 1-3 months	Between 4-6 months	More than 6 months, but less than a year	More than a year
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

39. In an average week, how many days do you participate in this program?	0 days	1 day	2-3 days	4-5 days	6-7 days
	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

40. Do you participate in other programs like this one? That is, programs where you do things like sports, arts, or learn new things?	
No, I only participate in this program	<input type="checkbox"/>
Yes, I participate in other programs like this 1-2 days per week	<input type="checkbox"/>
Yes, I participate in other programs like this 3 or more days per week	<input type="checkbox"/>



40 Developmental Assets®

Search Institute™ has identified the following building blocks of healthy development that help young people grow up healthy, caring, and responsible.



Category	Asset Name and Definition	
External Assets	Support <ol style="list-style-type: none"> 1. Family Support-Family life provides high levels of love and support. 2. Positive Family Communication-Young person and her or his parent(s) communicate positively, and young person is willing to seek advice and counsel from parents. 3. Other Adult Relationships-Young person receives support from three or more nonparent adults. 4. Caring Neighborhood-Young person experiences caring neighbors. 5. Caring School Climate-School provides a caring, encouraging environment. 6. Parent Involvement in Schooling-Parent(s) are actively involved in helping young person succeed in school. 	
	Empowerment <ol style="list-style-type: none"> 7. Community Values Youth-Young person perceives that adults in the community value youth. 8. Youth as Resources-Young people are given useful roles in the community. 9. Service to Others-Young person serves in the community one hour or more per week. 10. Safety-Young person feels safe at home, school, and in the neighborhood. 	
	Boundaries & Expectations <ol style="list-style-type: none"> 11. Family Boundaries-Family has clear rules and consequences and monitors the young person's whereabouts. 12. School Boundaries-School provides clear rules and consequences. 13. Neighborhood Boundaries-Neighbors take responsibility for monitoring young people's behavior. 14. Adult Role Models-Parent(s) and other adults model positive, responsible behavior. 15. Positive Peer Influence-Young person's best friends model responsible behavior. 16. High Expectations-Both parent(s) and teachers encourage the young person to do well. 	
	Constructive Use of Time <ol style="list-style-type: none"> 17. Creative Activities-Young person spends three or more hours per week in lessons or practice in music, theater, or other arts. 18. Youth Programs-Young person spends three or more hours per week in sports, clubs, or organizations at school and/or in the community. 19. Religious Community-Young person spends one or more hours per week in activities in a religious institution. 20. Time at Home-Young person is out with friends "with nothing special to do" two or fewer nights per week. 	
	Internal Assets	Commitment to Learning <ol style="list-style-type: none"> 21. Achievement Motivation-Young person is motivated to do well in school. 22. School Engagement-Young person is actively engaged in learning. 23. Homework-Young person reports doing at least one hour of homework every school day. 24. Bonding to School-Young person cares about her or his school. 25. Reading for Pleasure-Young person reads for pleasure three or more hours per week.
		Positive Values <ol style="list-style-type: none"> 26. Caring-Young person places high value on helping other people. 27. Equality and Social Justice-Young person places high value on promoting equality and reducing hunger and poverty. 28. Integrity-Young person acts on convictions and stands up for her or his beliefs. 29. Honesty-Young person "tells the truth even when it is not easy." 30. Responsibility-Young person accepts and takes personal responsibility. 31. Restraint-Young person believes it is important not to be sexually active or to use alcohol or other drugs.
		Social Competencies <ol style="list-style-type: none"> 32. Planning and Decision Making-Young person knows how to plan ahead and make choices. 33. Interpersonal Competence-Young person has empathy, sensitivity, and friendship skills. 34. Cultural Competence-Young person has knowledge of and comfort with people of different cultural /racial/ethnic backgrounds. 35. Resistance Skills-Young person can resist negative peer pressure and dangerous situations. 36. Peaceful Conflict Resolution-Young person seeks to resolve conflict nonviolently.
		Positive Identity <ol style="list-style-type: none"> 37. Personal Power-Young person feels he or she has control over "things that happen to me." 38. Self-Esteem-Young person reports having a high self-esteem. 39. Sense of Purpose-Young person reports that "my life has a purpose." 40. Positive View of Personal Future-Young person is optimistic about her or his personal future.

FIVE CONTEXTS FOR BUILDING DEVELOPMENTAL ASSETS

Context	Description	Examples of These Assets*
Personal assets	Internal strengths that shape the character of young people, including their self-concept, values, attitudes, and capabilities.	<ul style="list-style-type: none"> • Honesty • Restraint • Planning and decision making • A sense of purpose
Social assets	Social assets are experienced through personal relationships with others, particularly their friends.	<ul style="list-style-type: none"> • Peaceful conflict resolution • Positive peer influence • Interpersonal competence • Other adult relationships
Family assets	Assets experienced in the family	<ul style="list-style-type: none"> • Family support • Positive family communication • Useful roles in the family • Family boundaries
School assets	Assets experienced in school	<ul style="list-style-type: none"> • Achievement motivation • School engagement • Caring school climate • School boundaries
Community assets	Assets experienced in community settings other than school	<ul style="list-style-type: none"> • Community values youth • Youth programs • Religious community • Caring neighborhood