

Ohio Youth in Transition
Alumni Support & Assistance Project (ASAP)

Research Protocol

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Objectives

The aims of this 12-month pilot study include:

1. To implement an “aftercare” intervention for youth in Columbus who are transitioning to/through early adulthood (defined here as ages 18-26) with minimal support from their birth parents.
2. To identify life goals among youth participants, particularly concerning education and employment.
3. To determine the best means of maintaining contact with youth participants following discharge from respective “emancipation” treatment programs.
4. To assess participants’ satisfaction with the intervention and functional outcomes periodically throughout the study period.

Background and Rationale

Youth in Transition

The term “youth in transition” refers to young adults who are entering early adulthood with minimal levels of support typically provided by birth or adoptive parents or kinship caregivers. These include youth aging-out of foster care, formerly homeless and runaway youth, and victims of human trafficking. Also included are many prospective first generation college youth living in poverty, and other “systems-involved” youth with active mental health/substance abuse problems and delinquent youth who are estranged from their birth or adoptive parents or kinship caregivers.

Lacking conventional financial, housing, emotional, and advising support of parents (Schoeni & Ross, 2004), young adults in their late teens through mid to late twenties are at-risk of 1) dropping-out of high school, 2) never attending or dropping-out of college, 3) birthing children outside of marriage, 4) being unemployed or working low-wage, “dead-end” jobs, 5) experiencing homelessness, and 6) becoming incarcerated (due often to illegal income-earning activities such as prostitution, theft, burglary, and drug dealing) (Collins, 2001; Courtney et al., 2007; Fernandes, 2008).

In contrast to the large number of services and programs for needy and at-risk minors and their families – especially for those involved in the child welfare, mental health, or juvenile justice systems – relatively little assistance and support is available after these youth “age-out” of care,

which generally occurs sometime between the ages of 18 and 21. For example, in 2008, Franklin County Children Services (FCCS) – the child welfare system serving Columbus, Ohio – spent over \$159 million on services for minors and their families, in contrast to less than \$8 million spent on services for emancipating foster youth (FCCS, 2008). Thus, in most cases and public systems of care, minors (and their families) receive a lot of support. They are then “weaned-off” this relatively high level of support between their 18th and 21st birthdays, and these young adults are then expected to “fend for themselves” thereafter, with little to no public support.

Most available services for youth in transition are delivered by local, non-profit youth-serving agencies under contract. For example, in 2008, FCCS contracted with 80 agencies to deliver child welfare services, totaling over \$101 million, or over 60% of its annual operating budget (FCCS, 2008). These agency providers typically fund their programs and services through contracts with multiple public systems of care, in addition to foundation and grant support, and donations from individuals.

In summary, most youth transition out of care and onto life on their own from youth-serving agencies and programs funded by one or more public systems of care, with rapidly diminishing levels of public support and assistance.

Alumni Support and Assistance Project (ASAP)

To assist youth in transition in Ohio, Assistant Professor Alvin Mares (College of Social Work, Ohio State University) created the Ohio Youth in Transition Alumni Support and Assistance Project (ASAP) in January 2009, in Columbus, in collaboration with two youth-serving agencies, local counselor education professionals, and interested faculty, staff, and students within the College of Social Work and individuals within the community.

The two youth-serving agencies included: 1) Coalition on Homelessness and Housing in Ohio (COHHIO) Youth Empowerment Program (YEP), a youth homelessness advocacy program; and, 2) Rahab’s Hideaway, a shelter for victims of human trafficking. Two foster youth-serving agencies, Starr Commonwealth and ViaQuest Behavioral Health, expressed interest, but were unable to participate in the ASAP pilot project during the first nine months of operation (i.e., January through September, 2009).

Dr. Tim Conrad, a counseling education clinician and Dublin City Schools employee-turned-administrator of 30+ years experience, and Ms. Lisa Dickson, a former foster youth, reference librarian with Columbus Metropolitan Library (by day) and leading advocate for foster youth within Ohio, including founding the Ohio Chapter of Foster Care Alumni of America (FCAA) (by night and on weekends), serve as co-facilitators for ASAP, with Dr. Mares.

The intended purpose of ASAP is to develop a model of aftercare for youth in transition in Ohio, which is 1) low-cost, 2) agency-based, 3) solution-focused, 4) education and employment-oriented, and 5) replicable.

