

# **YOUTH ADVOCATE PROGRAMME EVALUATION REPORT**

**April 2004**



**Child & Family Research And Policy Unit**

**Report Prepared by  
Maeve O'Brien (M.Soc.Sc) with John Canavan (MA)**

## **ACKNOWLEDGEMENTS**

The WHB / NUI, Galway Child and Family Research and Policy Unit would like to thank Mr. Mark Kane, YAP Programme Manager, and the entire YAP team who were very supportive and co-operative throughout the evaluation. Thank you to all of the individuals from services working in the region who participated in the evaluation and most particularly, thanks to all the young people and families who were involved. The researchers would also like to thank Professor Chris Curtin of the Department of Political Science and Sociology, NUI Galway, who provided invaluable insight and guidance throughout the process.

## CONTENTS OF REPORT

<b>CHAPTER 1</b>	<b>INTRODUCTION</b>	
1.1	The Problem.....	6
1.2	The Youth Advocate Programme (YAP).....	6
1.3	YAP Evaluation.....	7
1.4	Evaluation Methodology.....	8
1.5	Report Structure.....	9
1.6	Evaluation Implementation.....	9
<b>CHAPTER 2</b>	<b>PUTTING YAP IN CONTEXT</b>	
2.1	Introduction.....	10
2.2	Policy approaches to juvenile justice.....	10
2.3	Research literature on risk factors and effective intervention..	12
2.4	Current Irish Interventions and local WHB services context..	14
2.5	YAP model in context.....	17
<b>CHAPTER 3</b>	<b>WHB AND YAP PARTNERSHIP</b>	
3.1	Introduction.....	22
3.2	Programme staff.....	23
3.3	Recruitment process and training.....	27
3.4	Monitoring, supervision and case management.....	29
3.5	Implementation group.....	29
3.6	Changes and developments.....	30
3.7	Funding.....	30
	Summary.....	31
<b>CHAPTER 4</b>	<b>PROFILE OF SERVICE USERS</b>	
Section 1	File Information	
4.1	Introduction.....	32
4.2	Methodology.....	32
4.3	Profile of service users.....	32
Section 2	Research Measures	
4.4	Introduction.....	37
4.5	Methodology.....	37
4.6	Research measures findings.....	37
	Summary.....	48
<b>CHAPTER 5</b>	<b>PROGRAMME OUTCOMES</b>	
5.1	Introduction.....	49
Section 1	Outcomes on programme completion	
5.2	File Analysis.....	49
5.3	Findings.....	50
Section 2	Programme Costs	
5.4	Costs and benefits.....	59
	Summary.....	60
<b>CHAPTER 6</b>	<b>PROGRAMME STAFF PERSPECTIVES</b>	
6.1	Introduction.....	61
Section 1	Advocates and deputy managers	
6.2	Methodology.....	61
6.3	Job Satisfaction.....	61
6.4	Most enjoyable aspects of the job.....	62
6.5	Least enjoyable aspects of the job.....	62
6.6	Expectations of the job.....	63
6.7	Training.....	64
6.8	Experience and support.....	65
6.9	Related Services.....	65
6.10	Programme implementation.....	66
6.11	Participation of service users.....	68
6.12	Benefits.....	70
6.13	Negative consequences.....	72
6.14	Suggested improvements to programme.....	72
6.15	Programme model.....	73
Section 2	Programme Manager.....	
6.16	Interview with programme manager.....	75
	Summary.....	77

<b>CHAPTER 7</b>	<b>REFERRERS PERSPECTIVE</b>	
7.1	Introduction.....	78
Section 1	Referral Agents	
7.2	Methodology.....	78
7.3	Introduction to the programme.....	78
7.4	The Target Group.....	79
7.5	Programme Staff.....	82
7.6	Programme Delivery.....	83
7.7	Value of the programme.....	85
Section 2	Children Act Services Managers	
7.8	Methodology.....	87
7.9	Introduction to YAP.....	87
7.10	Target group.....	87
7.11	Effectiveness of programme.....	88
7.12	Waiting process.....	88
7.13	Expectations.....	89
7.14	Programme implementation.....	89
Summary		92
<b>CHAPTER 8</b>	<b>SERVICES PERSPECTIVE</b>	
8.1	Introduction.....	93
Section 1	Questionnaire Responses	
8.2	Service Providers.....	93
8.3	Contact with YAP.....	94
8.4	YAP Programme.....	95
8.5	YAP Staff.....	96
8.6	Further comments.....	99
Section 2	Residential Centre Managers	
8.7	Methodology.....	100
8.8	Interview responses.....	100
8.9	YAP Staff.....	100
8.10	Young People.....	101
8.11	Final Comments.....	103
Summary		
<b>CHAPTER 9</b>	<b>PERSPECTIVES OF SERVICE USERS</b>	
9.1	Introduction.....	105
Section 1	Interviews with young people	
9.2	Methodology.....	105
9.3	Reactions to YAP.....	105
9.4	Relationship with the advocate.....	106
9.5	Programme structure.....	107
9.6	Change and improvement.....	108
9.7	Before and after YAP.....	109
Section 2	Interviews with parents and carers	
9.8	Methodology.....	110
9.9	Reasons for referral.....	110
9.10	Advocate relationship.....	110
9.11	Programme structure.....	110
9.12	Changes and improvements.....	111
9.13	YAP and other services.....	111
9.14	Positive and negative aspects.....	112
Summary		113
<b>CHAPTER 10</b>	<b>ADULTS WITH LEARNING DISABILITIES</b>	
10.1	Introduction.....	114
10.2	Methodology.....	114
10.3	Findings.....	114
Summary		117
<b>CHAPTER 11</b>	<b>EVALUATION DISCUSSION AND CONCLUSION</b>	
11.1	Introduction.....	118
11.2	Implementation of the model.....	118
11.3	Outcomes, costs and benefits.....	120
11.4	Attitudes.....	120
11.5	Programme strengths and weaknesses.....	121
11.6	Conclusion.....	123
11.7	Recommendations.....	124
<b>APPENDIX</b>		125
<b>BIBLIOGRAPHY</b>		176

## LIST OF TABLES AND DIAGRAMS

<b>Table number</b>		
1.1	WHB & YAP Service Agreement terms.....	7
3.1	Referral Criteria.....	22
3.2	Advocate / Young person activity table.....	27
3.3	YAP on-going training for advocates.....	28
3.4	YAP on-call hours.....	29
3.5	Funding.....	30
4.1	Quality of relationship between young people and others.....	42
4.2	Target group and concrete and practical support.....	43
4.3	Target group and emotional support.....	43
4.4	Target group and esteem support.....	43
4.5	Target group and advice support.....	43
4.6	Males and females who have hit, kicked and punched someone.....	46
5.1	Estimated cost per annum per young person.....	59
6.3	Areas where advocates would like to see additional training.....	65
6.4	Positive changes and benefits to clients' families as identified by YAP staff.....	70
6.5	Positive changes and benefits to the young person as identified by YAP staff.....	71
6.6	Advocates suggestions to improve programme delivery.....	73
7.1	Reasons respondents referred young people to YAP.....	80
7.2	Referrers suggested improvements to the programme.....	85
7.3	Changes CASMs feel would improve the programme.....	90
8.1	Services understanding of YAP.....	94
8.2	Remarks made with regard to participation subsequent to YAP involvement.....	96
8.3	Services understanding of the role of the advocate.....	97
8.4	Further comments from service providers.....	99
<b>Figure number</b>		
2.1	YAP process.....	20
3.1	YAP Organisational chart.....	24
3.2	Age breakdown of current advocates.....	25
3.3	No. of young people with whom advocates have worked.....	26
3.4	Advocates' work hours.....	26
4.1	Age of service users on entry to YAP.....	33
4.2	Service users living arrangements at time of referral.....	33
4.3	Service users family situation at time of referral.....	34
4.4	Service users educational situation at time of referral.....	35
4.5	History of anti-social and criminal behaviour at time of referral.....	35
4.6	Level of problems within the target group.....	38
4.7	Total difficulties experienced by the group.....	39
4.8	Young peoples perception of difficulties.....	39
4.9	Different areas affected by the difficulties.....	40
4.10	Number of times young people have taken something from a shop.....	44
4.11	Number of times young people have taken something from their home.....	45
4.12	Number of times young people have damaged property.....	45
4.13	Number of times young people have hit, kicked or punched someone to injure them.....	46
4.14	Places where young people get their alcohol from.....	47
5.1	Categories of need identified by YAP in twenty-three young people.....	50
5.2	Education and training needs.....	51
5.3	Employment needs.....	52
5.4	Home-life and family relationship needs.....	53
5.5	Social behaviour and peer association needs.....	54
5.6	Legal needs.....	55
5.7	Accommodation needs.....	56
5.8	Psychological / Social / Emotional needs.....	57
5.9	Level of improvement in all categories of need subsequent to YAP intervention.....	58
6.1	Advocates level of job satisfaction.....	62
6.2	Advocates level of satisfaction with YAP training.....	64
6.3	Implementation of model in relation to individual cases – advocates perspective 1.....	66
6.4	Implementation of model in relation to individual cases – advocates perspective 2.....	67
6.5	Level of participation of young person in the advocates' view.....	68
6.6	Statements relating to the young person in the view of the advocates.....	69
7.1	Level of participation of the young person in the referrers view.....	81
7.2	Level of participation of the families in the referrers view.....	81
7.3	Referrers' level of satisfaction with relationship with YAP.....	83
7.4	Implementation of the model in relation to individual cases – referrers view.....	84
7.5	Value of the programme in meeting the needs of young people – referrers view.....	86
7.6	Percentage of referrals to YAP by Children Act Services Managers.....	89
7.7	Positive changes in cases recognised by Children Act Services Managers.....	91
7.8	Level of happiness with outcomes of cases – Children Act Services Managers.....	91
8.1	Ten services who responded to the questionnaire.....	93
8.2	Difference in level of participation with services subsequent to YAP intervention.....	95
8.3	Services relationship with YAP staff.....	96
8.4	Services level of contact with the advocate.....	98
8.5	YAP contribution to improved engagement with service.....	98
8.6	YAP support of young persons' attendance of service.....	99

## **Chapter 1 – Introduction**

---

### **1.1 The Problem**

There exists on the edge of Irish society a group of people whose predicament is a cause of great concern. The group are young and vulnerable and often involved in high-risk behaviour, including stealing, joyriding, assault, under-age drinking and drug misuse. Some of these young people suffer from depression, with others involved in self-harm behaviours. A large proportion of these young people have had long-term involvement with care and welfare services and / or the juvenile justice system. Yet regular contact with these systems has done little to solve the problems presented by the young people or prevent the recurrence of their risk behaviours. Negative experiences of and outcomes from education and training systems are also often a feature of the group, with many having already left school early without qualifications. In essence, this group of young people are marginalised from society. Because of their needs and behaviours, they exist outside the normal processes and patterns of teenage life.

The label ‘out-of-control’ is often used to describe the group, reflecting both the failure of natural support networks and State intervention to meet their needs. For many years, institutionalisation or incarceration were the main State responses to this group. Even today, a lack of suitable accommodation means people as young as fourteen are sent on remand to adult prisons simply because there is nowhere else for them to go. A lack of alternatives to corrective institutionalisation for young people with behavioural problems or psychiatric difficulties has been characteristic of the system for decades. As society has rejected them, they too reject society and the formal structures and responsibilities it imposes. Yet, society recognises that the needs of this group must be met, for young people themselves and for its greater good. The challenge is to achieve a level of reintegration to mainstream society, characterised by positive behaviours such as attendance at schools or training centres, building and maintaining good relationships with family and avoiding anti-social behaviours.

Over the last decade or so, community-based preventive approaches have become a key part of State and Western Health Board (WHB) responses to meet the needs of this group. Mandated since 1991 to provide family support services under the Child Care Act of that year, the WHB has also pursued this strategy in responding to the Children Act, 2001, which obliged it to put in place measures for young people whose behaviour places them at the intersection of child care and juvenile justice systems, on the verge of being placed out of their own homes and away from their families.

### **1.2 The Youth Advocate Programme (YAP)**

In 2002, the WHB introduced a new programme that promoted a mentoring-based ‘wraparound’ form of intervention in an attempt to address the needs of ‘out-of control’ young people who had come to be well known to its services, the Gardai and the Probation service. The Youth Advocate Programme (YAP), which was developed in the United States, is a private, community-based programme that aims to reintegrate this group into the community and to create effective long-term links with formal and informal services such as schools, recreational clubs, employers, welfare services and religious organisations. The ‘wraparound’ model characteristic of the programme refers to a mix of individualised in-home and community-based services that are developed around each young person and their family structure. At the core of the programme is a mentoring service that matches a young person for a six month period with a locally recruited adult ‘advocate’ who has little or no formal training, in the hope that the adult will advise and guide the young person to choose wisely and resist from partaking in anti-social behaviours. Where this programme particularly differs from other services currently available for the group is the fact that it offers 24-hour intervention. Intervention is always available when the client is in need.

The specific terms of the agreement between YAP and the WHB are as follows:

#### **WHB & YAP Service Agreement Terms**

- The programme will cover the catchment area of Galway, Roscommon and Mayo.
- The programme will serve a minimum of fifteen children/adults during the course of the first contract year (September – December 2002), twenty five children/adults at any one time and forty-five to fifty five during the first full year of operation (January – December 2003) depending on the local need as identified by the Health Board.
- The programme will service some adults with a mild learning disability who might benefit from the service.
- The service will be provided predominantly to children between ten and seventeen.
- Referrals will be made to the programme via the Children Act Services Managers.
- In addition, by agreement, families, parents or carers may also be referred as part of the case.
- The programme will develop and implement an individualised wraparound service plan in consultation with each family. Each plan will identify services needed, outline the roles and responsibilities of family members and provide for an emergency plan and outgoing review. Wraparound service is a mix of highly individualised in-home and community-based services developed around each family's unique circumstances. The service fits the family's needs into designated service slots; wraparound services connect families with resources that accommodate specific needs. Services will work in collaboration with traditional interventions such as counselling and non-traditional services such as mentoring, job coaching and recreational activities, with existing board services and services provided by agencies of the board.
- The programme will ensure all staff and advocates are aware of the child protection policies of the Western Health Board.
- The programme will operate on a non-refusal policy on the basis that no client having been admitted to the programme will be ejected or barred from the service.

Table 1.1

### **1.3 YAP Evaluation**

As part of the agreement between the Western Health Board and the Youth Advocate Programme, the Child & Family Research and Policy Unit was requested to undertake an evaluation of the programme in its first year of inception. The objectives of the evaluation are set out as follows:

1. To provide a detailed descriptive account of the operation of the programme, focusing on all aspects of the programme model. This should also locate the programme in the wider policy and services context in which it operates.
2. Assess the extent to which the implementation of the programme is in line with the theoretical model.
3. Discover the views of all key stakeholders involved in the programme from children and families, through YAP staff at all levels, through to all services that linked with the project.
4. Assess the extent to which the programme objectives have been achieved – both at overall programme level and at the level of objectives contained in the individualised service plans. Where possible, this will involve gathering base-line data and comparing it with intervention-end and follow-up measures. The possibility also exists of building in some comparative dimension to the research.<sup>1</sup>
5. Assess the extent to which the programme works effectively with existing services in respect of referrals to and from each other and participation/ delivery by services in respect of Individual Service Plans (ISPs).
6. Assess the extent to which the programme differs from existing provision and adds value to what is already in place.
7. Assess the benefits of the programme in relation to its costs.

---

<sup>1</sup> Time constraints meant this aspect of the research was not completed

## 1.4 Evaluation Methodology

The approach taken to the evaluation has involved a number of methods, focusing on a number of areas as set out below.

- Context
- Strategy and Implementation
- Objectives and Outcomes
- Attitudes

Specific methodologies that have been employed include literature reviews, documentary analysis, surveys, interviews and the use of standardised psychological tests. The context work has involved investigating existing research and policy literature, while research on the YAP strategy and implementation has involved clarifying the programme model and assessing its operation in practice. The main question posed in relation to this part of the research is ‘Has the programme delivered what it promised?’ Documentary analysis, surveys and interviews have all fed into the process of clarifying the work of YAP.

The heart of the research involves an analysis of objectives and outcomes to answer the key question ‘Does the Programme Work?’ This has involved a detailed analysis of YAP files, focusing on the objectives set for the young people and the extent to which these have been achieved. Thus, the progress of each client who has completed the programme is considered by examining the terms of the individual plans, establishing why those terms have been put in place and attempting to map the progress of the case by comparing the position of the client at time of referral to that at time of completion. Surveys and interviews also provide extensive attitudinal data on the value and effectiveness of the programme.

This report is based on findings from the following data sources:

1. The programme files of forty-six clients referred to the programme prior to December 2003 were used to examine ‘who is the group of people referred to the programme?’
2. The programme files of twenty-six people who had completed the programme by December 2003 were used to establish ‘what progress have clients made while on the programme?’
3. Five research measures were implemented with a sample of twenty-two service users exploring behavioural patterns, social networks, support networks, mental health and social behaviour.<sup>2</sup>
4. Surveys from thirteen programme advocates, three deputy managers, fifteen referring agents and twelve services provided quantitative and qualitative answers regarding their views of the programme.
5. Two focus groups were conducted with advocates and one was conducted with deputy managers.
6. Interviews with eight young people and five parents allowed for an insight into how the programme operated in practice from a service-user perspective.
7. Interviews with four residential care home managers.
8. Interviews with two adults with learning disabilities.
9. Interviews with a parent, advocate and the referrer linked to an adult with learning disability.
10. Interviews with the three Children Act Services Managers in Galway, Roscommon and Mayo
11. One detailed interview with manager of the YAP service.
12. Administrative data on cost of programme.

---

<sup>2</sup> Two of the measures, one focusing on behaviour and the other on mental health, are norm-referenced, allowing for the rating of the seriousness of behaviour and mental health problems relative to the general population of young people. The other measures provide self-reported descriptive information on social support sources, levels and qualities and on risk behaviours.



A more detailed description of the method of data collection for each specific group can be found at the beginning of each chapter.

### **1.5 Report Structure**

This report is in twelve chapters. Following this introduction chapter, chapter two offers a brief description of the programme model and provides details of relevant literature and context. In chapter three, the partnership between YAP and the Western Health Board is examined, as is the implementation of the programme to date. In chapter four, YAP service-users are profiled based on the referral information and findings are presented from a set of research measures implemented with the young people. In chapter five, detailed information gathered from the YAP files on objectives and outcomes are considered and the costs and benefits of the programme are examined. Chapter six reflects the views of programme staff, chapter seven reflects the views of referring agents and chapter eight provides the views of related services. Chapter nine contains findings from interviews with eight young people and five parents who had participated with the programme. Chapter ten details the service provided to adults with learning disabilities. The discussion and core conclusions and recommendations are presented in chapter eleven.

### **1.6 Evaluation Implementation**

Evaluating YAP has involved a full-time researcher engaging in a continuous process of data collection since April 2003. As the methodology section indicates, this has involved gathering information from a range of sources, some internal to the programme, for example, programme files, others external to but linked to the programme, for example, data collection with young people, parents and referrers. The researcher found YAP management and staff to be open and forthcoming with information throughout the evaluation process and without their help the implementation of a number of tasks would not have been possible.

## Chapter 2 – Putting YAP in Context

---

### 2.1 Introduction

YAP is a twenty-four hour community-based intervention programme that works with young people, aiming to create effective long-term links for them within the community. The programme addresses the individual needs of clients and matches them with adult advocates who are paid to guide and advise them for a six-month period. In this chapter, the programme is placed in context by locating it in relation to policy and existing services and interventions, and illustrating what research evidence there is to support its model of operation. The chapter is in four sections as follows:

1. Policy Approaches to Juvenile Justice (including Irish Policy and Legislation);
2. Research Literature on Risk Factors and Effective Interventions;
3. Current Irish Interventions and local Western Health Board Service Context; and
4. YAP model in context.

The main emphasis of the chapter is on research and policy on juvenile offending, reflecting the fact that the majority of young people with whom YAP works are at high risk of or already involved in the justice system.

### 2.2 Policy Approaches to Juvenile Justice

Two major trends have occurred at a European level in recent years in the juvenile justice arena. The first is a shift away from the use of retributive measures towards the development of alternative preventive programmes based in the community. The second is a move away from the socially disintegrative effects of incarceration towards family and community-based restorative justice practices, where the offender must face the victim of crime and offer some form of reparation (Bowden & Higgins, 2000).

Advocates of traditional punitive justice stress individual responsibility and argue that offending children should suffer appropriate penalties according to the severity of the crimes committed. Responding to the act rather than the actor, the punitive system believes in categorising ‘depraved’ young people, who need to be removed from society (Powell, 1995). The premise is that incarceration leads to incapacitation, which protects the public from the offending individual at least for the duration of the sentence (ibid.). Alternatively, the welfare model recognises the child as a dependent. It is supportive of treating and rehabilitating young offenders. Welfare advocates make clear that sentencing policy should be determined on the basis of a child’s history and social background and believe treatment to be more appropriate for young people, whose encounter with crime is often transient (ibid.).

The most recent trend in juvenile justice systems internationally reflects an interest in restorative justice measures. Marshall defines restorative justice; “where [by] parties with a stake in a specific offence collectively resolve how to deal with the aftermath of the offence and its implications for the future” (Marshall, 1999; 5). Restorative justice is based on the assumption that an offender should not be punished for an individual offensive act without considering the wider social context of the social environment. It assumes that crime has origins in certain social conditions and relationships within the community. Therefore, crime prevention depends on communities taking responsibility for criminal behaviour by attempting to remedy social conditions conducive to crime or anti-social behaviour. It is about healing the harm done to victims and communities while holding offenders accountable for their criminal actions (Schiff, 1998).

The source of the recent interest in restorative models comes from North America, New Zealand and Australia but western European countries such as the UK and Ireland have incorporated measures in recent legislation (Lockhart in O’Mahony, 2002, p.747).<sup>3</sup> Family group conferencing is one of the key measures associated with the restorative approach. Key elements in the model are appropriate restitution for wrongdoing by the young person, alongside the involvement of family members and victims in a

---

<sup>3</sup> To be discussed below.

consensus decision making process. Lockhart cites models developed in New Zealand and Australia as the foundation from which subsequent approaches developed world-wide (ibid., ps.747, 748). What is most notable is how the model has been adapted to suit different contexts and different presenting problems, for example in the child welfare arena.

#### *Key Developments in Irish Legislation and Policy*

Since 1991, there has been an explosion of policy and legislative activity in relation to children in Ireland – key themes within these developments have been prevention, family, community, interagency co-operation and children's rights. The Child Care Act, 1991 updated previous legislation on the care and protection of children dating from 1908. Among its key provisions was the allocation of statutory responsibility to Health Boards to promote the welfare of children not receiving adequate care and protection and strengthening the Health Boards capacity to provide childcare and family support services. A key message in the act was that the best interests of children are served by their remaining at home, with care identified as only appropriate in exceptional cases. In spite of the Act's preventive orientation, subsequent years saw the balance of investment in strengthening the State's child protection services, with family support provision only gaining a higher national profile towards the end of the 1990s. During this period, the State's Commission on the Family reported, placing a strong emphasis on family support, while the first of a set of intensive, community-based, preventive Springboard projects were established.

More recently, the Children Act 2001 has provided a new framework for the juvenile justice system in Ireland. It highlights the key role of Health Boards in juvenile justice in relation to preventive measures and provision of alternatives to sentencing. Two prominent features to come from the act are the statutory establishment of the Family Welfare Conference and of the existing Garda Diversion Programme, both providing for community-based provision for out of control, offending and non-offending children who have been brought to court for their behavioural problems<sup>4</sup>. The Act makes provision for community-based sanctions as a method of restitution/rehabilitation with custodial sentences administered only as a last resort. Most relevant is the provision for addressing the needs of out of control, non-offending children. The Children Act legislation has resulted in the insertion of a new section in the Child Care Act, 1991 which obliges the Health Boards to respond to the need of such children, for example, using welfare conferences and organising out-of-home care provision<sup>5</sup>.

As stated, this period saw a number of other key legislative and policy developments. The Education Act 1998 incorporates a focus on educational disadvantage, while the Education (Welfare) Act, 2000 underpins the establishment of a national educational welfare service focusing in particular on the area of school attendance / truancy. The Youth Work Act, 2001 gives a statutory basis to the provision of youth work services in Ireland. It emphasises the need for resources for programmes purposefully designed to enhance the personal and social development of young people in disadvantaged communities; and supports the allocation of extra resources to the implementation of preventive programmes. The health and well being of young people is considered paramount by the Health Strategy 2001, which recognises that social, environmental and economic factors such as deprivation, education, housing and nutrition affect the health status of individuals. 'Best Health For Children' (2000) highlights the issue of mental health in adolescence and promotes a multi-modal flexible approach for developing an adolescent friendly health service. It also demonstrates the potential for Health Boards working in partnership with other agencies.

Much of the developments of the last number of years have reflected the UN Convention on the Rights of the Child, 1990. The Convention sets out a full schedule of Articles but in particular highlights the 'four P's' of prevention, protection, provision and participation. The most direct reflection of the UNCRC in Irish policy is the National Children's Strategy (2000). The Strategy endorses a holistic model, taking every aspect of the child's life into consideration when trying to understand how children live their lives. Central to the strategy is an understanding of the importance of family and local communities.

---

<sup>4</sup> The Garda Diversion Scheme began operating in 1963.

<sup>5</sup> In the form of secure and non-secure care, outside of that provided normally in fostering and residential settings.

### 2.3 Research Literature on Risk Factors and Effective Interventions

Research literature focused on the prevention or reduction of juvenile offending tends to focus on two general areas: causality / risk and interventions. In this section, relevant recent findings from the literature are presented in relation to both of these areas.

#### *Risk Factors*

There exists a substantial body of international research on the causes and correlates of juvenile offending and delinquent behaviour. Longitudinal studies have been consistent in identifying recurrent social factors or 'risk' factors that can contribute to young people pursuing paths to delinquency. Risk factors are those personal attributes and contextual conditions that increase the likelihood of offending behaviour in a young person (McGill, 1997). Social exclusion, parental neglect or rejection, lack of consistent discipline, peer pressure, school failure, low-income and overcrowded households are common factors, as are signs of Conduct Disorder, Attention Deficit Disorder, hyperactivity and compulsive risk taking in the individual child (Utting, 2000; Quinn in O'Mahony, 2002; Warren, 2001). Particularly significant to the Irish context is an understanding that persistent serious offending is associated with quite a small number of communities of especially disadvantaged families (O'Mahony, 1998).

Recent research from the US on young offenders based on the work of a set of experts convened by the Office of Juvenile Justice and Delinquency Prevention concluded that risk factors operate in several domains:

- Individual child (early antisocial behaviour, emotional factors, poor cognitive development, low intelligence, hyperactivity);
- Child's family (parenting, maltreatment, violence, divorce, parental psychopathology, familial antisocial behaviours; teenage parenthood, family structure, family size);
- Child's peer group (association with deviant peers, peer rejection);
- Child's school (failure to bond at school, poor academic performance, low academic aspirations);
- Child's neighbourhood (living in a poor family, neighbourhood disadvantage, disorganised neighbourhoods, concentration of delinquent peer groups, access to weapons); and
- The media (Wasserman et al., 2003, pp.1-3).

The likelihood of early juvenile offending increases as the number of risk factors and risk domains increases (ibid, p.2).

Protective factors can reduce the likelihood of delinquent behaviour by protecting or buffering the effects of risk factors (McGill, 1997). Preventive intervention programmes support the use of protective factors in an attempt to reduce the likelihood of offending behaviour. Wasserman et al cite female gender, prosocial behaviour during pre-school years, and good cognitive and academic performance as common protective factors against child delinquency (op. cit.). Beinart et al, 2002 propose as protective factors:

- Strong bonds with family, friends and teachers;
- Healthy standards set by parents, teachers and community leaders;
- Opportunities for involvement in families, schools and the community;
- Social and learning skills to enable participation; and
- Recognition and praise for positive behaviour.

Farrington highlights having a resilient temperament, a warm affectionate relationship with at least one parent, parents who provide effective supervision, pro-social beliefs and consistent discipline, and parents who maintain a strong interest in their children's education as protective factors.

A significant overlap between juvenile delinquency, anti-social behaviour and psychiatric pathology is evident. When a number of risk factors cluster together, a child is at greater risk of developing delinquent or anti-social behaviour. From a gender perspective, mental health disorders are more prevalent in boys than girls and there is evidence that a significant number of young men with mental health disorders are not diagnosed but are dealt with by the criminal justice system (Best Health For Children, 2000).

Research by Farrington (1996) has found that timing of offending also matters with people involved in crime before the age of 14 tending to become the most persistent offenders and tending to establish the longest criminal careers. In this respect, Moffitt distinguishes two main categories of juvenile delinquents. ‘Life Course Persistent’ juveniles partake in anti-social behaviour from a young age, peaking at adolescence and developing into a stable pattern of offending that continues into adulthood (Vermeiren, 2003). ‘Adolescence Limited’ juveniles experience a ‘maturity gap’ for a temporary period during adolescence during which they are encouraged to partake in antisocial behaviour as a process of adjustment to the adult social world. The maturity gap occurs because puberty leads adolescents to biological maturity earlier than Western society permits them to become socially mature. This group tends to revert to pro-social behaviour when it is deemed more rewarding to them, accentuating the possibility of rehabilitation (Moffitt in Vermeiren, 2003).

### *Effective Interventions*

Not surprisingly, the nature of interventions addressing the prevention and reduction of juvenile crime reflects the risk and protective factors just considered. There is growing acknowledgement that young people displaying problems must be considered within their social, family, educational and community environment and wherever possible professionals should strive to maintain adolescents within their own home and community (MacKinnon-Lewis et al, 2002; Cameron et al, 2003). Italian research has found that social environments that display elements of civic commitment, solidarity and mutual trust may prevent the development of criminal behaviour in at risk children and facilitate their integration into the community (Gatti et al, 2003). There is evidence to suggest that programmes that divert first time offenders away from the courts and into the community, encourage parental involvement and community focus are effective in reducing rates of recidivism (Patrick et al, 2003). On the other hand, programmes that aim to ‘get tough’ on youth crime, for example boot camps, have not been shown to be very effective (Tyler et al, 2001, Mc Kinnon-Lewis et al, 2002, Dahlberg and Potter, 2001).

Community-based, family centred, strength based systems have been endorsed in recent times as effective methods of dealing with young people displaying signs of aggression, criminal behaviour and mental health problems (MacKinnon-Lewis et al, 2002). Such intensive family focused services have also been found to prevent family breakdown and reduce the need for out of home care and it has been suggested that such programmes have reduced the amount of juvenile arrests and have lessened conflict between parents and their children (Cameron et al, 2003). Farrington and Welsh’s 2003 meta-analysis of 40 well designed studies of family focused prevention programmes found significant, sustainable impacts on delinquency from the programmes included. Home visiting, day care / preschool, home /community and multisystemic therapy programmes were all considered to be generally effective. Dahlberg and Potter note that family based and early interventions offer the best evidence of effectiveness (2001).

According to Jenkins et al, the most effective programmes display signs of efficient information systems and close monitoring, are community orientated and focus on skills such as “cognitive reasoning, problem solving, interpersonal relations and values clarification” (Jenkins et al, 2003; 329). The importance of collaboration by services relating to the youth’s life is emphasised as an effective means of reducing known risks of delinquency and enhancing protective factors in the areas of a child’s life (Jenkins et al, 2003). An evaluation of a Milwaukee based wraparound programme aimed at young people in the juvenile justice system with serious emotional, mental health and behavioural needs, proved positive on a number of levels. Since the initiation of the programme, the number of entries into residential treatment in the area reduced by 60%, in-patient psychiatric hospitalisation dropped by 80%, the average overall cost of care per child reduced by \$1700 per month and there is evidence of reduced rates of recidivism (Kamradt, 2000).

Recent research in the United States by the Washington State Institute for Public Policy, on the costs and benefits of crime reduction efforts, indicates what can be seen as exemplary programmes in tackling the issue of juvenile offending (Aos et al, 2001). Accepting the different societal and policy contexts, it is reasonable to suggest that findings from programmes from North American will have some degree of applicability in the Irish setting. The Washington Institute discusses costs and benefits in relation to young people under three headings:

1. Early Childhood Programmes;
2. Middle Childhood & Adolescent (Non-Juvenile Offender) Programmes; and
3. Juvenile Offender Programmes.<sup>6</sup>

It is notable that the stricter definition of costs and benefits (i.e. taxpayer only) sees both of the early childhood programmes and four of the five types of Non-Juvenile Offender childhood programmes costing more to the taxpayer than the value of their future benefits. The less strict definition sees both of the early childhood programme types and four out of five of the Non-Juvenile Offender programmes demonstrating positive net benefits (i.e. the benefits of the programmes outweigh the costs). Of the Non-Juvenile Offender programmes, mentoring is characterised by positive net benefits in the case of benefits to taxpayers only and benefits to taxpayers and victims.

Among programmes for Juvenile Offenders, there is strong effect size and cost-benefit support for a number of programme types.<sup>7</sup> Among these, Multi-Systemic Therapy presents as the second highest ranked in terms of effect sizes and the highest in terms of net benefits. This approach involves a trained therapist working with the young person and his or her family in home, school and community settings intensively over a period of four months. The Washington Institute found smaller effect sizes and lower net benefits for a number of programme types.<sup>8</sup> Among these, coordinated services, or ‘wraparound’ approaches, involving the coordination and focusing of resources on young people, were found to deliver net positive benefits. What the authors term other Family-Based Therapy approaches are identified as having the highest effect sizes and high levels of net benefits among the subset of ‘general types of treatment programmes’.

#### **2.4 Current Irish Interventions and local Western Health Board Service Context**

Although not driven by a single programmatic vision regarding the prevention of juvenile crime, there is a range of interventions in place in the Irish context. In this section, some of these are considered, as is the specific services context within which the YAP operates in the Western Health Board area.

##### *Irish Preventive Interventions*

Currently, the Department of Education and Science provide for children aged up to and including 16 given custodial sentences by the courts, in five special schools. Older males can be sentenced to St. Patricks Institution, which caters to 17 to 21 year olds.<sup>9</sup> Under the terms of the Children Act, 2001, the Health Boards operate special care (secure) and high support units for out of control non-offending children.<sup>10</sup> A range of services operate to prevent young people entering the special schools, high support and secure care and prison. Detailed below are a selection of the most important of these.

- **Juvenile Diversion Programme**

Introduced at statutory level by the Children Act 2001, the programme provides an alternative to juvenile prosecution in the form of formal and informal cautioning. Specially trained Juvenile Liaison Officers

---

<sup>6</sup> The approach to calculating cost and benefits in the report is as follows. First, an effect size of the programme is calculated which is roughly equivalent to percentage reduction in crime rates for the participating group. Second, the cost of a programme per participant is established. From this is subtracted the cost of programme(s) it replaces. The resulting figure is the estimated net direct programme cost. Third, the estimated value of future crime reduction is calculated (based on the programme’s effect size) and from this is subtracted the net direct programme cost. This figure is calculated both in terms of reduction in the costs the taxpayer and to the victim – i.e. including the value to the victim will increase the value of the programme. The final statement of programme benefits is presented in terms of minimum value (tax payer), maximum value (tax payer and victim) and average values.

<sup>7</sup> These ‘off-the-shelf’ programmes were Multi-Systemic Therapy, Functional Family Therapy, Aggression Replacement Training, Multidimensional Treatment Foster Care, Adolescent Diversion.

<sup>8</sup> These included Diversion (from Juvenile Court) with Services, Intensive Probation, Coordinated Services and Other Family Therapy Programmes.

<sup>9</sup> Cork, Limerick and Castlerea male prisons for prisoners from age 17.

<sup>10</sup> At the end of 2002, there were approximately 300 places nationally between the special school, special care and high support centres.

are employed to supervise children who have received a formal warning due to disruptive or criminal behaviour. Supervision involves a wide range of activities including contact between the young person and family in the home environment, school, youth club, sports club or street. The Children Act has widened the role of Juvenile Liaison Officer to include the facilitation of Family Group Conference. The programme is managed by the Garda Síochána.

- **Garda Special Projects**

Garda Special Projects are community-based youth projects promoting the development of young people and their communities. Funded by the department of Justice, Equality and Law reform, the projects are managed by multi-agency committees comprising of representatives from the Gardai, schools, youth services and residents. Designed as a method of identifying young people at most risk of becoming involved in criminal or anti social behaviour, the projects seek to engage them in meaningful activities and divert them away from criminal tendencies (Warren, 2001). An evaluation of the fourteen most established projects found a positive impact on social behaviour. Participants reported positively on their experiences and a majority reported a variety of positive learning outcomes. While the impact and implementation of the projects proved positive for the majority of those involved, it was found that the involvement of Gardai was problematic for many of the young people (Bowden & Higgins, 2000).

- **Family Group Conference**

As highlighted above, the family group conference model has been introduced to Ireland under the Children Act, 2001. It can be administered via the Garda Juvenile Diversion Programme, the Probation and Welfare services or the Health Boards. The Family group conference aims to confront young offenders with their wrongdoing and involve the family, victims and the community an input into finding solutions. The conference is held with a view to discussing the reasons the young person came to be involved in criminal behaviour and to devise how future criminal behaviour might be prevented. The conference works as a mediator between the child and the victim of the crime, upholding the concerns of the victim and formulating an action plan with the view to improving the welfare of the child. (Children Act, 2001).

An evaluation of the efficacy of the Family Group Conference pilot study found just under three quarters of young offenders had not re-offended within the time-scale of the study. Most offenders experienced a change in their outlook because of the process. The extent of change was assessed as regards feelings defiant, ashamed, confident, remorseful, sullen, uninterested, self conscious or apologetic. Offenders were also assessed as regards the extent to which they accepted responsibility and whether they treated the process seriously. There were positive changes on all but one variable (O'Dwyer, 2001).

- **Probation and Welfare Service**

Probation and Welfare Officers work within the community providing advice and assistance to young offenders. Nationwide, there are four probation hostels and a number of training workshops. The service is involved in a number of community-based recreational and employment related programmes, set up to offer alternatives to young people who have been involved or are at risk of becoming involved in crime (O'Dea in O'Mahony, 2002). The service also plays a role in implementing family group conferences at court level.

- **Youthreach**

Youthreach is an initiative designed to reduce possible marginalisation of young people without qualifications. There are 80 centres existing nationally, based at a local community level and the programme is managed by FAS and the Department of Education. Youthreach offers general vocational, literacy and numeracy skills, training, certification and work experience to early school leavers between the ages of 15 and 18. The programme encourages young people to identify their preferences and consider career options. An evaluation found participants supportive of the objectives yet found the need for extra intervention<sup>11</sup>.

---

<sup>11</sup> [www.youthreach.ie/aatopmenu/Library/YR2K/Yr2kd.htm](http://www.youthreach.ie/aatopmenu/Library/YR2K/Yr2kd.htm)

- Neighbourhood Youth Projects

Neighbourhood Youth Projects are community-based intervention programmes that provide support for children and young people from disadvantaged areas. NYPs, which are normally Health Board run, help young people to address the difficulties in their lives through activity and discussion based individual and group work (Canavan, 1992). They provide an integrated approach to combating individual problems in young people, working closely with families, schools and other agencies concerned with their welfare. An evaluation of the Westside NYP found the project to be highly successful in general. Discussion groups and exercises dealing with issues affecting the well being of young people increased participants ability to take responsibility and offered opportunities to consider potential solutions to their problems (Canavan et al, 2000).

- Springboard

The Department of Health and Children established Springboard on a national level in 1998 as a Family Support initiative for children and young people at risk. Services include counselling, personal development groups, after school activities, drop-in facilities and family outings. An evaluation of the programme has found that the experiences of those attending the project improved considerably, finding that the number of children at high risk of abuse or entering care had been halved (McKeown, 2001a). Children, parents and professionals involved in the project believe that it has improved the personal and family life of those involved.

#### *Western Health Board Service Context*

YAP operates as part of the range of services for children and families delivered by the Western Health Board. These services are usually considered in terms of the three domains of Family Support, Child Protection and Alternative Care Services.

#### *Family Support*

The central goal of family support services is prevention, commitment to multi-disciplinary working and commitment to strength-based intervention. These services have expanded significantly over the last number of years and encompass:

- Pre- and After-School Services;
- Community-based Adolescent Services and other Family Support Services;
- Services responding to the Children Act, 2001,
- Services Responding to Family Violence
- Services for Travellers; and
- Drug Misuse Prevention Services.

As is evident, these services range from early years to adolescence and involve the provision of preventive and supportive interventions. The Western Health Board has made a particular commitment to community-based intervention services for children, young people and their families. In 2002, it operated seven Neighbourhood Youth Projects, three Springboard projects and a range of similar interventions. Also in 2001, the Big Brother Big Sister mentoring programme, operated in conjunction with Foróige, had its first full year of service delivery. Under the Children Act, 2001 a Family Welfare Conference service was put in place throughout the region. Also, Children Act Service Managers are now in place in each county to manage and co-ordinate the delivery of services responding to the act.

#### *Child Protection*

Child protection services are part of the Child and Family Support continuum. Recently, the Western Health Board has strengthened its services and has established a number of posts focused on the implementation of the national Child Protection Guidelines: Children First Project leaders, Information Officers, a Child-Protection Coordinator, Training Officers, Psychologists, Social workers and Child Care workers.



### *Alternative Care*

These services are provided in three main forms: fostering, residential care, and adoption. Residential services are provided in three centres in Galway and one in Mayo, with additional centres for homeless young people and emergency care in Galway. In 2002, the Board provided 'special arrangements' for four young people and, along with three other Health Boards, established a high support residential care unit for young people. Other developments in this area have been the employment of project workers to assist the development of after-care services. At the end of 2002, the Western Health Board had 270 children in its care. Of this total just over 250 were in foster care, which was provided by 183 families, 44 of which were relatives of the children.

## **2.5 YAP Model in Context**

In this section, YAP is outlined in detail, highlighting its history, and key elements and principles of the programme model.<sup>12</sup> The final section locates the model in terms of the already considered policy and services contexts, and research evidence.

### *YAP History*

The Youth Advocate Programme, a private, non-profit, family support initiative, was established in Pennsylvania in 1975 for juvenile offenders returning to the community after spending time in correctional institutions. In its initial three months, the programme served over one hundred young people by helping them to reintegrate into the community through the support and intervention of hired 'advocates'. The model was considered successful and soon after was implemented in a number of states across America. In recent years, the programme model has travelled to Britain and Ireland. In Britain, the programme's principles have been employed by Youth Offending Teams in North London, South London, Leicester and Leeds and in Belfast by the voluntary charity Extern. In 2002, the Youth Advocate Programme was established in Ireland in the areas of North Dublin, Galway, Roscommon and Mayo.

### ***YAP Programme Model***<sup>13</sup>

Key elements of the programme model are as follows:

- *The Advocate Service*

The programme matches young people with individuals from within the community, who are paid to guide and support them for a duration of six months. The role of the advocate varies depending on the requirements of each case. Advocates can be counsellors, tutors, teachers of parenting skills, crisis managers, case managers, and liase with schools and family members. Advocates are employed to do whatever it takes to ensure the progress and success of the programme. The advocate is integral to implementing and organising the wraparound model.