Low-cost

Given the limited public and foundation resources available to fund on-going operation of aftercare programs and services for youth in transition, and likely reductions to such funding sources during current and future economic downturns, it is essential for ASAP to be low-cost to make development and maintenance feasible. Costs will be minimized by maximizing the use of volunteers, including youth served who will hopefully return to assist future youth in transition. Also, information, referral and linkage to existing services in the local community will be the focus of ASAP, rather than on creating new or expanded programming which would require additional resources not currently available.

Agency-based

Most youth in transition leave care and are “launched” into independence from some youth-serving agency. Such “agencies” may include a custodial agency which either houses or monitors the housing of youth in out-of-home placements (e.g., Starr Commonwealth, The Buckeye Ranch); homeless youth advocacy programs (e.g., COHHIO YEP) and youth services programs (e.g., Huckleberry House); programs serving victims of human trafficking (e.g., Rahab’s Hideaway, Salvation Army/Central Ohio Rescue and Restore Coalition); and, high schools/GED programs (e.g., Franklin Heights High School, Buckeye Ranch Cross Creek School).

Solution-focused

A solution-focused approach (Gingerich & Eisengart, 2000; deShazer & Berg, 1997; deShazer & Dolan, 2007; Campbell et al., 1999) was chosen to guide the ASAP intervention for several reasons. First, there exists a considerable evidence base for it in the published literature demonstrating both its effectiveness and application to a wide range of populations, including those closely related to youth in transition (e.g., adolescents, formerly homeless young adults). Next, solution-focused techniques are relatively simple, in comparison to more advanced clinical approaches taught in Master’s and Doctoral level courses in psychology, counselor education, social work, and related fields, to be taught to former youth in transition, college students, and interested adults within the community. Third, solution-focused interventions have been applied both to individual and group work therapeutic processes employed within ASAP. Moreover, there is an existing fidelity measure and various “scripts” available to aid those assisting youth served by ASAP to provide a reasonably good chance of maintaining fidelity to the solution-focused therapeutic approach. Fifth, the brief or time-limited nature of solution-focused therapy may be well-suited to youth in transition – a relatively fluid and dynamic population which may not be willing or able to commit to a longer, more rigorous and extensive course of therapy. Six, the emphasis placed on existing strengths is common within social work practice. Finally, de-emphasized concepts of pathology and clinical diagnoses, are likely to be more attractive to middle to higher-level functioning youth in transition as a low-intensity, “step-down” level of aftercare assistance and support.

Education and employment-oriented

In working with youth during the first nine months of the ASAP pilot in Columbus, two areas which youth were most interested in receiving assistance and support were education and employment. Fortunately, these are among the two areas in which existing local aftercare services are most available. Thus, it is our hope to be able to assist youth in transition to access

available secondary education resources provided through the Ohio Department of Education, Columbus Public Schools and other local school districts; to post-secondary education resources offered through the US Department of Education, the Ohio Board of Regents, Columbus State Community College, and other institutions of higher learning; and, to employment training and placement services funded by the Workforce Investment Act and administered by the “one-stop” assistance center serving Franklin County. Local and national service opportunities offered through AmeriCorps will also be explored as one type of employment-training related resources. In all of these areas, ASAP youth will be encouraged to seek opportunities of interest that are likely to promote their longer-term vocational and career interests.

Replicable

It is our vision and dream to first develop an affordable, effective aftercare model of assistance and support for youth in transition in Columbus/Central Ohio, and then to replicate this model in other cities and regions around the state in the years to follow. Thus, the name of the project, “Ohio Youth in Transition”, reflects our statewide vision for the project.

To this end, considerable effort and attention will be placed on documenting the delivery of the three major elements of the ASAP intervention, and on revising any/all of these elements over time, including: 1) weekly individual sessions; 2) monthly group sessions at each agency; and, 3) quarterly “all agencies” group sessions at OSU. A brief description of each of these intervention elements follows below:

Weekly individual sessions

During the first 9 months of our preliminary service project work (i.e., from January through September 2009), we discovered that youth in transition are reluctant to reach-out to supportive professional adults for assistance. Simply put, regardless of how welcoming the adult is or how badly assistance is needed, youth in transition will not take the initiative in contacting supportive adults for assistance. They are, however, willing and eager to have a supportive adult take the initiative in contacting them regularly to see how they are doing and to help them, as-needed.