- *Wraparound Model*

The Wraparound model refers to a mix of individualised in-home and community-based services developed around the unique structure of families. YAP workers connect families to local services with the aim of creating long-term links between them. It is believed that these methods act as a catalyst in eventually creating empowerment, permanency, independence and self-sufficiency for the youth and families involved.

- *Community Ownership*

Ideally, all necessary services and supports are available within the community, offering young people and families a sense of community ownership. Services may include judges, probation officers, social services, schools, tutors, gardai, religious organisations or youth organisations.

---

<sup>12</sup> This description of the model and its underlying principles is based on YAP documentary materials.

<sup>13</sup> Figure 2.1, Pg 17 outlines the stages involved in YAP's intervention process.

- *Needs Assessment*

A 'needs assessment' is carried out with the young person and family to gather information about their needs, strengths and capabilities.

- *Child and Family Team*

This team is comprised of family members, professionals and supportive individuals from the community who come together to help the young person's situation. Specific areas of concern are identified by the needs assessment and from here members from the community who may be of help.

- *Wraparound Meeting & Individualised Service Plan*

The child & family team are brought together at a wraparound meeting that is held in the young person's home or another setting within the community. At the wraparound meeting an 'individualised service plan' is devised. The plan aims to address and find methods of meeting the young person's needs. The plan follows a 'life domain model', incorporating all the areas that affect a youth's life; place of residence, family, education, employment, training, finances, psychological and emotional well-being, legal and medicinal needs. At the meeting, roles are discussed and assigned to members of the team. Plans are unique to each youth and are often evaluated and revised throughout the course of the programme to suit their changing needs.

- *Flexible Funding*

Access to limited funding is available to advocates depending on specific requirements of the case. Flexible funding can be used for purchasing goods that facilitate the individual needs of the youth and family when no-cost options are not feasible. Specific items and activities can be requested and paid for from the flexible fund.

- *Supported Employment*

The supported work programme gives the opportunity for young people to build relevant job skills, to prepare for jobs and to acquire skills that will raise their socio-economic levels. Employers are recruited with specific children in mind and employment sites are provided based on the identified strengths and needs of the child and family.

- *24/7 Service*

The service is provided to the family twenty-four hours a day, seven days a week. Advocates work out of office hours and a member of management is always on call for crisis intervention.

## ***Programme Principles***

The YAP operates according to the following principles:

- *Unconditional care*

An overarching principle is unconditional care and once admitted to the programme a young person will not be excluded for extreme behavioural problems. Related services are also unconditional and if the programme does not seem to be going well for a child, the services and supports are changed to suit. The community team will not give up on children and their families.

- *Focus on strengths*

The strengths of young people and families are recognised by the programme. Staff identify individual strengths and use them to develop problem-solving strategies for the family. The programme is based on a holistic model that takes into account the unique characteristics of individual families. Rather than reprimanding a family for its weaknesses it aims to encourage and nurture inherent family strengths.

- *Partner with parents*

Family involvement is a main feature of the design. Encouraging parents and families to voice opinions, the programme incorporates these into a plan designed specifically for that family's needs. Staff work within family homes and neighbourhood settings and crisis intervention is available to the family on a 24/7 basis. If applicable, parents are involved at every level of the development of the process. The programme recognises that families often have the best solutions to their own problems.

- *Cultural competence*

Different cultures and value systems are taken into consideration by YAP and where possible staff are recruited from the client's own community or locality. Ideally programme staff reflect the culture and ethnicity of their clients. The programme aims to build on the unique values, preferences and strengths of youth and their families.

- *Individualised Service Planning*

Individualised Service Plans present the family with the power to formulate a plan to suit their own specific needs. By giving voice and access, the plan promotes a sense of ownership, control and empowerment to the family.

- *Team work*

A team of dedicated people are organised to work with each youth and the youth is cared for by each member of the team. Each team member plays a different role in the life plan of the individual youth.

- *Flexibility/Optimism*

Small improvements are recognised as strengths and the programme must be sufficiently flexible to alter its structure in accordance with individual family needs. Teams must have access to flexible funding to suit the needs of each youth.

- *Non-judgemental and non-blaming approach*

A spirit of partnership between all involved is encouraged and recognised as the best method of achieving progress and success.

# YAP PROCESS

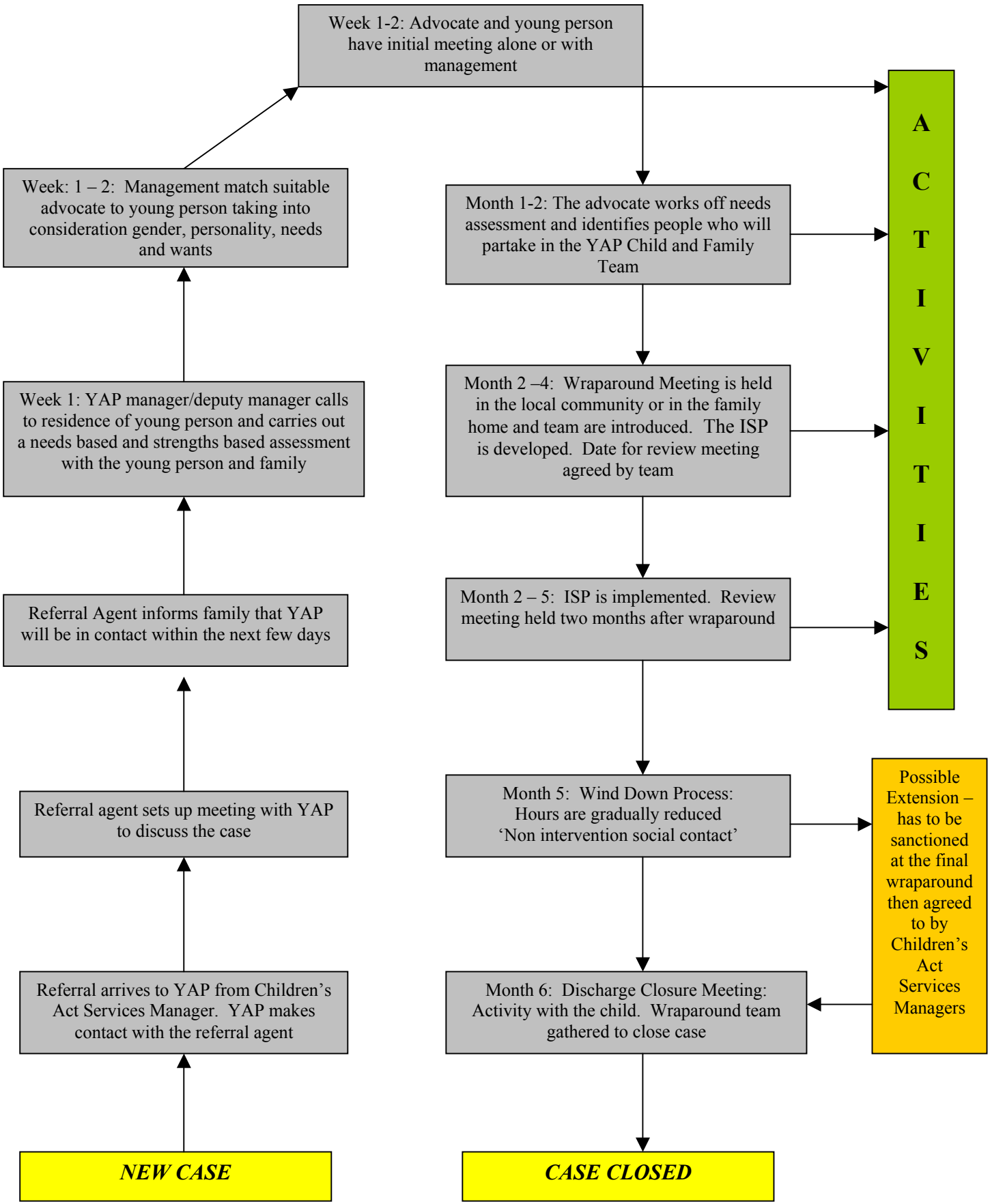


Figure 2.1

### ***Putting YAP in Context***

YAP is a Western Health Board funded service that responds to the new responsibilities placed on it under the terms of the Children Act, 2001. It aims to intervene in a preventive way with young people whose behaviour is a risk to themselves and others and has put them on the cusp of entry to the juvenile justice system. YAP aims to prevent young people from having to enter high support or special secure care arrangements. In terms of policy models, YAP reflects a welfare approach seeking solutions that take into account the personal, family and community contexts of a young person. It also reflects aspects of restorative approaches, insofar as it encourages self-awareness in young people regarding their own behaviour and its effects.

YAP operates as one of a range of existing services operated or funded by the Western Health Board. As has been highlighted, the range of community-based family support and adolescent services is more extensive than that found in other Health Board areas. While the YAP comes under the Family Support domain of the services it is strongly linked into Child Protection and Alternative Care provisions.

The YAP model comprises orientations / elements which are supported in research on risk and protective factors, and intervention approaches. For example, the programme is community-based and family focused. The model involves working with various components of the wider ecology of the young person and his / her family and, through co-ordinating the efforts of the various agencies involved, aims to optimise the value of available resources. It adopts a mentoring approach and is focused on the strengths of a young person and his / her family.

**3.1 Introduction**

In recent years, services within the Western Health Board region came into contact with a number of young individuals displaying serious emotional and behavioural difficulties. Most were well known within the professional spectrum of care and had regular contact with services over the years. Professionals and volunteers had worked with the group to the best of their capacity but in many of the cases, the problems were unresolved and little change became evident. The Health Board was faced with the problem of looking after the welfare of these young people in an effective and fair manner, reflecting the ethos of recent legislation.

*Service Agreement*

In an attempt to address the needs of this group of youths, the Western Health Board sought alternative effective models of intervention. In September 2002, the Youth Advocate Programme was set up as a three-year pilot project in the Western Health Board areas of Galway and Roscommon. The programme promised to provide at home and community interventions as an alternatives to placements in residential facilities or detention centres to young people in need of structure and support. During the course of the agreement, a number of clients were identified in Mayo and subsequently were accepted to the programme.

*Target Group*

The Youth Advocate Programme together with the Western Health Board Childcare service aim to target and intervene in the lives of young people with the following criteria:

<b>10 Referral Criteria for Programme Participants as presented in Western Health Board/Youth Advocate Programme service Agreement</b>
1. Young people at risk of entering special and high support care
2. Young people at risk of becoming homeless (including out of home)
3. Young people who are homeless particularly those who are not engaging with services
4. Young people in alternative care placements (foster, supported lodgings, residential units/homes, hostel) with potential for returning home
5. Young people journeying through care (multiplicity of placements) but not returning home
6. Young people at risk of placement breakdown
7. Young people at risk of family breakdown
8. Young people attending family support day care services
9. Young people referred to the board under the terms of the Children Act 2001
10. In addition, by agreement families, parents or carers may also be as part of the case.

Table 3.1

The programme also provides a few spaces for adults with learning disabilities. In 2002, YAP began work with fifteen young people. In 2003, a further thirty-one clients came on board. By December 2003, the total number of clients who had worked with the programme was forty-six meaning the programme almost reached full capacity in its start up year.

*Catchment Area*

The Youth Advocate Programme provides a service to this target group within the Western Health areas of Galway city and county (6,149 km sq), Roscommon (2,528 km sq) and to a lesser extent in Mayo (5,550 km sq), where it provides intervention only to adults with disabilities. The service works directly with young people and families from any location within the region, from large urban centres to towns, from villages to isolated areas, e.g. Carna, Roosky and Claremorris.

*Referral Process*

Referrals to the programme are made through the Children Act Services Managers (CASMs) from Galway, Roscommon and Mayo, who are responsible for the implementation of the Children Act 2001. A young person who displays worrying behaviour or who is at risk of family breakdown causing concern to services is brought to the attention of the CASM in the area. The CASM then decides if their criteria match the YAP target group criteria and whether they should be considered as a candidate for the programme. CASMs meet once a month to discuss the cases and are responsible for filling openings in the programme and deciding who is most in need of the intervention. When an opening arises, the programme manager is sent the details of the successful

candidate. The programme manager accepts all referrals to the programme regardless of the family's individual circumstances. The CASMs control all entries to the programme and for this reason they are seen as the 'gatekeepers' to the programme

Due to a limitation of twenty-five clients on the programme at any one time, a waiting list has been set up for potential candidates, which reflects the demand for places on the programme within the first year. The CASMs control the waiting list and YAP staff have no details of cases awaiting a place on the programme. At their monthly meetings, CASMs discuss pending cases and those considered a priority make their way to the top of the list. At present, there are five candidates in Galway and there are six candidates in Roscommon awaiting a place on the programme.

### **3.2 Programme Staff**

#### *YAP Team*

A full-time programme manager, three part-time deputy managers, one full-time administrator and a team of trained advocates staff the programme<sup>14</sup>. The programme is run mainly from the office based in Galway city, with an auxiliary office in Roscommon town. The offices provide space for managerial staff to track and coordinate advocates and young people, to contact local services and structures, to organise and implement wraparound, team-support and supervision meetings, to act as a drop-in centre for the advocates who can use the facilities as they please, and while it is not encouraged to a large extent, the offices can be used from time to time by clients past and present to call in to touch base with the programme staff.

#### *Programme Manager*

The programme manager established the programme in the catchment area. Initial tasks included; securing a suitable office space, recruiting an administrator, interviewing, recruiting and training advocates, receiving referrals, matching advocates to young people, carrying out needs assessments and chairing wraparound meetings. Since then, the programme has become established, and the programme manager has trained the deputy managers to take on many of these tasks. As a result, the position of programme manager has become focused on creating awareness of the programme and taking responsibility of external components; working with the implementation group, integrating YAP into the current range of services and liaising with the Children Act Managers. The programme manager controls the programme's finances and remains responsible for the recruitment of new advocates. The manager continues to work on the ground with young people and their families.

#### *Deputy Managers*

Initially funding was provided to pay a salary to one deputy manager. However, it quickly became apparent that the management structure agreed and funded by the initial service agreement was not workable due to the wide geographical spread and demand of the programme. Roscommon became a programme in its own right where initially it was the intent to service only four to five families in that area. Hence, it was necessary to promote and train three part-time deputy managers from the initial advocate team. The catchment area was divided into three; East Galway, West Galway and Roscommon/Mayo. The deputy managers were recruited to work as managers for twenty hours per week and as advocates for the remainder of the week. The initial recruitment and training of deputy managers was very demanding on both the programme managers time and resources. Increased managerial responsibilities in recent times have meant deputies have been working an increased amount of hours. Deputy managers are responsible for implementing family assessments, chairing wraparound, review and discharge meetings, supervising advocates, attending key meetings with related services and attending case conferences, supporting staff in crisis, on call, monthly reports, management function of team support.

---

<sup>14</sup> See programme structure, figure 3.2, p.21

# YAP ORGANISATIONAL CHART

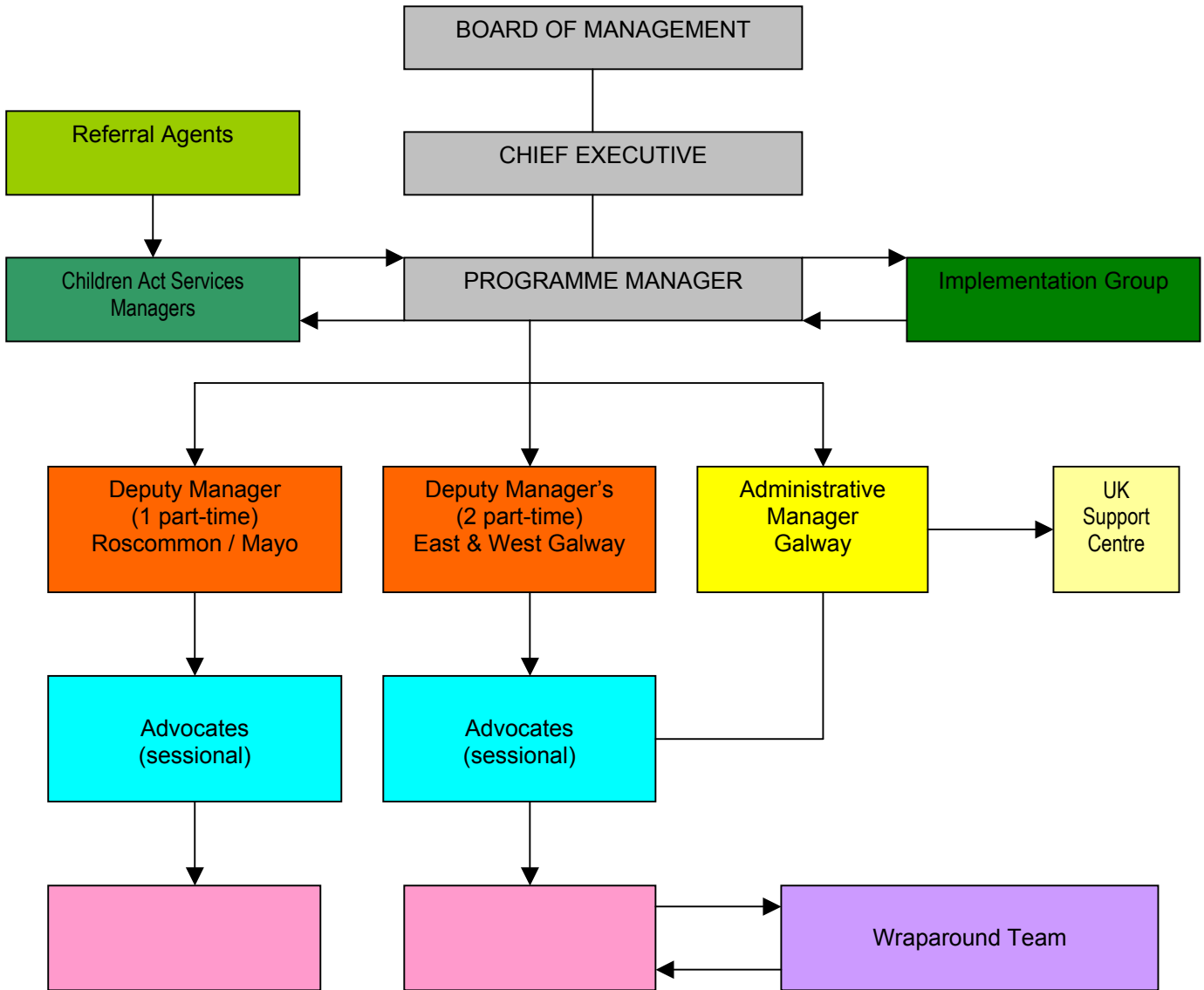


Figure 3.1



*Administrator*

The administrator provides administrative support to YAP management and staff and maintains the office between the hours of 9.30 to 5.00 Monday to Friday. The post involves processing funds, distributing payroll, reimbursing expenses, maintaining telephone coverage, scheduling meetings, assisting with public relations functions and carrying out other duties assigned by the programme manager.

*Advocates*

Between October 2002 and December 2003, twenty-six people had been recruited as an advocate and a further thirteen had worked as support advocates, filling in for advocates who were on leave. The total number of advocates working with the programme had reduced to thirteen by December 2003. Eight of this group were female and five were male. Many of this group have been with the programme since its inception and as a group have come to be named as the 'core team' due to their stability, experience and the levels of training.

**Age Breakdown Of Current Advocates N = 13**

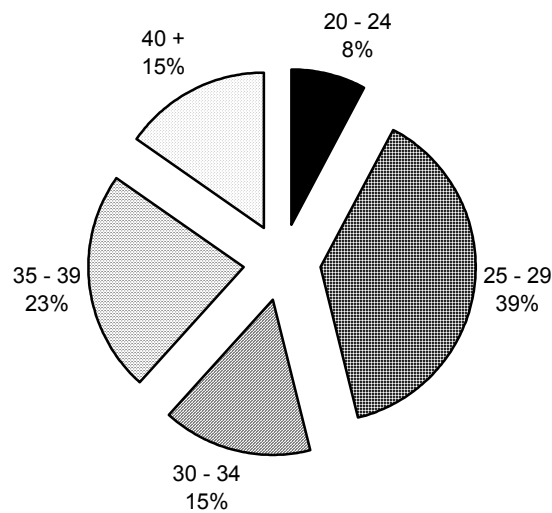


Figure 3.2

Advocates are hired to work with young people for fifteen hours per week. Some have worked as few as ten hours in a week while others have worked as many as fifty-two hours in a week, depending on the number of cases per advocate. The majority of advocates worked with just one case while others have worked with as many as five. Advocates mainly work with clients in the afternoon and evening between the hours of one and nine.

**Number of Young People with whom Advocates have worked N = 26**

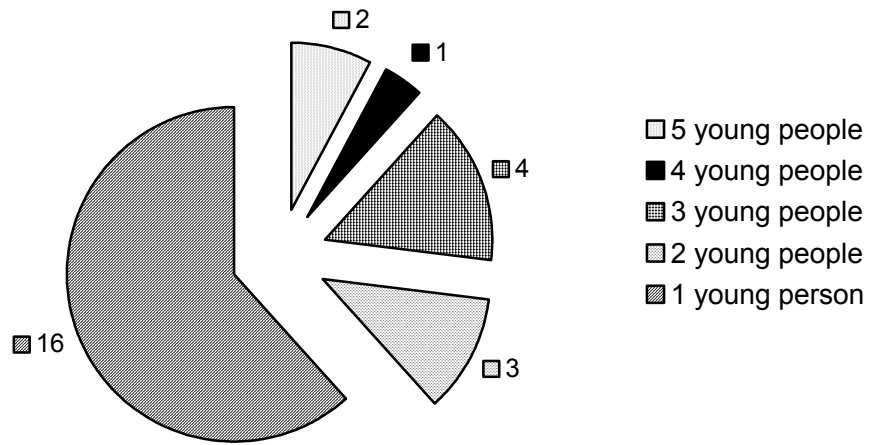


Figure 3.3– Number of young people referred to here is forty-eight as information provided by YAP included 2004 cases

**Timing of advocates' work N = 26**

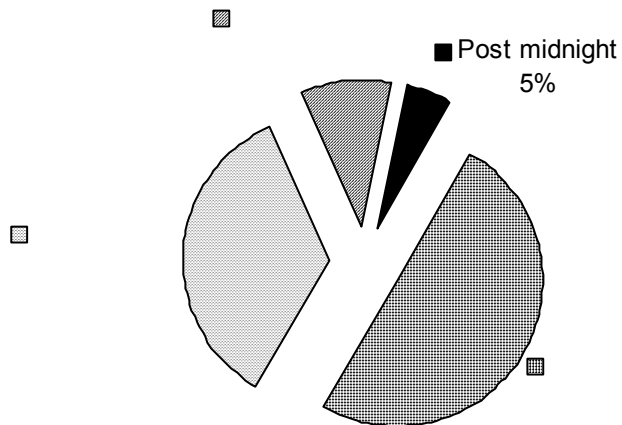


Figure 3.4

The role of the advocate is varied and depends on the needs of each young person. Below is a table providing example of activities advocates have completed with the young people

Advocate/Young Person Activity Table	
Educational	<ul style="list-style-type: none"> <li>• Assist with homework/school work</li> <li>• Liase with teachers/ tutors</li> <li>• Seek classes/ tutors/ training courses/ education programmes</li> <li>• Provide transport to and from school</li> <li>• Support clients attendance at educational facilities</li> <li>• Encourage client to return to education</li> </ul>
Employment	<ul style="list-style-type: none"> <li>• Seek employment for client</li> <li>• Help client with CV</li> </ul>
Home-life & Family Relationships	<ul style="list-style-type: none"> <li>• Identify chores client can help with at home</li> <li>• Help with repairs/ decorating in the home</li> <li>• Organise family mediation</li> <li>• Link with family and extended family</li> <li>• Facilitate family discussions</li> <li>• Organise home visits for those in residential care</li> <li>• Introduce family skills course</li> <li>• Discuss boundaries with family</li> <li>• Attend services with families</li> </ul>
Social Behaviour	<ul style="list-style-type: none"> <li>• Support clients attendance of related services: NYPs, youth centres, summer camp</li> <li>• Introduce client to sports/ art / music related activities. YAP clients have been involved in horse-riding, swimming, football, windsurfing, hill walking, drama classes, creative writing classes, art classes and choir lessons.</li> </ul>
Legal	<ul style="list-style-type: none"> <li>• Support client to adhere to bail conditions/ court orders</li> <li>• Attend court with client</li> <li>• Liase with probation officers</li> </ul>
Accommodation	<ul style="list-style-type: none"> <li>• Seek suitable accommodation</li> <li>• Support transition from residential care to independent living</li> </ul>
Psychological	<ul style="list-style-type: none"> <li>• Seek and support counselling service</li> <li>• Seek and support anger management class</li> </ul>
Financial	<ul style="list-style-type: none"> <li>• Supply client with financial information</li> <li>• Support client in managing finances</li> </ul>
Healthcare	<ul style="list-style-type: none"> <li>• Attend pregnancy advisor with client</li> <li>• Encourage personal healthcare</li> </ul>

Table 3.2

### *Payment & Expenses*

Advocates are offered a package on commencing employment with the programme that includes training, supervision and support and are paid a wage of eleven euros per hour, a level that was recommended by local funders and is paid to advocates from other YAP programmes. Every Monday they fill out the number of hours they have worked on a weekly contact sheet. They receive payment on the Friday of the same week. Advocates have twenty-euros to spend on activities per young person per week. They have four-euros to spend per contact and receive four-euros per contact for travel expenses. To date the highest amount that has been paid to an advocate in travel expenses in one week has been approximately fifty-euros and the lowest amount paid in one week was approximately six-euros. The average level of expenses paid in a week has been between twenty-five and thirty euros.

### **3.3 Recruitment Process & Training**

#### *Recruitment*

The programme manager is responsible for recruiting advocates to the programme. When the programme started up, the position was advertised in the local media and through the Western Health Board. No educational qualifications were needed to apply for the position. A large team of advocates were recruited initially, some were from the local community and many displayed differing skills. Each candidate was interviewed for 20-40 minutes. Successful advocates displayed the following characteristics.

- Experience and interest in working with young people
- Expressed an interest in the community
- Were flexible
- Fitted the ethos of the YAP model
- Were prepared to not give up on cases

At that initial stage, the programme had no local knowledge, community links or local contacts and it was necessary to mass recruit and train a team of advocates. Not all advocates selected initially were from the young peoples communities. However, a knowledge base was built up within the first year and as the programme has evolved, it has become more embedded in the target communities. The recruitment process has changed through the course of the programme and the manager is now more selective and seeks advocates from within local communities.

#### *Induction*

Advocates must participate in a forty-hour induction session before they are recruited. This involves learning about the programme model; the wraparound model, job descriptions, tasks, responsibilities, conflict resolution and Children First guidelines. Potential advocates spend time shadowing advocates on working cases and visit frontline programmes such as Springboards and NYPs. At the end of the induction, management decide if an advocate is to be recruited or not. To date only one potential advocate was not recruited to the role.

#### *On-Going Training*

Advocates receive training on an on-going basis. Training is given by YAP staff from the states and from outside sources. The following table identifies training completed by advocates.

<b>YAP ON-GOING TRAINING PROGRAMME 2002 – 2003</b>	<b>No. of staff who received this training</b>
• Induction Training	All
• Empowerment vs. Enabling	All
• Strength Based Assessment	All
• What works best with difficult families/ strategies and approaches	All
• Drug and Alcohol Abuse/ Intervention Strategies	All
• Mental Health – Dealing with people who are suicidal/depressed	All
• Solution Focused Work	All
• ADHD Coaching	All
• Risk Assessment/ Safety vs. Unconditional Care	All
• First Aid and Life Saving Skill	All
• Motivational Interviewing	All
• 3 Day visit to YAP London & Brixton Programme	All
• Children First	All
• Conflict Resolution Vs Crisis Intervention	All
• Boundaries/Good Work Practice	All
• Review of YAP Service & Model	All
• Specialised Roles training/ advocates	Individual
• Brief Intervention Skills	1 Advocate
• Child Protection Conference	1 Advocate
• Working with rough sleepers	2 Advocates
• Copping On Programme – Training the trainer	4 Advocates
• Court Reports and Presentation Training	1 Advocate /1 Deputy Manager
• Community-based Family Support	1 Advocate /1 Deputy Manager
• Wraparound Seminar	2 Advocates / 2 Deputy Managers
• Bursary – Diploma in Community Development	1 Deputy Manager
• Group Facilitation/ Wraparound Family Meeting	Deputy Managers
• Supervision Training	Deputy Managers and Programme Manager

Table 3.3

### 3.4 Monitoring, Supervision & Case Management

YAP management meet with the team of advocates on a bi-weekly basis for supervision and team support and offer case management on an ongoing basis.

#### *Case Management & Contact*

The programmes manager and deputy managers provide case management services to all families. Advocates contact with management varies from week to week depending on the number of hours worked and the specifics of each case. Advocates make regular phone contact with managers and call the office when necessary. Phone contact can vary from two calls a week to daily calls.

#### *Team Support*

Team support takes place in the YAP office in Galway every second Tuesday evening for a duration of two hours. The aim of team support is to bring the advocates together to share knowledge, get support and to look at what methods have been successful and unsuccessful. Because the advocate is often working alone team support brings them together as a team and are supported by co-workers. Advocates from Roscommon and Mayo can attend team support in the Galway office.

#### *Supervision*

Supervision takes place every other Tuesday evening. It is carried out by the manager and/or the deputy managers. Issues discussed at supervision include case management, personal/ professional development, difficulty with other team members plus help with the ethos of the organisation. Individual supervision exists for all advocates and it is readily available when needed.

#### *24/7 On-Call*

The out of hours service is shared between the programme manager, the deputy managers in Galway and a representative from Roscommon and each is on call seven nights in a month. During the evenings and at weekends, advocates can choose to divert their phones if needed, to one of the four on call representatives. The on-call hours are as follows:

*YAP On- Call Hours*

Every Tuesday of the month	Roscommon representative
Every Wednesday of the month	Galway Deputy Manager 1
Every Thursday of the month	Galway Deputy Manager 2
Every Friday of the month	Programme Manager
Mondays	Rotated on a weekly basis
Weekend	Rotated on a weekly basis

Table 3.4

### 3.5 Implementation Group

The implementation group was set up as part of the in-service contract to assist the programme's integration into the range of established services. The group consists of the regional co-ordinator for family support, the YAP manager, the Children Act Services Managers from Galway, Roscommon and Mayo, the Child Care manager from Galway and Roscommon and representatives from the Brothers Of Charity from Galway and Roscommon.

The group meet once every two months. The aims of the meetings are to:

- Identify barriers
- Identify Community Resources
- Ensure consistency of delivery
- Promote inter-agency/ community co-operation and co-ordination
- Ensure that the programme operates in line with the Western Health Board
- Ensure the programme operates in line with national guidelines and policies
- Ensure quality control and evaluation of service

### 3.6 Changes & Developments

#### *Outreach Group*

In January 2004, YAP established a three-month pilot programme seeking to locate ‘the hidden homeless’ within the Galway area. While many of YAP participants have met with the programme criteria, some fear that there is a group of homeless young people who have slipped through the system and have gone untouched by services for significant lengths of time. YAP have responded by establishing an outreach group whose aim is to explore city and wider community areas to ascertain the level of youth homelessness within the region. Once it has been researched, it is planned to put procedures in place to address or prevent the problem.

#### *Specialised Roles*

In more recent times, the core team of advocates have started to develop specialised roles focusing in areas including adolescent health, mental health/learning disabilities, homelessness, children in care and drugs and alcohol. The aim of the specialised roles is to generate knowledge of services within the area that will be of benefit to new advocates, other services and young people. One of the deputy managers has recently taken on the role of Training and Development Officer to build up programme structures and organise further training for staff.

### 3.7 Funding

The Youth Advocate Programme has been allocated 605,136 euro per annum to fund the running of the programme. The funding is broken down as follows.

<b>Salaries &amp; Wages</b>	<i>Per Year</i>
National Director	10,000
Programme Manager	50,000
Deputy Manager	30,000
Administrator	25,000
Advocates @ 11 euro per hour	234,000
Sub Total Wages and Salaries	349,000
Employment on costs payroll, employers, taxes etc @ 20% of wages and salaries	69,800
<b>Total Personnel</b>	<b>418,800</b>

<b>Travel</b>	<i>Per Year</i>
Programme Manager	2,500
Deputy Manager	1,000
Advocates	26,500
<b>Total Travel</b>	<b>30,000</b>

<b>Other Running Costs</b>	<i>Per Year</i>
Youth Activity Funds	26,500
Flexible Fund	15,000
Fixed Costs	30,000
Start – up technical Assistance	20,000
<b>Total Other running costs</b>	<b>91,500</b>

<b>Total Expenses</b>	<i>Per Year</i>
Total Direct Expenses	540,300
Administrative Overhead @ 12%	64,836
<b>TOTAL COST OF PROGRAMME</b>	<b>605,136</b>

Table 3.5

While there are different ways of approaching the cost per young person of YAP, the most straightforward is to divide the total cost by the numbers of young people involved. For the purposes of this report, the numbers of young people involved refers to those 31 young people completing the programme in 2003. On this basis, in 2003, YAP cost the Western Health Board €19,520 per young person for a six-month intervention.

### **SUMMARY: Chapter 3**

In September 2002, YAP was set up within the WHB region to intervene in the lives of a group of young people and a small number of adults with learning disabilities who were displaying behavioural problems. The programme is structured so that YAP regional management report to the YAP chief executive and board of management<sup>15</sup> and work closely also with the WHB under the terms of the service agreement, particularly the Children Act Services Managers who control the access of clients to the programme. The programme is a wraparound service that pays advocates from the local community at an hourly rate to befriend and guide clients. Advocates participate in an intensive two-day induction session where they receive initial training on the programme model and on Children First guidelines and once they are fully recruited, advocates receive training on an on-going basis. The programme provides monitoring and supervision to staff in the form of team support meetings and supervision meetings that are held on a bi-weekly basis. The role of the advocate varies from case to case; advocates address the needs of young people across a range of different categories including education, employment, home-life and family relationships, social behaviour, legal, accommodation, psychological, financial and healthcare. While advocates are hired to work with young people for fifteen hours a week, the amount of hours worked varies from week to week depending on the individuals needs. The programme provides a unique out of hours service that is available twenty-four hours a day, seven days a week. By December 2003, the programme had worked with forty-six clients identified by CASMs as being in need of the service. CASMs also form part of the implementation group who meet on a bi-monthly basis to discuss the programme's delivery and operation within the region. Other members of the group include the YAP programme manager, the regional coordinator for family support, the childcare manager for Galway and Roscommon and representatives from the Brothers of Charity.

---

<sup>15</sup> YAP chief executive and board of management are in the main based in the U.S.

## Chapter 4 – Profile of Service Users

---

### 4.1 Introduction

Many studies relating to juvenile offenders and young people in need of intervention have identified the same social factors or risk factors that tend to play a part in their lives: Social exclusion; parental neglect or rejection; lack of consistent discipline; peer pressure; school failure; low-income and overcrowded households are common factors, as are signs of conduct disorder; attention deficit disorder; hyperactivity and compulsive risk taking (Utting, 2000; Quinn in O'Mahony, 2002; Warren, 2001). This chapter explores the nature of programme participants by using two sets of data. The first section explores the service users backgrounds and social conditions based on information available in the YAP referral forms. The second section considers results from standardised measures and questionnaires implemented with a number of the young people.

### SECTION 1

The following profile considers the social conditions of Youth Advocate Programme service users at the time they were referred. It takes into consideration any previous involvement in criminal activity and anti-social behaviour, family size and living conditions, intellectual capabilities and mental health needs or other extraneous social factors that have played a significant part in shaping their lives.

### 4.2 Methodology

The information used to build a profile of the group was taken from the Youth Advocate Programme files. Each service user's file contained a referral form that had been completed by the referral agent and signed by the Children Act Services Manager in support of the referral. The referral form provided details of the educational and home-life background of the service user and gave reasons why the referrer believed the young person was in need of YAP intervention. Files contained relevant information relating to the client's past contact with other related services such as minutes from Child Protection case conferences, psychiatric assessments or information relating to the young person's involvement in the juvenile justice system. For the most part, this profile is based on details provided by the referral forms. Where the referral form did not provide adequate information, the information was readily available elsewhere in the client files.

The factors and themes significant to the young people referred to the programme were identified and noted in each case. A list of recurrent relevant factors was drawn up as follows: Age; sex; living arrangements; education; history of alcohol abuse; history of drug abuse; history of criminal activity; previous appearances in court; absent/deceased mother; absent/deceased father; learning disability; psychiatric disorder; experience of physical abuse; experience of sexual abuse; number of siblings in family; ethnicity; role of referrer. A table was created assigning a column to each of the seventeen factors and a row to each specific referral case or client. Each case was then checked off against each factor to see where the service user stood in relation to that social factor. The data was entered into an S.P.S.S. data viewer and analysed and findings are presented below.

### 4.3 Profile of Service Users

#### *Gender and Age*

Between 5<sup>th</sup> September 2002 and 30<sup>th</sup> December 2003, forty-six people had been referred to and accepted by YAP. Thirty-two (70%) were male and fourteen (30%) were female. Twenty-nine (63%) were between the ages fourteen and sixteen and five (11%) were male adults with learning disabilities aged between eighteen and twenty-eight. The youngest participant was aged ten at time of referral.



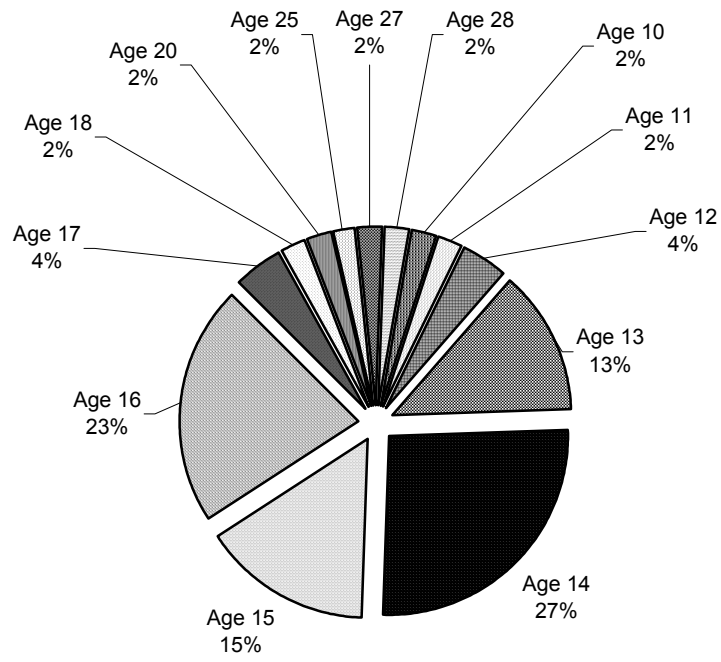


Figure 4.1

**Age of service users on entry to YAP N = 46**

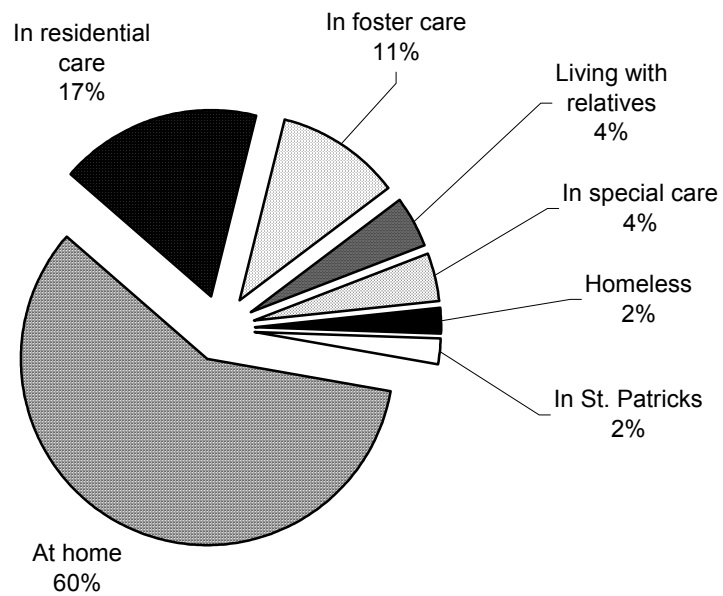


Figure 4.2

**Living arrangements N = 46**

### Living Arrangements

At the time of referral, twenty seven (60%) of the group were living at home with their families, eight (17%) were in residential care, five (11%) were in foster care and two (4%) had been placed in special care arrangements. Two (4%) were living with relatives and another was homeless but had been living in temporary B & B and hostel accommodation.

### Family

A large proportion of the young people had experienced the death or desertion of one or both parents or had little or no contact with their parents. Eight (17%) of the young people had an absent or deceased mother and twenty-two (48%) had an absent or deceased father. One young person had no contact with either parent. Twenty-three of the group (50%) had between one and four brothers and sisters. Nine (20%) come from a family with five to six siblings and eight (17%) come from a family with seven or more siblings. In many cases, these brothers and sisters have different mothers or fathers. Six members of the group (13%) have no brothers or sisters.

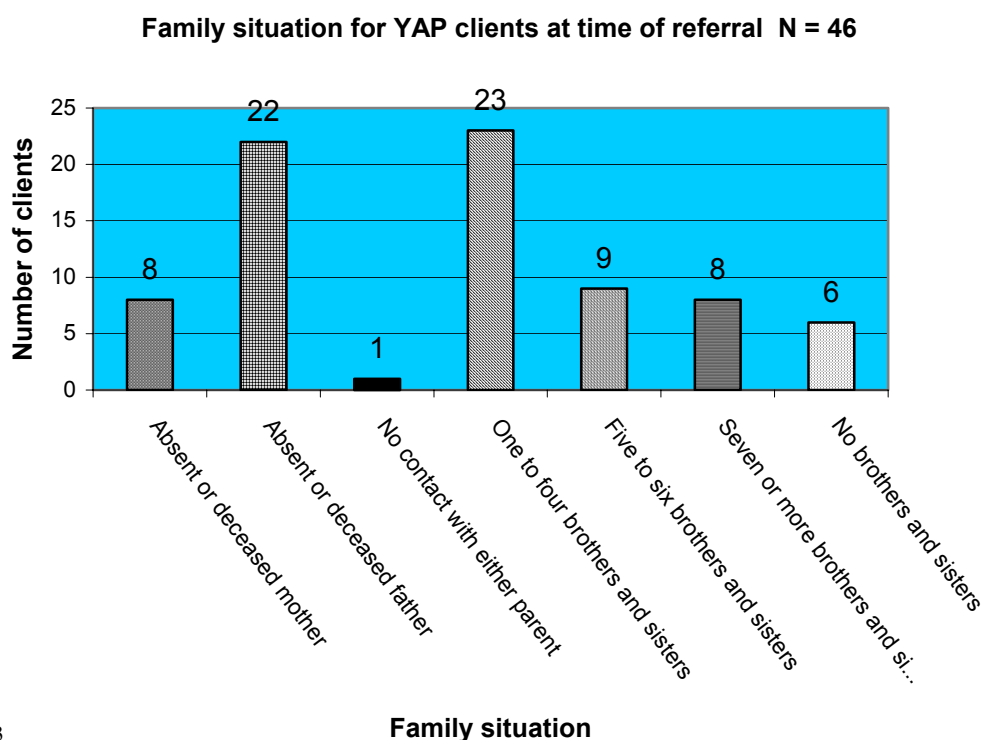


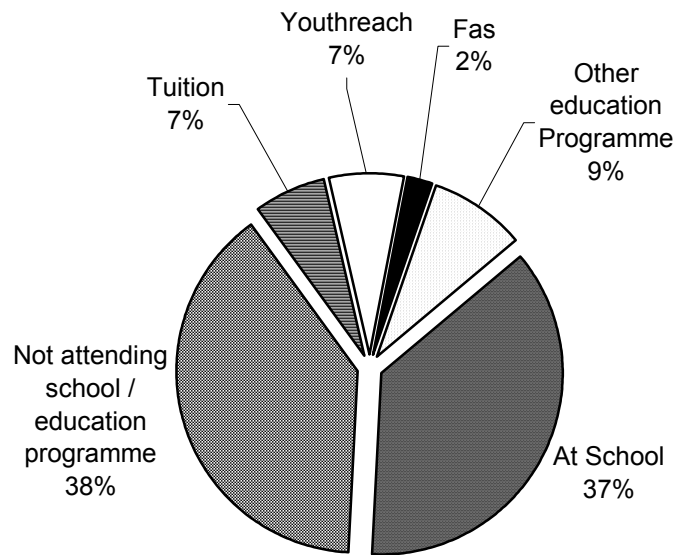
Figure 4.3

### Ethnicity

Forty-four are from settled native Irish communities and are living in the Galway, Roscommon or Mayo areas. Two young people on the programme come from travelling backgrounds.