So, beginning in January 2010, a college student “case manager/life coach” (Samantha Satchell) who has been trained in solution-focused principles and techniques and who will be supervised by a licensed independent social worker supervisor (i.e., an LISW-S) with 27 years of direct practice, supervision, and administrative experience in a leading foster youth-serving agency in town (Julie Mong), will contact each ASAP youth weekly to monitor their well-being and functional outcomes, and to offer assistance and support as-needed.

Monthly group sessions

Each month ASAP co-facilitators – Dr. Mares, Dr. Conrad, or Ms. Dickson – will co-facilitate a solution-focused group on-site at each participating youth-serving agency with ASAP youth and agency staff. These monthly group meetings will last an hour, be regularly scheduled on a mutually agreeable day/time (e.g., 3rd Wednesday of the month, from 4:00-5:00 p.m.), and will be generally structured as follows:

Time	Tasks
4:00 – 4:10 p.m.	<ul style="list-style-type: none"> • Welcome and self-introduction(s) by group facilitators • Review of group rules • Review of SFT tenets and techniques
4:10 – 4:40 p.m.	<ul style="list-style-type: none"> • Youth share advances/joys and setbacks/frustrations pertaining to their own educational and employment goals and from homework/experiments from current month
4:40 – 4:50 p.m.	<ul style="list-style-type: none"> • Summary of homework/experiments for month ahead
4:50 – 5:00 p.m.	<ul style="list-style-type: none"> • Celebration of special events (e.g., birthdays, graduations, starting new job, acceptance into program, receipt of scholarship, start or transfer to new college)

Quarterly “all agencies” sessions

Those youth and supportive adults involved in ASAP will meet quarterly at OSU for a 3-hour meeting consisting of a one-hour psycho-educational presentation during the first hour by an expert from the community on some educational or employment-related topic of interest to the youth. During the second hour, youth and adult supporters will meet separately for “break-out sessions” focusing on peer-sharing, learning, and discussion. During the third hour of the meeting, adult supporters and youth will re-convene, report back on issues discussed and recommendations made during the break-out session. Next steps will be discussed, including agenda-setting for the quarterly meeting to follow. The last 30-40 minutes of the meeting will be reserved for lunch and networking.

Outcomes

ASAP youth outcomes will be measured both subjectively and objectively. Subjective satisfaction with weekly well-being check discussions with their case manager during the previous 3 months will be evaluated quarterly (seasonally) using the Client Rating of "Well-being" Discussions with Case Manager Form.

Objective measures of client functioning will be assessed at intake (i.e., entry into ASAP), quarterly thereafter, and at discharge (i.e., exit from program) using the Functional Outcomes Assessment Form. The twelve functional outcomes assessed are based upon those specified in the National Youth in Transition Database (NYTD, the latest set of data collection regulations issued to states by the US Department of Health and Human Services Administration for Children and Families (ACF) as part of the Chafee Foster Care Independence Program (CFCIP) (ACF, 2008).

Procedures

Research Design

A survey research design will be used to document the implementation of the ASAP intervention, to identify participants' life goals, to determine the best means of maintaining contact with participants, and to assess participant outcomes throughout the study period.

Sample

A maximum of 20 young adults, ages 18-26, will be referred to ASAP by staff from four youth-serving agencies/programs in Columbus. These agencies include: 1) Starr Commonwealth MyPlace Independent Living Program; 2) ViaQuest Behavioral Health Independent Living Program; 3) Coalition on Homelessness and Housing in Ohio Youth Empowerment Program (COHHIO YEP); and, 4) Rahab's Hideaway.

These young adults will be actively preparing for self-sufficiency, interested in participating in ASAP, and clinically appropriate for the ASAP intervention (as assessed by agency/program staff who are familiar with their clients' needs, interests, and levels of functioning).