### Education and Training

In many cases, education and training needs were significant reasons for referring clients to the programme. Over a third were not attending any formal educational or training programme and had no formal skills or qualifications. At the time of referral, seventeen (38%) were not attending any formal educational programme and of this number, thirteen (28%) were between the ages of fourteen and sixteen. Seventeen (37%) of the group were attending mainstream school, though for many, attendance was sporadic and the display of behavioural problems within the classroom setting was a significant issue. Three (7%) were attending Youthreach, three (7%) were in receipt of private tuition, one was attending FAS and four (9%) were attending other educational or training programmes.



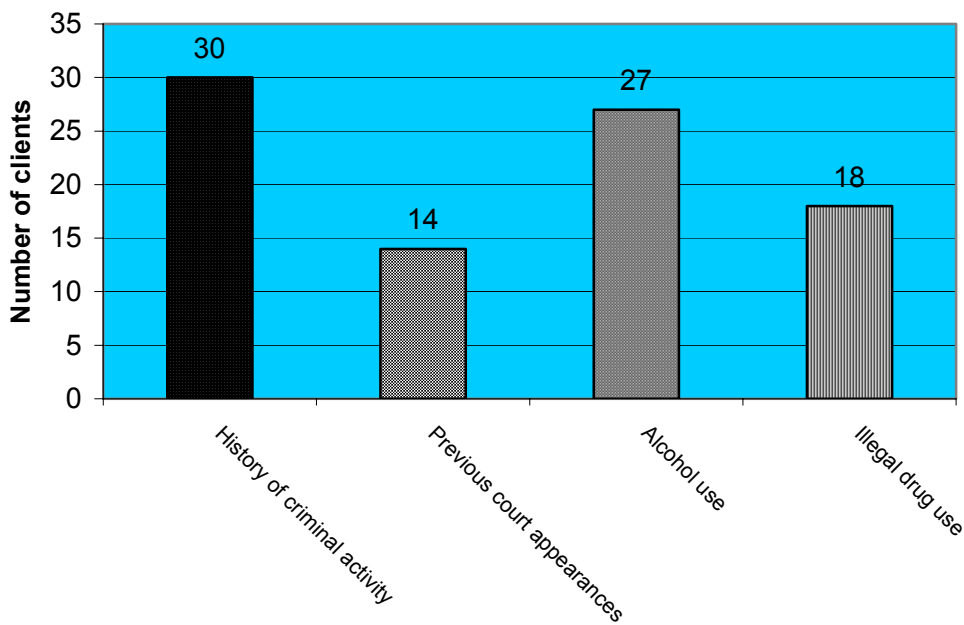
Education N = 46

Figure 4.4

#### Anti-Social and Criminal Behaviour

The majority of clients were referred to YAP due to their involvement in anti-social, criminal or offending behaviour. Thirty (65%) have a history of criminal activity and are known to the Gardai, Juvenile Liasons Officers or the Probation Service. Fourteen (30%) of the group had previously been brought before the court due to participation in criminal activity or anti-social behaviour. Twenty-seven (59%) were known to have used alcohol prior to entry to the programme<sup>16</sup>. Eighteen (39%) of the group are reported to have used illegal drugs prior to participation on the programme. The most commonly used drugs are hash and ecstasy.

Anti-Social and Criminal Behaviour at time of referral  
N = 46



Anti-social / Criminal Behaviour

Figure 4.5

<sup>16</sup> This number includes five adult service users

### *Mental Health and Abuse*

Fifteen (33%) of service users were recognised as having a learning disability at the time of referral and eleven (24%) had been diagnosed with a psychiatric disorder. Seventeen (37%) of the clients are known to have experienced domestic violence and seven (15%) of the clients are reported to have been victim of sexual abuse at some stage in their lives. In one case, sexual abuse had been suspected but had not been confirmed.

### *Referrers*

Thirty-three (72%) of referrals to YAP were made by social workers, which highlights a large number having prior involvement with social services. Four (9%) referrals were made by NYP project leaders. Three referrals were made by Community Childcare leaders, one was made by Brothers of Charity, two from Western Care, one by a Youth Development Coordinator and two by Family Service Project Workers.

## SECTION 2

### 4.4 Introduction

Research measures were implemented with a number of the young people with an aim to further understand the behavioural nature of the client group by examining their perceptions regarding their own behaviour, social networks and mental health. A questionnaire was used as a means of measuring their risk taking capabilities.

### 4.5 Methodology

A letter and a brochure explaining the research process were sent to parents and carers of the young people asking permission for the young people to participate with the evaluation. From there, the researcher arranged with each advocate a suitable time and location to meet. For each meeting the advocate was allowed to sit in while the young people completed the measures. In most cases, the researcher read aloud the questions and the young person filled in the answers to suit. In two cases, the researcher filled in the answers for the young person where one young person did not want to write and another was unable to write.

The measures were implemented with twenty-two of the young people between May and August 2003. The respondent group were aged between twelve and seventeen and thirteen were male and nine were female. At that time, there were thirty-one participants on the programme. It proved impossible to implement the measures in the case of five young people in spite of strenuous efforts by the researcher to do so. For these young people, their personal circumstances made research with them impossible. Despite having previously agreed to take part, two other young people refused when face to face with the researcher. The two adult service users on the programme at that time were not involved in this part of the research due to the inappropriateness of the measures for them.

### 4.6 Research Measures Findings

#### ► *Measure 1: Strengths and Difficulties Questionnaire*

The Strengths and Difficulties questionnaire is a behavioural screening tool that has been tested extensively for validity and reliability<sup>17</sup>. Young persons complete the 25-item questionnaire as a means of screening their behaviour, testing conduct, emotions, hyperactivity, peer relations and pro-social behaviour. Once complete, their behaviour can be classed into one of three categories; normal (80% of the population), borderline (10% of the population) or abnormal (10% of the population). In keeping with other reports that have used this measure, these labels have been altered for our usage to young people with 'no problems' (normal), 'some problems' (borderline) and 'serious problems' (abnormal)<sup>18</sup>. The scale defines what is 'normal' by making comparison to scores vis a vis the common score of the rest of the population.

---

<sup>17</sup> McKeown, 2001

<sup>18</sup> McKeown, 2001

### Level of problems within five categories N = 22

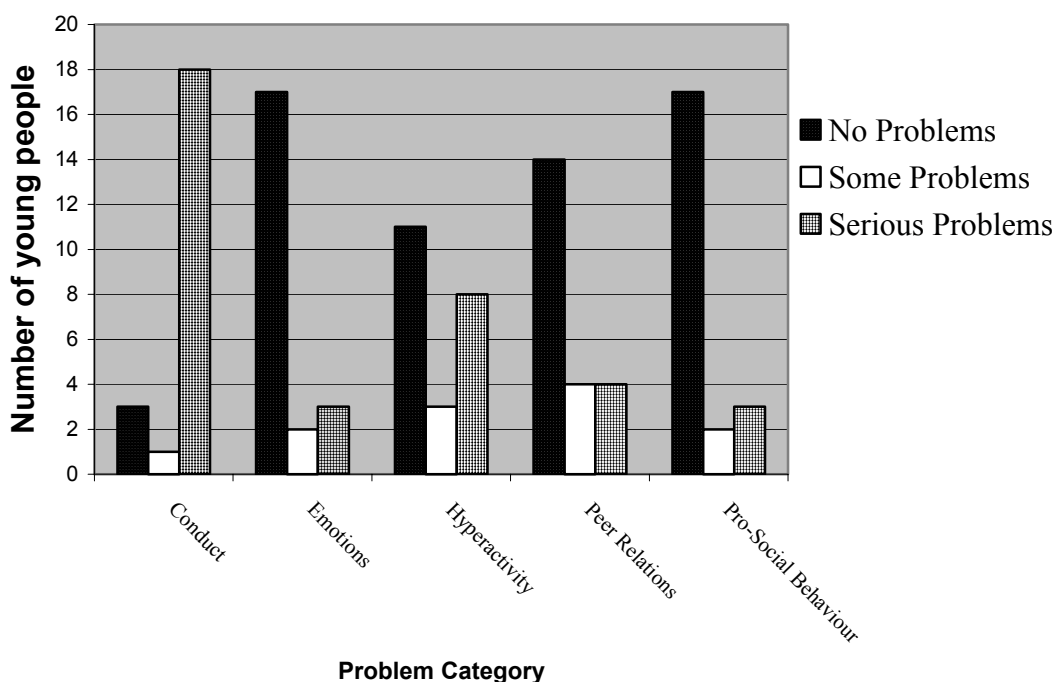


Figure 4.6

#### *Conduct Problems*

Eighteen (82%) of the young people were recognised as having serious conduct problems. Three (14%) had no problems in this area and one young person was thought to have ‘some’ problems in this area.

#### *Emotional Problems*

Seventeen respondents (77%) were recognised as having no problems with their emotions. Two (9%) had some emotional problems and three young people (14%) had severe emotional problems.

#### *Hyperactivity*

Eleven (50%) of the young people had no problems with hyperactivity. Three (14%) had some problems with hyperactive behaviour and eight (36%) had serious problems with hyperactivity.

#### *Peer Relations*

Fourteen of the group (64%) were perceived as having no problems with their peer relations. Four (18%) were thought to have some problems with peer associations, four (18%) were perceived as having serious problems in this area.

#### *Pro-Social Behaviour*

When tested for pro-social behaviour it was found that the majority of seventeen (77%) had no problems in this area. Two (9%) were found to have some problems with pro-social behaviour and three (14%) were thought to have serious problems in this area.

### Total difficulties experienced by the group N = 22

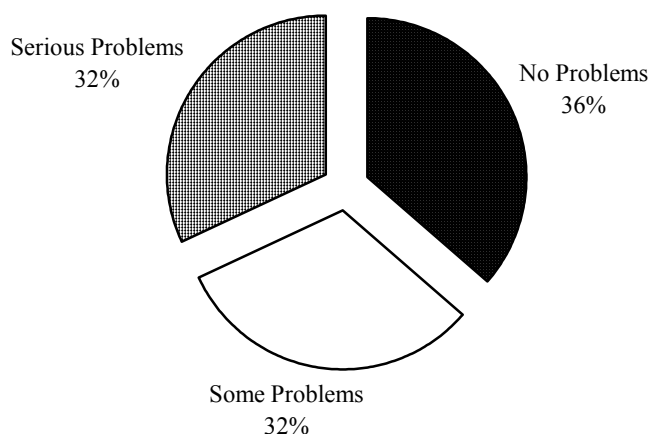


Figure 4.7

### *Service Users Perceptions of Difficulties*

Sixty four per cent had been experiencing difficulties. Nineteen young people (86%) were aware that they have some sort of difficulties in the areas of emotions, concentration, behaviour and being able to get on with other people. When asked about the level of difficulties they had been experiencing twelve thought the difficulties were 'minor', five thought they were 'definite' and two thought they were 'severe'.

### Level of difficulties young people believe they experience N = 19

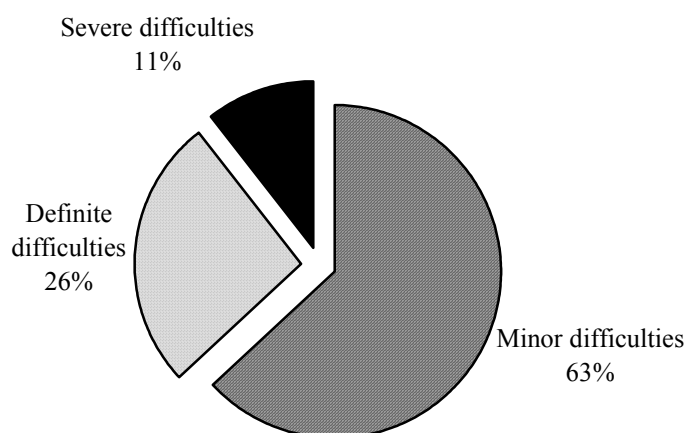


Figure 4.8

Seventeen of the group who had experienced difficulties said they had been present for over a year and two claimed the difficulties had been present for just less than a month. When asked if the difficulties upset or distressed them, three claimed that the difficulties 'do not' upset or distress them, ten said that the difficulties upset or distressed them 'a little', five said the difficulties distressed them 'quite a lot' and one respondent claimed the difficulties upset or distressed them 'a great deal'.

**Do the difficulties interfere with the following areas? N = 19**

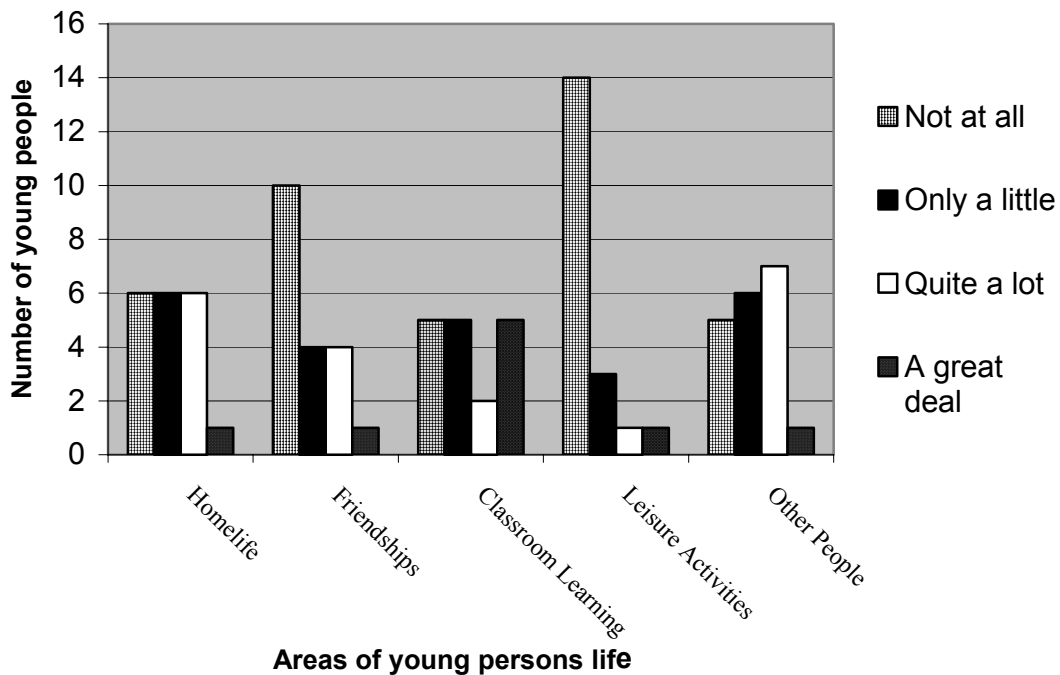


Figure 4.9

*Home-Life*

Respondents were asked if the difficulties interfered with their home life. Six respondents claimed they did not, six thought they interfered ‘a little’, six claimed they interfered ‘quite a lot’ and one believed the difficulties interfered with their home life ‘a great deal’.

*Friendships*

Ten of those who believed they had difficulties did not think the difficulties interfered with their friendships. Four thought the difficulties interfered with their relationships with their friends ‘only a little’, four thought the difficulties interfered with their friendships ‘quite a lot’ and one respondent claimed they interfered with their friendships ‘a great deal’.

*Class Room Learning*

Five believed the difficulties did not interfere with their classroom learning. The same number thought the difficulties interfered with their classroom learning ‘only a little’. Two respondents thought the difficulties interfered in this area ‘quite a lot’, while over a quarter of those with difficulties (five) believed the difficulties interfered in their classroom learning ‘a great deal’. Two were not participating in any form of education at the time.

*Leisure Activities*

Fourteen respondents thought the difficulties did not interfere with their leisure activities. Three believed their leisure activities were affected ‘only a little’ by the difficulties. One respondent thought the difficulties affected their leisure activities ‘quite a lot’ and another respondent believed the difficulties affected their leisure activities ‘a great deal’.

*Other People*

When asked if they thought if the difficulties made it harder on those around them, five replied ‘not at all’, six replied ‘only a little’, seven replied ‘quite a lot’ and one respondent replied ‘a great deal’.



### ► *Measure 2: Adolescent Well Being Scale*

The Adolescent Well Being Scale was designed as a tool to pick up possible depression in older children and teenagers. The scale has eighteen questions each relating to different aspects of the young persons life and they are asked to indicate whether the statement applies to them 'most of the time', 'sometimes' or 'never'. The scale can pick up possible depression in older children and adolescents and understanding how they feel in themselves is vital to the assessment. The results of the scale showed that eighteen (82%) of the young people were 'normal' and four (18%) indicated they were likely to have a depressive order.

### ► *Measure 3: Social Network Questionnaire*

The social network questionnaire is designed to assess networks and relationships young people are involved with by asking them to write down the names of the people they are most in contact with, asking them to categorise their relationship to that person and asking them to assess the quality of that relationship. This tool assesses the young persons perception regarding the relationships they have established with those they see most regularly.

In total, the group nominated 247 people. The grid allows space for fourteen names to be written down. Fifty per cent of the young people used all of the spaces in the grid, implying that they have contact with a large circle of people. One young person named three family members as the only people she is in contact with on a weekly basis. The average number of contact names per person is eleven. This implies that the young people on the programme are generally in contact with a significant number of people on a weekly basis.

#### *Family and Carer Networks*

Seventeen nominated their mothers as people they would see and talk to on a weekly basis. According to the young people, twelve of these relationships make them feel 'good', four make them feel 'half and half' and one maternal relationship makes the young person feel 'bad'. Thirteen young people named their fathers as people they would see and talk to regularly. The majority of these relationships make the young person feel 'good' and the remaining relationship is judged by the young person to be 'half and half'. All those who named their carer / step-parent or foster parent had a consistently 'good' or positive relationship. Thirty-five (76%) sibling relationships were considered by the young people to be positive or make them feel 'good'. The remaining eleven (24%) claim that the relationship with their siblings is 'half and half'. Six 'other relatives' were named in the exercise, four of these relationships made the young person feel 'good', another made the young person feel 'half and half' and another made the young person feel 'bad'.

#### *Friendship Networks*

Sixty-three 'close friends' were nominated altogether by the group as people they would see regularly. Fifty-two (83%) of these relationships make the young people feel 'good', ten (16%) of these friendships make the young person feel 'half and half' and one friendship makes the young person feel 'bad'. Thirty-six (54%) of the relationships respondents have with 'other friends' make the young person feel 'good'. Thirty (45%) relationships with 'other friends' make the young person feel 'half and half' and the remaining relationship makes the young person feel 'bad'. Two others living in residential settings were not named under the category 'friends'. One of these relationships was deemed 'good' and the other 'bad'. Ten names were listed under the category 'other person'. For the most part this category was used to nominate the young persons boyfriend / girlfriend, son / daughter. Fifty per cent of these relationships were considered 'good' and fifty per cent were considered 'half and half'.

#### *Professional Networks*

Nine of the named group were categorised into 'professional person', in which social workers, teachers and tutors were named. Of this group, six relationships with the professional persons made the young person feel 'good', one claimed that the relationship was 'half and half', and the remaining two relationships with the professional made the young person feel 'bad'.

#### *Advocate Networks*

Six Youth Advocate programme advocates were named. Five of the six relationships with advocate made the young person feel 'good'. The remaining relationship was considered 'half and half'.

Relationship to young person	% Of Total Named N = 247	How the relationship makes the young person feel		
		Good	Half & Half	Bad
1 Mother	17 (7%)	12 (71%)	4 (24%)	1 (6%)
2 Father	13 (5%)	12 (92%)	1 (8%)	-
3 Carer/Step-Parent/Foster parent	8 (3%)	8 (100%)	-	-
4 Brothers & Sisters	46 (19%)	35 (76%)	11 (24%)	-
5 Other Relative	6 (2%)	4 (67%)	1 (17%)	1 (17%)
6 Close friends	63 (26%)	52 (83%)	10 (16%)	1 (2%)
7 Other friends	67 (27%)	36 (54%)	30 (45%)	1 (2%)
8 Others in residential setting	2 (1%)	1 (50%)	-	1 (50%)
9 Other Persons	10 (4%)	5 (50%)	5 (50%)	-
10 Professional Persons	9 (4%)	6 (67%)	1 (11%)	2 (22%)
11 Advocates	6 (2%)	5 (83%)	1 (17%)	-

**Quality of relationship between young person and various categories**

Table 4.1

► *Measure 4: Social Provisions Scale*

This scale is designed to measure provisions of social relationship and social support in the lives of young people. The provisions include concrete or practical support, emotional support, esteem support and advice support.

*Concrete and Practical Support*

		Yes	Sometimes	No
1	Friends	91%	0	9%
2	Parents/Carers	86%	14%	0
3	Brothers/Sisters	59%	29%	12%
4	Other adults	68%	23%	9%

Table 4.2

The highest level of concrete or practical support comes from friends with 91% of young people admitting to having friends they can depend on for this kind of support. The second category the group can depend on most for support is their parents, and carers (86%) followed by other adults they are in contact with (68%). Brothers and sisters are the least reliable category for practical support, with 45% claiming they can depend on this group consistently

*Emotional Support*

		Yes	Sometimes	No
1	Friends	59%	32%	9%
2	Parents/Carers	77%	23%	0
3	Brothers/Sisters	77%	18%	6%
4	Other adults	77%	18%	5%

Table 4.3

The highest level of emotional support comes from parents and carers with the relationships consistently providing 77% with a sense of acceptance and happiness, and 23% providing a sense of acceptance and happiness sometimes. Other adults too provide the young people with a high level of emotional support (77%) but some feel they are provided with no emotional support from this group (6%). The category ‘friends’ are the least likely to provide emotional support to the young people.

*Esteem Support*

		Yes	Sometimes	No
1	Friends	59%	41%	0
2	Parents/Carers	73%	27%	0
3	Brothers/Sisters	53%	29%	18%
4	Other adults	68%	27%	5%

Table 4.4

Parents and carers provide the highest level of esteem support in that the young people felt this group recognise their talents and abilities more than others do. Brothers and sisters are least likely to provide esteem support to the young people. 18% of the young people felt they received no esteem support from their brothers and sisters.

*Advice Support*

		Yes	Sometimes	No
1	Friends	86%	5%	9%
2	Parents/Carers	73%	18%	9%
3	Brothers/Sisters	59%	24%	18%
4	Other adults	64%	23%	14%

Table 4.5

Friends provide the young people with the highest level of advice support with 86% of the group admitting they can trust a friend to turn to for advice if they need it. Nine per cent felt they could not depend on friends for advice support. Brothers and sisters scored lowest in this category as 59% of the group claimed they would turn to their brothers and sisters for advice and 18% claimed they would definitely not turn to brothers and sisters for advice.

► *Measure 5: Risk Behaviour Questionnaire*

A questionnaire was designed seeking to assess the level of risk behaviour clients had engaged in prior to their participation with the Youth Advocate Programme. The design of this tool was guided by questionnaires used in longitudinal studies assessing adolescent behaviour<sup>19</sup>. The questionnaire asked the young person to think about their behaviour over the past twelve months and to answer the questions accordingly. The questionnaire consisted of eighteen questions. The areas investigated include stealing, public offence, violent and threatening behaviour, smoking, alcohol use, drug taking and engagement in unprotected sex. Each client was firstly asked to answer ‘yes’ or ‘no’ as to whether or not they had engaged a named activity. If they answered to the first part of the question affirmatively, they were asked to reveal the number of times they had engaged in this activity within the twelve month time-frame. The findings of the questionnaire reflect what the young people answered with regard to their own behaviour.

*Stealing*

Fourteen (64%) of the young people said they stole from a shop over the 12-month period prior to the time of the interview. Seven of this number said they stole from a shop ten or more times and four said they stole from a shop once or twice.

**How many times have you taken something from a shop? N = 14**

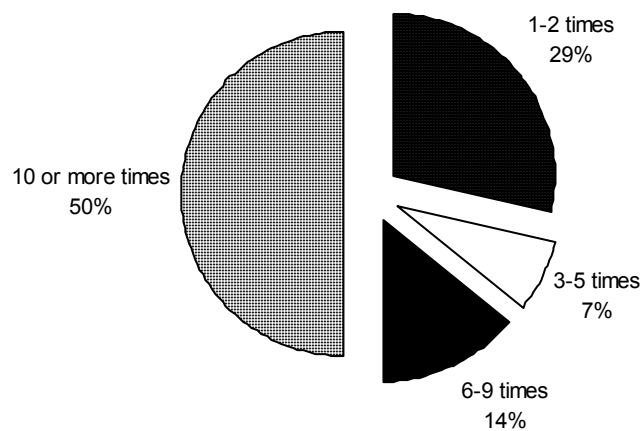


Figure 4.10

Eleven of the young people said they had stolen or ridden in a stolen vehicle. Of that number four said they had done this on ten or more occasions, eight said they had done this on six to nine occasions, three said they had done this on three to five occasions and two claimed they had ridden in a stolen vehicle once or twice. Four young people claim to have taken something from school that did not belong to them; two of them have taken something from school twice while the remaining two have taken something from school on a number of occasions.

Six of the group said they have broken into a house or building to steal something from it. Three of this group have broken into a house or building once or twice, two have done this three to five times while one young person has done this on six to nine occasions.

<sup>19</sup> Percy, Andy, *Young People in Northern Ireland 2003 Questionnaire*

Twelve of the young people have taken money or something else from their home. Of this number, six have done this once or twice, three have done this three to five times, two have done this six to nine times and two have done this on ten or more occasions.

**How many times have you taken something from your home? N = 13**

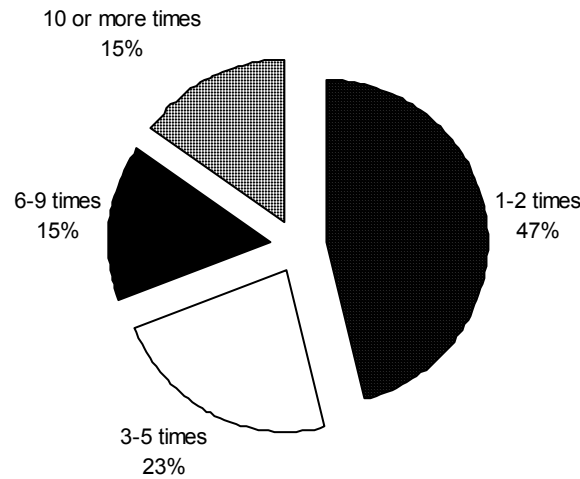


Figure 4.11

Five of the young people said they have broken into a car or a van to steal something out of it. Three have done this on three to five occasions. One young person has broken into a car once or twice and another young person has broken into a car or van on six to nine occasions.

*Public Offence*

Fourteen (64%) of the group said they have behaved badly in a public place so that people complained or they got into trouble. Of this number, twelve said they behaved badly on more than one or two occasions, five said they have done this to three to five times, three said six to nine times and four said they have got into trouble for their behaviour on more than ten occasions. Eleven (50%) of the young people said they have deliberately damaged or destroyed property. Four have done this on one to two occasions, two on three to five occasions, two on six to nine occasions and three on ten or more occasions.

**How many times have you damaged property? N = 11**

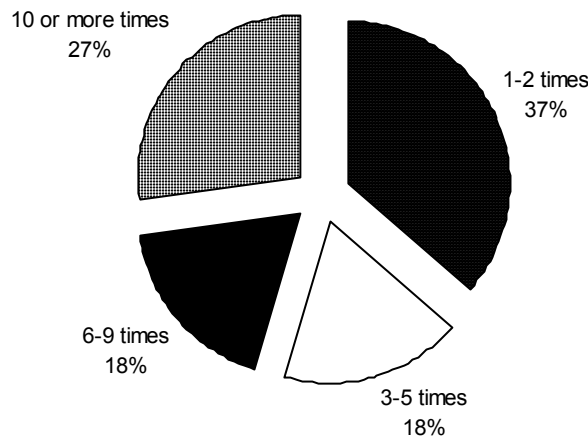


Figure 4.12

Seven (32%) have engaged in writing things or spraying paint on property that did not belong to them. Five have done this on one to two occasions. One youth has done this on three to five occasions while another youth regularly participates in this activity, saying he has written things or sprayed paint on property on more than ten occasions. Three of the young people said they have set fire or have tried to set fire to property. Two of the three have done this once or twice while the other has done this three to five times.

*Violent and Threatening Behaviour*

Four (18%) of the young people said they have carried a knife with them in case it was needed in a fight. Two of this group said they have carried a weapon with them ten or more times. Another has carried a weapon with them on three to five occasions while the other has carried a weapon with them once or twice. Six (27%) said they have used force, threats or a weapon to get money or something else from somebody. Five have done this on one to two occasions while one young person has done this on 3 to 5 occasions. Fifteen of the group said they have hit, kicked or punched someone on purpose to injure them. Of this group, nine are male and six are female. One third (5) of this group have hit kicked or punched someone ten or more times. Three have purposely hit, kicked or punched people on six to nine occasions, three have done this on three to five occasions and four have done this on one or two occasions.

**How many times have you hit, kicked or punched someone to injure them? N = 15**

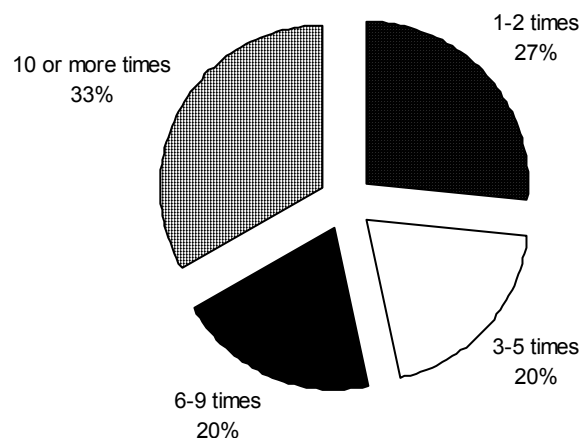


Figure 4.13

**Number of males and females who have hit, kicked or punched someone on purpose to injure them N = 21**

Gender	Yes	No	Total
Male	9	3	12
Female	6	3	9
<b>Total</b>	15	6	21

Table 4.6

*Smoking, Alcohol, Drug Use & Unprotected Sex.*

Nineteen of the young people said they have smoked cigarettes within the last year. All respondents between the ages of 14 and 17 said they smoked on a regular basis. Two of the group do not smoke and one respondent refrained from answering this question. Twelve of those who smoke buy their cigarettes from a shop. One respondent said they get their cigarettes from their house. Another gets cigarettes from their house and from the shop. One young person gets their cigarettes from their parents and the shop and another gets cigarettes from friends, parents and the shop. One young person would not give this information as he suspected the research findings would be used to locate the source of his cigarettes and attempt to close down the premises, which would prevent himself and other young people getting cigarettes in future.

Seventeen (77%) of the young people on the programme have used alcohol within the last twelve months. Four of the group have not tried alcohol and one young person did not answer this question. All those who have used alcohol are aged between fourteen and seventeen. Of the group who have used alcohol, four claim they are allowed by their parents or carers to drink alcohol. One respondent said he is allowed to drink in the presence of their parents or carers. Eleven said they have no permission from their parents or carers to drink alcohol but do so regardless. Eleven (73%) buy alcohol themselves from a shop. Two are sometimes given alcohol by older friends and sometimes buy it themselves in the shop. One respondent gets alcohol only from older friends while another young person gets it from 'somewhere else', the location of which was not divulged. Again, one young person refrained from answering this question in case the purpose of the research was to investigate which premises are serving alcohol to young people under eighteen.

**Where do you usually get your alcohol from? N = 15**

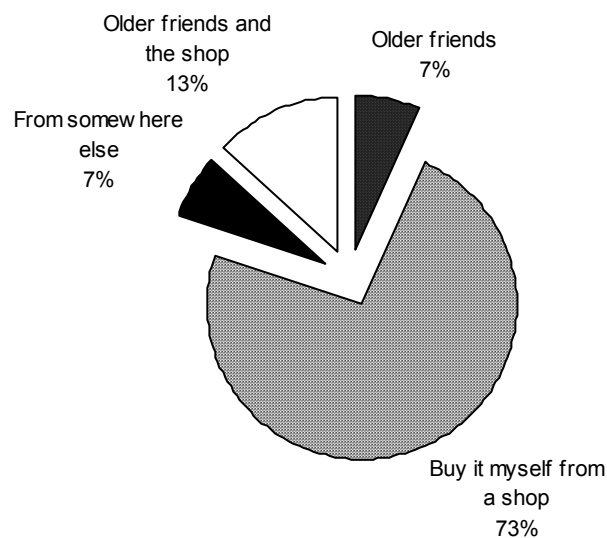


Figure 4.14

Twelve of the twenty-two young people have tried illegal drugs in the past twelve months. Cannabis is the most popular drug of choice and eleven of the group have used this drug. Ecstasy is the second most popular drug within this group. Six of the drug-taking group have used ecstasy. Other drugs that have been used by the group include speed, cocaine, solvents, magic mushrooms and poppers. Eleven (50%) of the group said they have had unprotected sex within the last year. Seven of this group were female and four were male. Six said they have had unprotected sex on ten or more occasions. One respondent said they had engaged in unprotected sex on six to nine occasions, another said they had engaged in unprotected sex on three to five occasions, while three of the group have had unprotected sex on one to two occasions within the past twelve months.

## **SUMMARY: Chapter 4**

By December 2003, YAP had worked with forty-six clients, the majority of whom had been referred by the Social Work department. Forty-one were young people aged between ten and seventeen and five were adult males with learning disabilities, aged between eighteen and twenty-eight. The majority of the group lived at home (60%) and thirty-two per cent of the group were living in the care of the Western Health Board. Seventeen (37%) were from large families with five or more children and almost half of the group had experienced the death or desertion of their father. Two of the group were from travelling backgrounds. Education and training needs were significant within the client group. Over one-third was not attending any educational programme and of that amount, thirteen (28%) were of the legal school-going age. Thirty (65%) had a history of criminal activity and fourteen (30%) had appeared in court in relation to criminal offences. Twenty-seven (59%) had used alcohol and eighteen (39%) had used illegal drugs. One-third displayed signs of learning disabilities and just less than one quarter had been diagnosed with psychiatric disorders. Over one third had experienced domestic violence at home and fifteen per cent had been victim to sexual abuse. Referral information has provided conclusive evidence that the client group had significant needs and difficulties at the time they were referred.

The standardised measure found that the majority of the respondents had serious conduct problems, half the group had problems with hyperactivity, over one third had problems relating to peer relations and five suffered from emotional problems while five appeared to have problems with behaving in a pro-social manner. Nineteen of the group were aware they were experiencing difficulties and sixteen of the group said these difficulties had caused them distress. The scale testing for depression indicated that four of the young people were likely to be suffering from a depressive disorder. In the main, the young people perceived the relationships they had with others to be positive with 71% of relationships they have with people make them feel 'good', 26% of relationships they have with people make them feel 'half and half' and 3% of relationships they have with people make them feel 'bad'. Young people said that the most practical support and advice support was provided by their friends and the most emotional support and esteem support is provided by their parents. The majority of the group said they had engaged in risk behaviour, a high percentage of whom have admitted to stealing, behaving badly in public and presenting with violent and threatening behaviour. The majority of the group smoke cigarettes and drink alcohol, over half the group have used illegal drugs and half the group have engaged in unprotected sex.



### 5.1 Introduction

This chapter is in two parts. The first covers programme outcomes based on a detailed analysis of service user files. The second involves a brief consideration of the programme's costs in relation to its benefits.

#### SECTION 1:

### 5.2 File Analysis

The programme files were used to track the progress of individual service users from the time they began the programme to the time they completed the programme. Details of the needs assessments, methods of intervention and clients' situations at programme completion provided ample information to assess this. In every case, YAP was instrumental in identifying the service user's needs and organised methods of intervention to meet these needs. However, it must be stressed that the evaluator is aware that all outcomes cannot be attributed solely to the programme, as other related services were actively involved with the young people throughout the programme period. According to the wraparound methodology, the programme does not work in isolation with young people and is therefore difficult to assess the impact of the programme at this point without considering the work of other services. However, this analysis tells us about the situation of service users before and after their participation with the programme. It allows us to judge whether their position has been improved by comparing where they stood after the programme in relation to where they stood prior to the programme with regard to specific categories of need. Considering the nature of the target group, it is assumed that any signs of improvement to former behavioural tendencies proved to some extent that the programme is effective in its endeavours.

#### *Methodology*

Details of the 'needs assessments' and 'wraparound meetings' were considered for every young person who had completed the programme by the end of November 2003. Every young person had needs identified in differing areas and for the purpose of the evaluation, these have been broken into nine main categories: education and training; employment; home-life and family relationships; social behaviour and peer associations; legal; accommodation; psychological/ social/ emotional; financial; healthcare/personal care. The weekly progress reports, the method used by YAP advocates to track the week's events and activities, were examined to see how needs were being addressed and to assess the outcome of the young person in relation to each category. The reports provide factual details about the client's education or employment, family, social life and any other special events that may have taken place from week to week. The information is based solely on the advocates' documentation of events and on their interpretation of situations affecting the client.

Twenty-six young people under the age of eighteen had completed the six-month programme by November 30<sup>th</sup> 2003. Programme files containing information about this group were studied, each case was mapped carefully, noting the individual needs identified by the programme, the method of intervention used by YAP to address these needs and the outcome intended to come from the intervention. The needs and intended outcome were then compared with the actual outcome. The outcome was determined by the young person's situation at time of programme completion. Improvement was judged by comparing pre-intervention and post-intervention situations in relation to each specific need. Improvement was measured in three categories; 'definite improvement', 'slight improvement' and 'no improvement'; the latter reflecting no change or dis-improvement. In some cases, progress was 'ongoing' as no outcome had been established and in some cases, the files did not report the progress and to keep the analytical process secure the researcher has used the term 'unsure' in those cases. While the progress measurement was subjective in that the researcher was responsible for interpreting the progress reports, the assessments are based on objective facts as documented by the advocates. The data that is presented in this chapter is supported by a database developed by the researcher outlining detailed objectives, actions and outcomes for every single objective established for the young people. In the case of three service users, the wraparound meeting did not take place and there were no details regarding the specific needs and goals identified. The following analysis focuses on the files of twenty-three young people who participated with the programme between October 2002 and November 2003.

### 5.3 Findings

The most common area in need of intervention was 'social behaviour and peers' with 95% of young people displaying 'need' in this area. 'Home-life and family relationships' and 'education and training' followed as the next most significant categories in need of intervention. Following those were 'employment', 'psychological/ social/ emotional', 'legal', 'accommodation' and 'financial' and 'personal care and healthcare'.

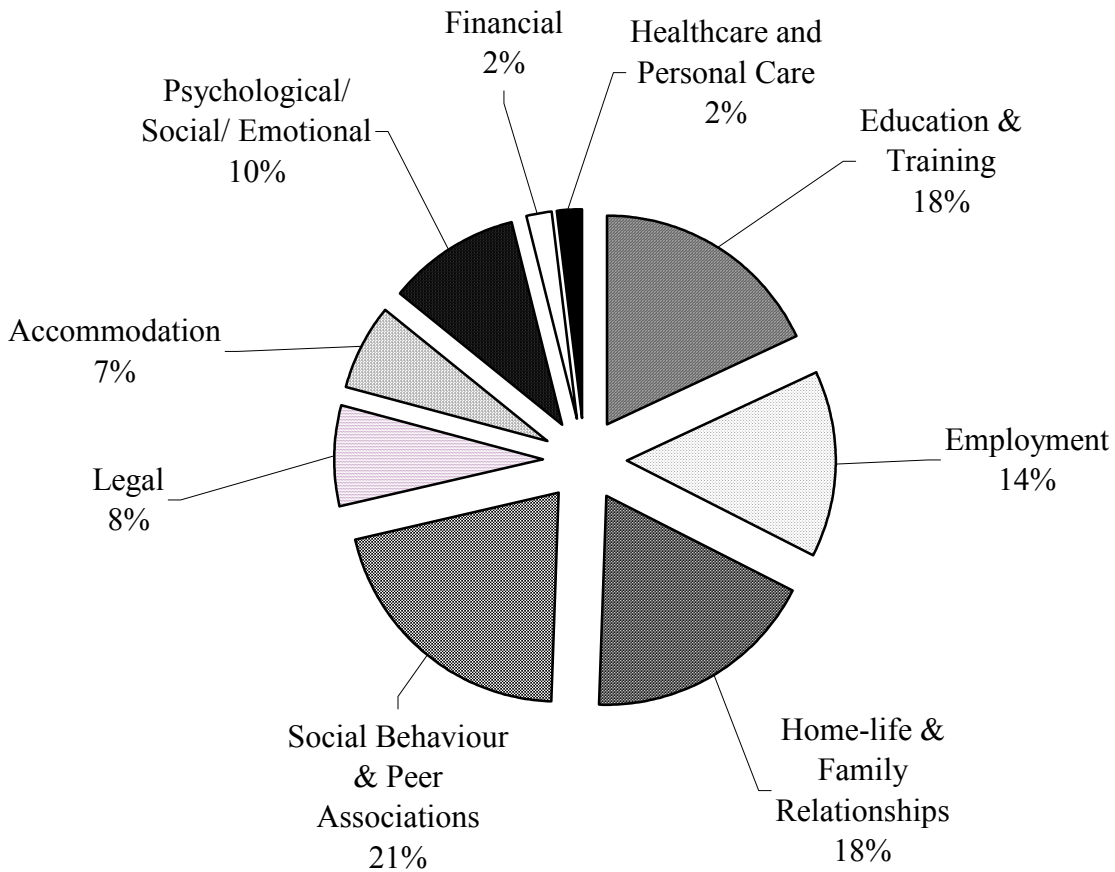
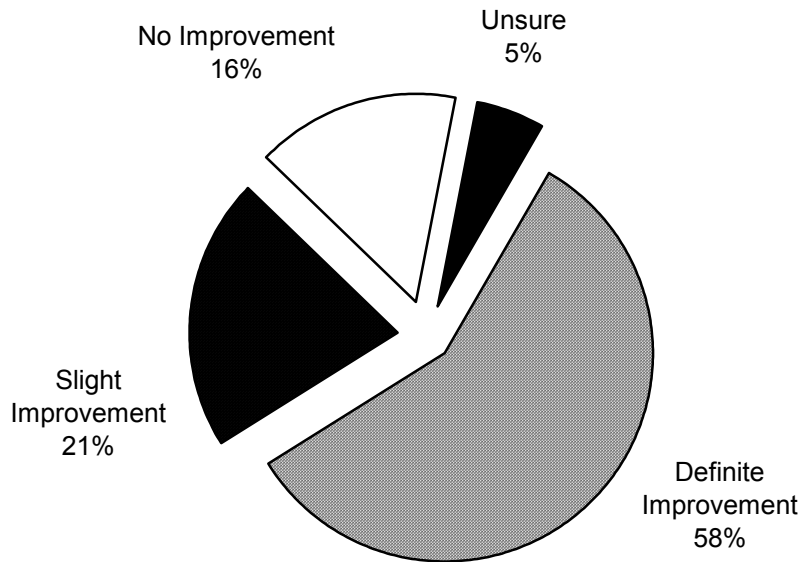


Figure 5.1. Categories of 'need' identified in twenty-three young people

*1. Education & Training*

The needs assessment identified nineteen out of twenty-three clients (83%) with educational or training needs. The ‘needs’ of this group varied. Some truanted on a regular basis, some refused to attend school or educational programmes and had been out of school for a significant length of time, some needed help with schoolwork/homework, some needed transport to bring them to and collect them from the educational centre they were attending and some needed help in liaising with the school regarding suspensions or special needs.