Measurement / Instrumentation

A total of twelve brief (1-page) data collection forms will be used. These forms are briefly described in the data collection summary table below:

	Form name and description	Completed by...	Purpose/Aim
1	Client Goals and Deadlines Worksheet	Case manager (CM) and youth together during the first or second session, identifying educational, employment, and other goals identified by the youth for the 3 months to follow. Updated quarterly thereafter.	Identify life goals
2	Weekly Schedule	CM and youth together during the first, second, or third session, identifying his/her daily schedule on a typical week, including time spent attending school, working, and other activities related to identified goals.	Monitor implementation of ASAP intervention
3	Case Management Contact Log	CM near end of each quarter, documenting number and types of contact with each youth on his/her ASAP "caseload" during the previous 3 months. Reviewed with supervisor during weekly supervision.	Determine best means of maintaining contact

4	Solution-Focused Fidelity Self Checklist	CM after each “well-being” check-in session with each youth (generally weekly), identifying which SFT techniques were used during each session. Reviewed with supervisor during weekly supervision.	Monitor implementation of ASAP intervention
5	Supervisor Rating of Solution-Focused Fidelity	CM’s supervisor near end of each quarter, rating the overall SFT fidelity practiced by the CM during the previous 3 months.	Monitor implementation of ASAP intervention
6	Small Group Meeting Attendance Log	Group facilitator (i.e., Dr. Mares, Dr. Conrad, or Ms. Dickson) during each small group session (generally monthly).	Monitor implementation of ASAP intervention
7	Large Group Meeting or Special Event Attendance Log	Group facilitator (i.e., Dr. Mares, Dr. Conrad, or Ms. Dickson) during each large group session or special event (generally quarterly).	Monitor implementation of ASAP intervention
8	Client Rating of Individual Contact with Case Manager	Participants and collected by Dr. Mares during quarterly large group meetings	Assess participant satisfaction
9	Client Rating of Individual Contact with Case Manager	Participants and collected by Dr. Mares during quarterly large group meetings	Assess participant satisfaction
10	Client Rating of Small Group Meetings	Participants and collected by Dr. Mares during quarterly large group meetings	Assess participant satisfaction
11	Client Rating of Large Group Meeting or Special Event	Participants and collected by Dr. Mares during quarterly large group meetings	Assess participant satisfaction
12	Functional Outcomes Assessment	CM at baseline (within 2 mos. of entering ASAP), quarterly thereafter, and at discharge from ASAP	Assess participant functional outcomes

A copy of each of these forms is included at the end of this research protocol.

Detailed Study Procedures

Participants will be referred to ASAP by youth-serving agency staff. They will then be invited by Dr. Mares to have their data included (in aggregated form) in the research component of the project to share what is learned from the pilot with the scientific community and with service providers and policy makers. ASAP participants will then begin receiving weekly contacts by the BSSW student case manager (Sam Satchell), and be invited to participate in monthly solution-focused support group meetings at the referring agency and quarterly psycho-educational group meetings with ASAP youth and staff from all four youth-serving agencies at the OSU College of Social Work (Stillman Hall). Forms will be completed by the case manager, her case management supervisor (Julie Mong), and group facilitators (Drs. Mares and Conrad, and Ms. Dickson) for all ASAP participants throughout the 12-month pilot project. The data for

those participants volunteering to participate in the research study will then be aggregated and reported at scientific conferences and as scientific manuscripts for publication. Thus, the study procedures for those participating in the research aspect of the study will be the same as for those not participating; namely, the routine collection of ASAP intervention implementation monitoring, goals identification, satisfaction, and functional outcomes data. Whereas only the data from research subject participants will be reported publically, in aggregated form.

Internal Validity

The psychometric properties of the twelve data collection instruments is unknown. However, the face validity of the first eight instruments, which were developed by Dr. Mares specifically for this pilot study, appears to be high. Moreover, the three participant satisfaction outcome measures were adapted from an existing instrument, the Session Rating Scale, developed by Miller and colleagues (2002) at the Institute for the Study of Therapeutic Change. Finally, the functional assessment form items are based upon those specified in the National Youth in Transition Database (NYTD), the latest set of data collection regulations issued to states by the US Department of Health and Human Services Administration for Children and Families (ACF) as part of the Chafee Foster Care Independence Program (CFCIP) (ACF, 2008).

Data Analysis

The exploratory data collected in this pilot study will be examined primarily using descriptive statistics (i.e., ranges, frequencies, percentages, means, and standard deviations). Bivariate statistics may also be used to compare types of life goals identified, implementation of the intervention, means of maintaining contact, and participant outcomes between demographic characteristic sub-groups (e.g., males vs. females, younger vs. older, Caucasian vs. minority). Only aggregated overall (total sample) and sub-group analyses will be included in reports of the data collected in this pilot study.

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