YAP intervened in all cases in an attempt to meet these needs. For eleven (58%) of those with educational needs there was a ‘definite improvement’. This meant that the specific need for each of the eleven cases was met and their educational situation had improved by the end of the six-month programme. In four cases (21%) there was a ‘slight improvement’ meaning the client in some way had made some progress in meeting their educational needs. In three cases (16%), there was ‘no improvement’ in the client’s situation regarding education. In one case, the progress was not mentioned in the file so the researcher has recorded the outcome as ‘unsure’.



**Figure 5.2 Education and Training N = 19**

## 2. Employment

Fifteen clients (65%) were identified as having employment needs. Those who were out of school and education were encouraged to find full time work and those attending educational programmes were encouraged to find part-time work for evenings or weekends. In all cases where employment needs were identified YAP intervened by helping the young person to find work to suit their needs by liaising with employment agencies and prospective employers, by identifying with the client what it is they would like to do and encouraging them to become active in pursuing this. On completion of the programme, six of those (40%) with employment needs were positively engaging with employment and were attending on a regular basis. In one case, (7%) there was a 'slight improvement' where the client worked for a significant amount of time but left because he had been unhappy there.

In eight cases (53%) there was 'no improvement' meaning that eight young people who needed work were still unemployed at the end of the programme. In one case the advocate found the client part-time work but after one month the client refused to go back as he found it 'boring'. In another case where the young person had been out of school for over a year, full-time employment was found by the advocate but the young person left the position after one day as he felt he would have been unhappy working there for a longer time period. Since then no further employment has been found for this client, though the advocate actively helped him to seek suitable work up until and after programme completion. In three cases, young women who were identified as having 'employment needs', became pregnant while on the programme, and no longer sought to find employment, choosing to stay at home once the babies arrived. In another case, a young girl in need of part-time employment began a trial period and gave up after a short period claiming she was 'not ready' to get a job.

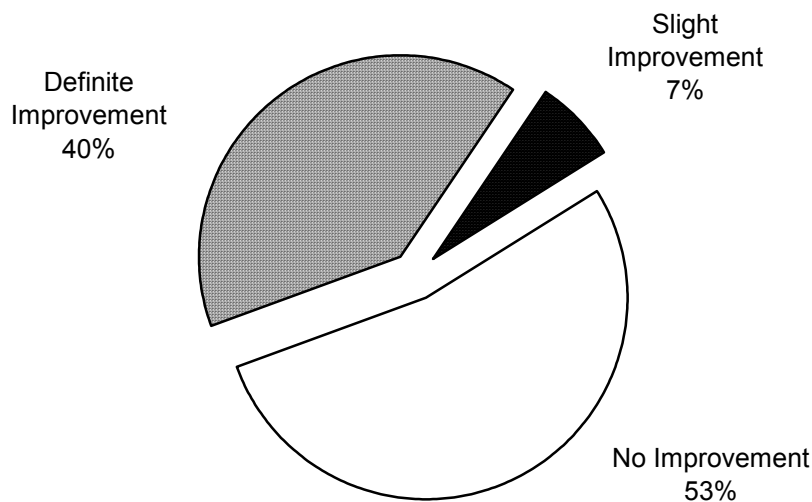


Figure 5.3 Employment N = 15

### 3. Home-life and Family Relationships

Varying needs relating to home-life and family relationships were identified in nineteen cases. Some clients were living in care and had little or no contact with their direct family or extended family. Some had very poor home situations where they were subject to physical abuse or alcoholic behaviour. In some cases, the young person was out of control and lacked any respect for the boundaries their parents attempted to impose and in some cases, the young person received no support or encouragement from parents and the programme sought to better the parent/child relationship. YAP intervened in all cases in an attempt to build and improve family networks. Methods of intervention included talking to family members and encouraging them to develop their relationships, making contact with family members who had not been seen by the client in some time and helping them to build and maintain these relationships, talking to the family about the importance of communication, locating mediation programmes and addiction programmes and attending such programmes with the family members as a method of support.

Six (32%) of those who were identified as having needs in this category are reported to have experienced a 'definite improvement' in their family and home-life situation. Improvement is identified by the behaviour and attitude of the young person with respect to their family at the time of programme completion in comparison to their behaviour and attitude at the time of programme initiation. Found in the progress reports was evidence of ongoing contact between families who previously had little or no contact, evidence of young people respecting parents wishes and sticking to curfews, evidence of young people helping out in the family home on a regular basis and helping to take pressure off parents and carers. There was a 'slight improvement' in eight cases (41%) meaning that the young person had to some extent followed the terms of the plan yet still tended to deviate slightly from those terms. In two cases (11%), the situation is 'ongoing' as the family have conceded to attend a mediation programme and are waiting for a place to come up or there is no definite evidence of change yet. The reports indicated that there was no improvement in the home-life situation in the case of three young people (16%).

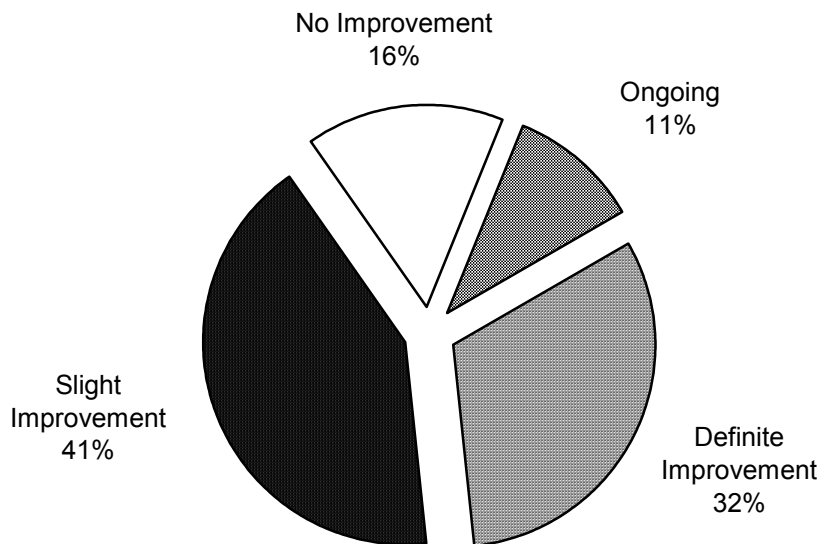


Figure 5.4 Home-Life & Family Relationships N = 19

#### 4. Social Behaviour and Peer Associations

Twenty-two young people (96%) needed intervention regarding their social behaviour and peer associations. Prior to engaging with the programme, many were involved in criminal activity and anti-social behaviour including drinking, drug taking and stealing. Many of the young people had no interests or pastimes aside from hanging around with peer groups who were involved in such behaviour. Others who had no previous participation in offensive behaviour, needed to develop interests to get them out of the house where their parents were experiencing domestic or alcohol related problems. YAP found methods in all cases to attempt to encourage young people away from former social behaviour in an attempt to forge new interests and peer groups.

Ten (45%) of the group were reported to have definitely improved their social behaviour as they stayed away from old friends and former behavioural patterns or continued to maintain an interest in new activities introduced to them by the advocates. There was a 'slight improvement' in two cases (10%) where clients adhered to the plan to a degree, yet on a number of occasions reverted to old ways. Their behaviour improved as it had not been as extreme as their former behaviour and they had, to some level, stuck to the terms of the plan. There was 'no improvement' in social behaviour in ten cases (45%) where clients continued to engage with their former peers and partake in former behavioural patterns and discontinued attending activities as laid out in the terms of the individualised service.

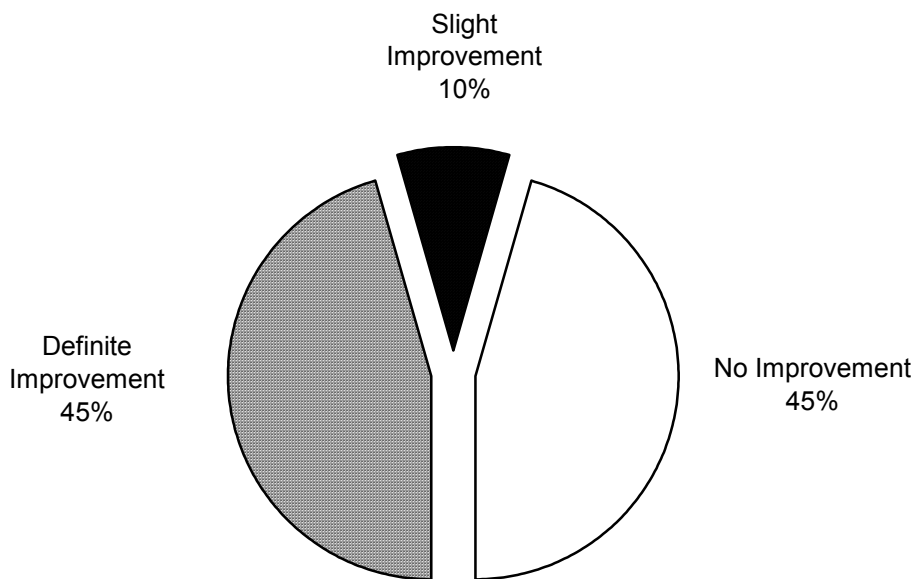


Figure 5.5 Social behaviour & Peer Associations N = 22

5. Legal

Eight (35%) of the young people were presented as having legal needs when they began the programme. YAP intervened by attempting to give them a voice, speak out for them in court in an attempt to clear charges and help them to stick to bail conditions imposed by the court. There was a 'definite improvement' for two (25%) of the cases where the court was adjourned due to the client's progress while on the programme. YAP gave evidence of the progress and due to their participation with the programme the court refrained from imposing further penalties. There was a 'slight improvement' in two cases. In the first the young person was required to maintain regular contact with his probation officer and while he did not show up to all meetings as promised, a good relationship has been maintained and the client has not picked up any further charges. In another case, the client had been put on bail and has complied with probation as required.

In three cases (38%) there was 'no improvement' in the client's legal situation. In one case the client broke bail a few times and while he refrained from engaging in further criminal activity he was detained while on the programme for previous charges. A second young person was detained while on the programme and another continued to break his bail conditions. In another case, the progress is 'unsure' because the client had been cautioned and assigned a Juvenile Liasons Officer yet nothing further has been reported regarding his legal situation.

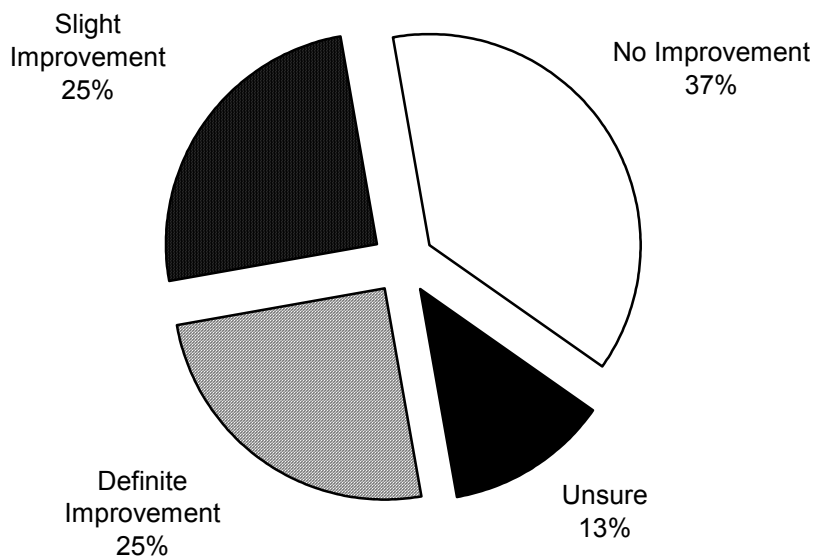


Figure 5.6 Legal N = 8

6. Accommodation

Accommodation needs were recognised in the case of seven young people (30%). Accommodation was required in three cases for three young women who became pregnant while on the programme and at the time had been living in care, in temporary B & B accommodation and an unsuitable home environment. In all cases, accommodation was found for these young women while they were on the programme and YAP to some extent were active in attempting to secure such accommodation. Each is currently living independently and are out of residential settings or unsettled home environments. A 'definite improvement' was evident when YAP staff identified structural problems in a family home and helped the client to repair the house, improving living conditions for the family. Other accommodation crises were rectified by YAP when they supported young people in their transition to independent living and another by helping them to remain in current foster placement.

In one case the young person had been living in and out of hostels and YAP made an attempt to renew links with the family in an attempt to encourage them to allow the client to move back into the family home. There has been a 'slight improvement' in this case in that the client agreed to move back home for three days a week and lives with other family members for the remainder of the week. While the family relationship is still unstable, it has improved from the time the client came on the programme.

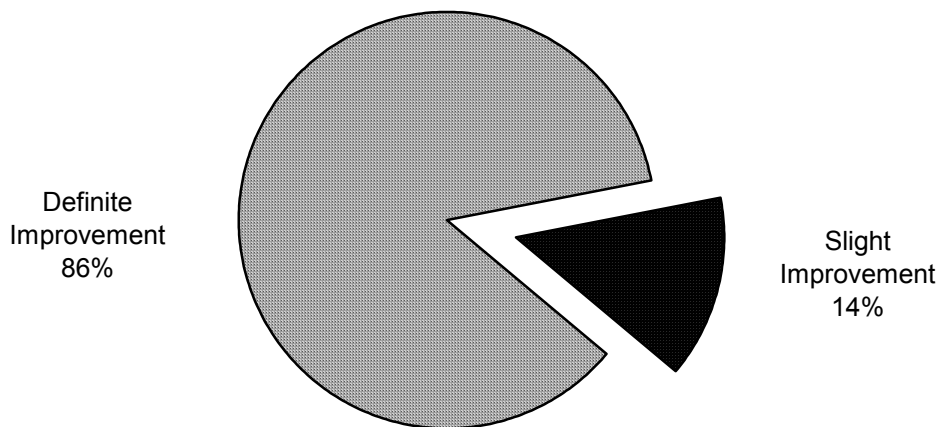


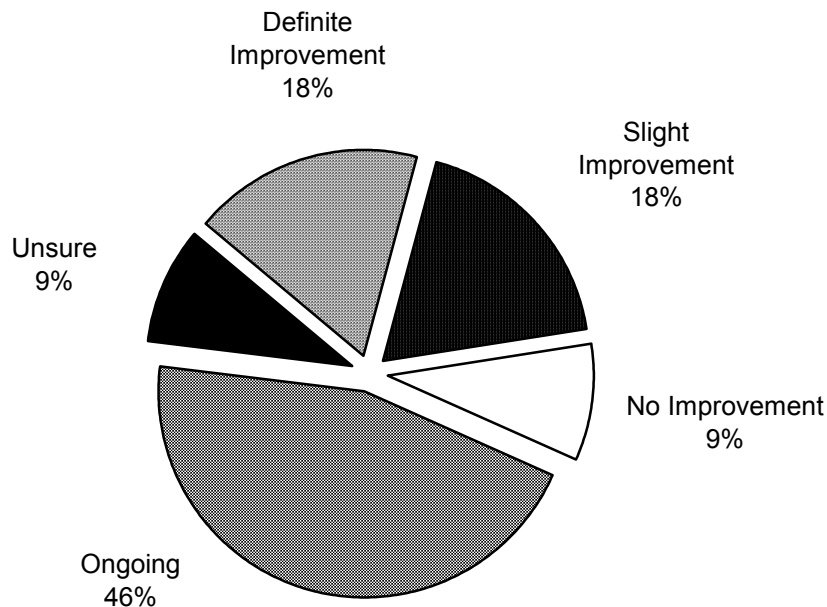
Figure 5.7 Accommodation N = 7



### 7. Psychological/Social/Emotional

Psychological, social or emotional needs were identified in eleven of the young people (48%). Such requirements varied from anger management, ADHD, relationship support, counselling support including bereavement and addiction services to the need for personal development work.

There was a 'definite improvement' in two cases (18%). One young person was helped by YAP to increase self confidence through trust and talks with the advocate. Prior to the programme the young person rarely spoke, kept her head bowed low and did not maintain eye contact with anyone. Now the young person presents as happier and more relaxed and maintains eye contact with people when spoken to. Another young person who presented with difficult and challenging behaviour improved his behaviour dramatically and became a lot happier in himself. There was a 'slight improvement' in two cases (18%) where the young person appeared less depressed due to discussions with the advocate and had improved behaviour to some extent. In five cases (45%) the outcome is 'ongoing' as the young people are actively engaging and even enjoying attending anger management or counselling or have yet to engage with a service. In another case, the young person was offered counselling and has yet to engage. In one case (9%), there has been no change, as the client did not continue to attend the service proposed by YAP and in another, the outcome was 'unsure'.



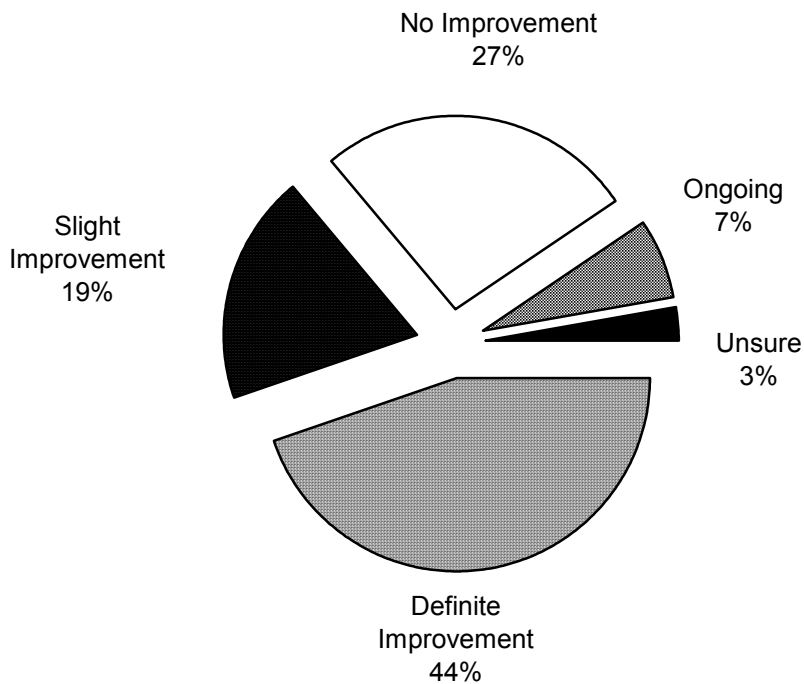
**Figure 5.8**  
**Psychological/ Social/ Emotional N = 11**

8. *Financial Support*

In two cases YAP intervened by helping the young people involved sort out their financial situation, liased with social services and secured rent allowance for the beginning of their independent living status. YAP advocates spent time discussing budgeting their weekly money and how to spend it wisely.

9. *Healthcare and Personal Care*

Two of the young people had healthcare needs. YAP intervened in one case by teaching and encouraging the young person to look after herself. The outcome has been positive in that she has become more capable in looking after herself and her health. In another case the young woman was pregnant and in need of healthcare training regarding looking after herself and the baby during and after pregnancy. YAP helped by linking her up to a teen pregnancy agency. A 'definite improvement' was recorded in both cases.



**Figure 5.9 Level of improvement in all categories where needs were identified**

## SECTION 2:

### 5.4 Costs and Benefits

Before going on to discuss how programme costs relate to programme benefits, it is important to make a number of points. The first point is that for YAP, its wraparound approach is key. A significant function of the programme is to work with existing services and help co-ordinate and refocus their efforts, wherever possible. Thus, the key intervention that makes a difference to a young person might come from an existing service, although YAP may have created the conditions for its success. A second point relates to the more technical area of measurement. Strictly understood, cost benefit analysis involves placing a value on benefits created by social programmes. Benefits are often seen in terms of costs savings. In order to undertake a rigorous cost benefit analysis, it is necessary to have evidence of benefits or cost-savings and the specific value of the intervention in the creation of these benefits. To achieve scientific certainty regarding these issues, methodological approaches involving control groups are necessary.<sup>20</sup> Such analysis was not possible within this research due to constraints on resources and timing. In the absence of a control group, it is more difficult to say with scientific certainty that change or the degree of change, positive or negative, can be directly attributed to the YAP programme.

What can be said about the value of the YAP? The first step to assessing its value is to consider its costs. Already in chapter three it was identified that in 2003, YAP cost the Western Health Board €19,520 per young person for a six-month intervention. As Table 5.1 shows, the cost per young person compares favourably with all other costs, bar foster care, in relation to the six-month period.

	<b>Cost Per Person Per Annum €</b>	<b>Approximate Cost per Person Per Six Months €</b>
Residential Care	80,000 <sup>21</sup>	40,000
Foster Care	16,458 <sup>22</sup>	8,229
Prisons	84,750 <sup>23</sup>	42,375
Special School	290,000 <sup>24</sup>	145,000
Special Arrangements	205,560 <sup>25</sup>	102,780

Table 5.1

The argument can also be made that YAP needs to be seen in relation to future benefit streams rather than simply costs across a limited period in time (i.e. that YAP will prevent future costs accruing in special, high support and other forms of care).

In the case of YAP, it can be stated with certainty that six young people who had been previously referred to and accepted as referrals by the high support care unit in Castleblaney, were accepted onto YAP and did not enter high support care. At the time of the research it was impossible to estimate a cost for Castleblaney centre. However, if we assume that the special arrangements put in place in the Western Health Board will have a similar, if not more expensive cost base to the Castleblaney centre, it can be argued that for this group of six young people alone, the potential saving over the six-month period is highly significant (€120,000 vs. €600,000). Additionally, although not formally analysed in terms of differential evaluations of risk, it is likely there were other savings among the wider service-user group in terms of prevention of entry to various forms of institutional care.

<sup>20</sup> In straightforward terms, a control group is a group that is identical to the group receiving an intervention in key respects but which doesn't receive the intervention.

<sup>21</sup> Estimate figure Source: Financial accountant, Community services, Western Health Board, 11/02/04

<sup>22</sup> Effect from January 1<sup>st</sup> 2004, Source: Department of Health and Children Website

<sup>23</sup> During year 2002, source: Irish Prison Service Annual Report, 2002, p. 80.

<sup>24</sup> Estimated figure based on data in Department of Education Statistical Report for 2002.

<sup>25</sup> Estimated figure is based on the special care arrangements of one child from the region

## **SUMMARY: Chapter 5**

From the information available in the progress reports there is evidence to support the assertion that many of the needs of YAP participants have been successfully addressed by the service. Progress reports have shown that there was improvement in 63% of categories where needs were identified while there was no improvement in 27% of categories where needs were identified. Twenty of the young people showed a 'definite improvement' in at least one category of need while the remaining three experienced a 'slight improvement' in at least one category of need. The most widespread needs were found within the 'social behaviour and peer group' category and in over half these cases (55%) improvement was recognised by the advocate. Meeting the educational needs of clients proved to be very successful as reports have shown a 79% improvement on former educational patterns and accommodation needs were also successfully addressed in six out of seven cases. Employment needs were successfully addressed in 47% of the young people while those who presented with psychological/social/emotional needs were seen to have experienced improvement in over one third of cases and many are still attending related services so no definite outcome is yet known. In both cases, presenting with healthcare and financial needs definite improvement was recorded. The progress reports have shown that the YAP service has been solution focused in meeting the needs of young people in a number of categories. The foregoing analysis on costs indicates potentially significant savings arising from the work of YAP.

## Chapter 6– Programme Staff Perspectives

---

### 6.1 Introduction

The following chapter reflects the views of the programmes staff members. The first section presents the views of the advocates and deputy managers and the second section gives details of the views of the programme manager.

### SECTION 1: Advocates and Deputy Managers

### 6.2 Methodology

#### *Questionnaires*

A questionnaire was sent to eighteen advocates and three deputy managers in August 2003. The questionnaire comprised forty questions covering the following main areas; the advocate role, education and experience relating to working with young people and their families, training, support, benefits and costs to service users, programme implementation and suggested improvements to the programme. The deputy managers' questionnaire differed slightly in that it asked two questions relating to their role as managers. Eleven advocates returned their questionnaires by the initial deadline. Follow up letters were sent to remind advocates who had yet to complete the questionnaire to do so as soon as possible and subsequently two more questionnaires were returned. The response rate from advocates was 72% (thirteen) and from deputy managers 100%. The questionnaire asked respondents quantitative questions about themselves and about each of the cases they had worked as a means of assessing their view on the progress of individual clients. In total, advocates responded in relation to twenty young people and deputies responded in relation to six. Where *cases* are referred to below, it can be assumed that reference is being made to the young people rather than the advocates.

#### *Focus Groups*

A set of points, prompted by questionnaire findings, were discussed with respondents in focus group format. Two advocate focus groups and one deputy manager focus group were conducted in December 2003. The initial advocate focus group was facilitated in the YAP office in Roscommon and two advocates from that catchment area attended the group. The second group took place in the Galway office and five advocates from that area attended. Ideally, a larger number of participants would have been preferred, however time and other constraints meant a number of advocates were unable to attend. Both deputy managers from the Galway area and the deputy manager from the Roscommon area were present for the focus group that took place in the Galway YAP office. Topics discussed at all three groups included working conditions, related services, level of participation of service users, programme implementation and benefits and consequences. In all cases the discussions were taped and in the case of the Galway advocate focus group, a researcher took notes. Presented below are the views of programme staff from both research methods.

### 6.3 Job Satisfaction

Of the thirteen advocates who completed the questionnaire, eight applied to YAP after seeing the position of advocate advertised in the newspaper. Two of the advocates heard about YAP through a friend and consequently made contact with the programme. The remaining three began working as advocates after hearing about YAP through other related agencies with which they had been involved. Three advocates became deputy managers after working with the programme for one month. Six advocates and two deputy managers said they intended to work in the position for the medium to long term (1 to 3 years). When asked to indicate their overall level of job satisfaction to date, nine were satisfied to some level. When deputy managers were asked to indicate their overall level of job satisfaction, one was 'neither satisfied nor dissatisfied', one was 'satisfied' and the remaining respondent was 'very satisfied'.

### Advocates Level of Job Satisfaction N = 13

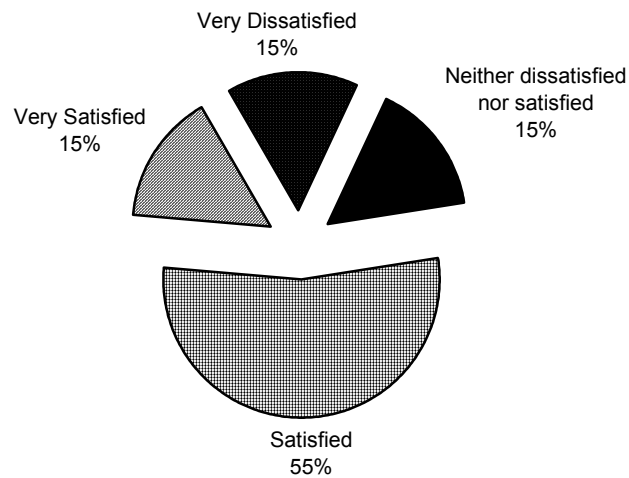


Figure 6.1

#### 6.4 Most Enjoyable Aspects of the Job

Advocates enjoyed bringing a service to young people that differed from existing services. The sociable and flexible nature of the job was satisfying and many said they enjoyed meeting different people and being ‘out and about’ engaging in activities with the clients. Helping people who might otherwise have been left without intervention and seeing positive changes in their lives is an extremely enjoyable aspect to many advocates.

*“Gaining the trust and friendship of somebody who has refused to engage with others. Helping a family in a useful and practical manner. Seeing improvements in very damaged peoples lives.”*

Deputy managers had similar responses. The interaction with young people is a crucial aspect of their enjoyment of their work, as is identifying their needs and opening them up to new ideas with an aim to improving their situation engendering trust in them. Seeing positive changes in the young people is most enjoyable to them.

#### 6.5 Least Enjoyable Aspects of the Job

##### *Working Conditions*

The most significant points of complaint surrounding the job related to the working conditions. Job insecurity, too little pay and unsociable hours appeared as the most common complaints. Some advocates complained that the level of communication between staff members was poor, particularly communication between advocates and managers. While two were “happy enough” with the hourly rate of eleven euro per hour, others felt it was not enough for the intensive work undertaken by them.

*“I love my job and the core staff that I work with but there is a strong feeling within the team that our rights/security... need to be met. YAP will keep their staff if there is more security of pay and a wage increase. We have given a lot to the service ...”*

In order for them to receive payment, advocates are reliant on the young person showing up to meet them and on a number of occasions they have been let down by clients. Ironically, it is the cases that are most in crisis and the cause of most stress to YAP workers that are least financially rewarding. These ‘crisis cases’ are often very difficult and advocates have spent time trying to track down clients unsuccessfully. If the young person doesn’t show up or refuses to meet, the advocate will not be paid. The less stressful ‘preventative’ cases are more reliable and better to work with in terms of monetary gain, even though meeting the needs of the ‘crisis’ cases is their priority. The ‘core’ workers said that as an incentive to remain with the programme, they should earn a salary or a fixed wage. Deputy Managers said as time has gone by, advocates had become more trained, yet there was no potential for pay-rise in response to this. The ‘sessional’ nature of the work was a cause of

concern for advocates also. At the time of the research, there was no employment contract and they felt uneasy about the unsettled nature of their position<sup>26</sup>. If advocates finish with one case and no other suitable case is ready to start at that time, they are not paid for the interim period. One deputy manager said that some advocates had left the programme for this reason. Another deputy said that while the programme was wonderful for the families and the young people, the advocates were treated badly and had to fight for everything. Deputy managers get fifteen euros per hour worked and said they would be happy enough with this amount if it did not include their on-call hours, for which they receive no extra payment. On-call hours took up a significant amount of their personal time and restricted them from making personal arrangements. They felt they had too much work to do considering the level of payment they received.

#### *Expenses & Flexible Funding*

Most advocates in the Galway region were happy with the amount of travel expenses they received however the group from Roscommon felt that the petrol expenses should be greater for them considering the size of the catchment area they cover. Regarding activity expenses, many felt that the present rate of twenty euro per week per case was not enough. The point was made that twenty euro was spent on a meal and an activity and for the remainder of the week they have no money to spend on the young person. Some have spent their own money on activities;

*“I spend over that... because there are activities I feel the kids would really benefit from”*

One advocate felt that the rate of activity expense was sufficient per child per week. It meant that the advocate and young person had to be creative in finding cost effective activities. This also insured that the young person would not be introduced to expensive activities they would be unable to continue when the programme ended. Deputies acknowledged that advocates had spent their own money to pay for activities with the young people. One deputy said that there were many costs (time, mileage, phone calls) that were not reflected in the programme budget and felt access to more money for activities and travel was needed. All respondents were happy that flexible funding was readily available when it was needed.

#### *Related Services*

A further negative aspect of the job was the relationship with other services. Advocates felt that some services they had contact with referred to the young people in a negative manner on a continuous basis and felt these services had little respect or understanding of the programme. Some felt that related services lacked an understanding of the YAP methodology and behaved in a disrespectful manner towards YAP staff considering the YAP approach to be “unprofessional”. Deputies said that from time to time it had been difficult to motivate existing services to work with young people and families with whom they have worked in the past and have given up on.

#### *Work- Related Stress*

Advocates said that being involved in very stressful situations was not enjoyable, particularly when few resources were available to alleviate certain problems. One advocate said that the safety and protection of advocates was of great concern to him/her.

### **6.6 Expectations of the Job**

When asked if their experience of being an advocate matched with their initial expectations before applying for the job, nine advocates and one deputy manager agreed that it had. Expectations included being able to work closely with and befriend young people and provide them and their families with a sense of worth, through use of strength based approach. Expecting change as a result of these methods was most significant and the majority felt this had been achieved in many of the cases they had worked with. Two advocates and two deputies said that they were ‘unsure’ and expressed that they did not know what to expect when they started work with the programme.

---

<sup>26</sup> Since October 2003, YAP management introduced a six-month employment contract for advocates

## 6.7 Training

Five advocates and one deputy manager believed that the training they received from YAP was adequate in dealing with issues they had encountered. Four believed the training they received was not adequate, while four advocates and two deputies were 'unsure' on the point. They said that YAP training had improved since their work began with the programme. Initial training involved a two-day intensive session with YAP Chief Executive Officer and the Programme manager and one day training in Children First guidelines. The information was delivered too quickly and too intensely and some said they had learned little from it. Deputies acknowledged this and said that it was only when they began to work with cases that they felt the training had been of benefit. Six of the advocates and one deputy manager had a formal qualification that related to working with young people and their families when they began employment. Five advocates did not have formal qualifications. The remaining two were 'unsure' whether the qualifications they had were directly related to this area of work. When asked to indicate how satisfied they were with the level of training they received, two advocates said that they were 'very dissatisfied', four said they were 'neither dissatisfied nor satisfied' and seven said they were satisfied to some degree. Two deputy managers said that they were 'satisfied' and one said 'neither dissatisfied nor satisfied' on the point.

**Advocates Satisfaction with Level of YAP Training N = 13**

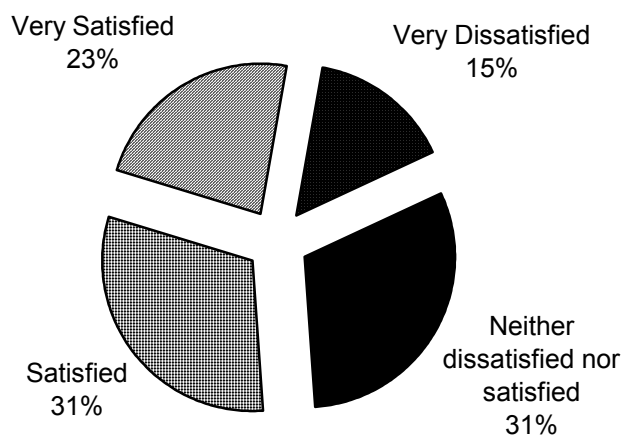


Figure 6.2

Deputies said the training had strengthened the advocates and given them strong self-belief. According to one deputy, the initial training had been extremely positive, to the extent that staff "went out like an army" and felt they would be able to "change the world". Training gave the staff a collective belief in themselves and what the programme was capable of. Getting out there and working with families who were experiencing a multiplicity of problems was the biggest learning curve for staff; as one deputy said, they were experiencing a "sub layer of society that [I] didn't really know existed". They said any amount of training could not have prepared them for the real experience. Only one respondent felt further training was not needed. Advocates and deputies said they were continuously encountering new problems and felt they needed to be trained in dealing with a broad spectrum of social issues, including government legislation, the justice system, mental health needs and abuse and report writing.

*"I don't think that anybody in our line of work is ever going to be adequately trained for the multitude of complex problems/ issues that we deal with day-to-day on the ground"*



One advocate said that an understanding of the social service system would be of great use and some advocates felt that more training for YAP management was essential. The following table summarises the areas that advocates would like additional training.

Government Legislation & Policies	Other Services	Health/Mental Health	Abuse	Record Keeping	Management Skills
Freedom of Information	Family Law	Self- Harm	Drugs	Report writing	Logistics skills
Children First	Justice System	Suicide	Alcohol	Record keeping	Administrative skills
Updates in legislative change	Copping on Programme	Manipulation	Physical		Funding and budgeting skills
Dealing with Government agencies	Social Service System	Teen pregnancy	Sexual		
Child protection guidelines		ADHD & Special Needs	Working with abusers		
		First Aid	Aggression		
		Stress Management			

Table 6.3

### 6.8 Experience & Support

Ten advocates had previous experience working with young people in a paid capacity. Nine of the group had worked with young people in a voluntary capacity. Ten had previous experience working with young people in a private capacity (experience gained with young people within the home or family environment). All three had previous experience working with young people in a paid capacity and in a voluntary capacity. Two had previous experience working with young people in a private capacity. Twelve advocates and one deputy manager felt that they were given support from other advocates. Nine advocates felt supported in their role from YAP management, two did not and two are unsure in relation to this point.

### 6.9 Related Services

Programme staff were said to have regular contact with seventeen services. The services that have most contact with the programme include the Social Work department, Residential Centres, the Probation Service, Brothers Of Charity, Youth Training Centres and Neighbourhood Youth Programme's and the Gardai. When asked if services understood what YAP was about, six advocates and one deputy said they believed they understood and four advocates and one deputy said they believed they did not. Five advocates and two deputies believed that the services had participated with the I.S.P. as promised and three advocates believed they had not and the remaining deputy was unsure.

The relationship with related services has improved as the programme has progressed according to focus group discussions. Initial problems arose because related services did not know about the programme and advocates encountered adverse responses from services that were being understandably protective over the young people. Once the programme was explained in depth, some advocates experienced a very positive response from services.

*“It was difficult initially but now we can walk into any of the services and they appreciate that we are useful... they're delighted to see us coming”*

Others felt that related services have had a difficult time understanding the concept of the programme and some services have become over reliant on YAP. The flexible nature of YAP differs from the structured nature of existing services and advocates have experienced difficulties trying to facilitate wraparound meetings as a

result. Advocates felt that coordination between services needed to be improved and an understanding of YAP achieved, before the holistic integrated model of care can be achieved to its full potential. Advocates suggested the establishment of a “clinic” or a “centre” that would provide information about all services available to young people in the area.

*“There is a need for services to come together better.. need for an information centre for workers and clients”*

One deputy felt that part initial programme’s strength had been its innocence; because advocates had not received the same training and were not part of the same structure as other services they had scope to take a fresh approach to the problems faced by clients. One deputy felt inter-service relations improved as staff began to learn the language services used with one another. However, deputies said their use of “regular language” had made the programme more accessible to families and young people. Once they had become aware that YAP could access areas that others had not and cases had begun to move forward, services, particularly social workers, had been very accommodating.

### 6.10 Programme Implementation

Programme staff were presented with a number of statements and were asked to consider them in relation to each case they had worked with for a three-month period or longer and to agree or disagree with the statements on a scale of one to five. The statements mirrored the goals suggested in programme protocols and in the Western Health Board service agreement with YAP. Agreement or disagreement indicated the extent to which these goals have been achieved in their view.

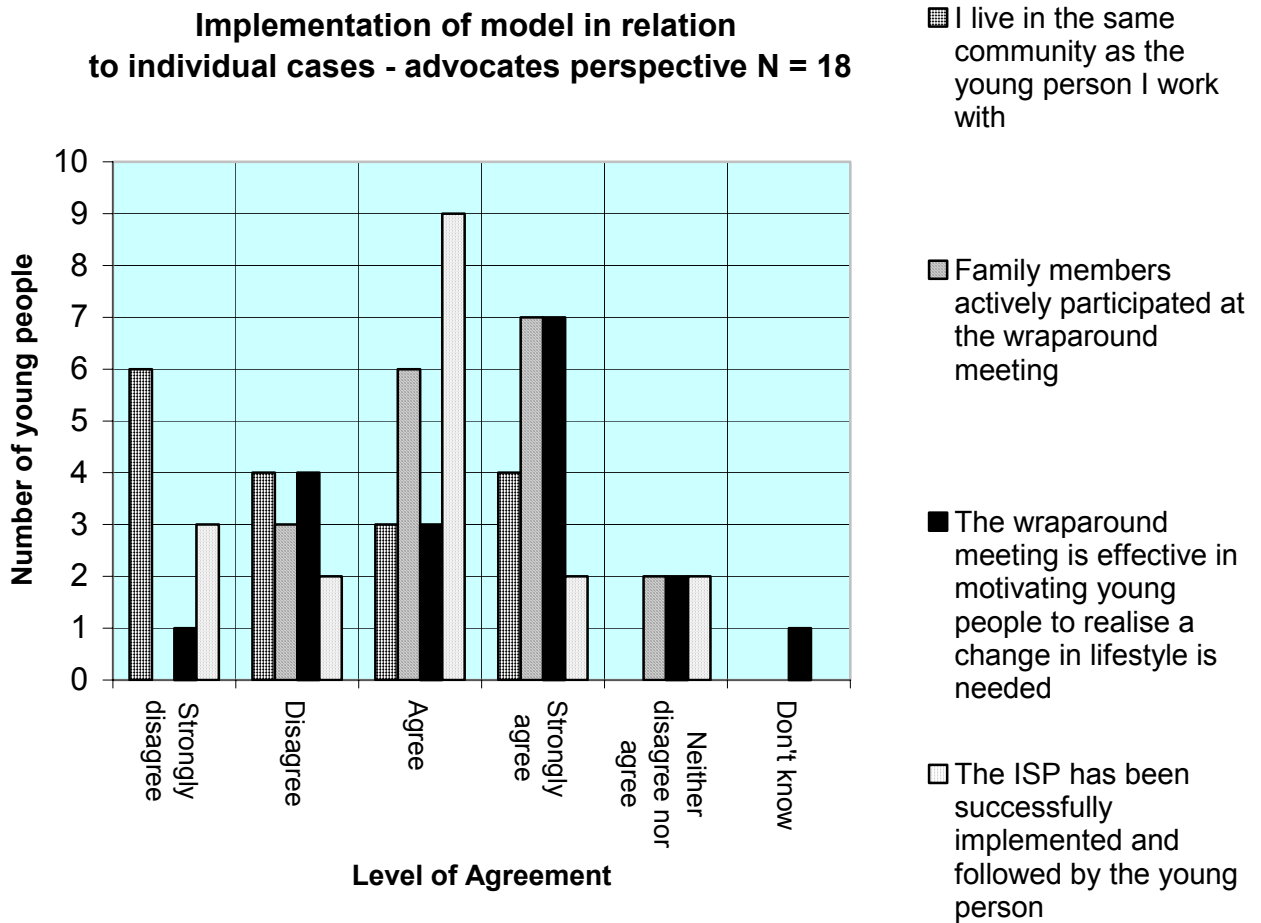


Figure 6.3

**Implementation of model in relation to individual cases - advocates perspectives N = 18**

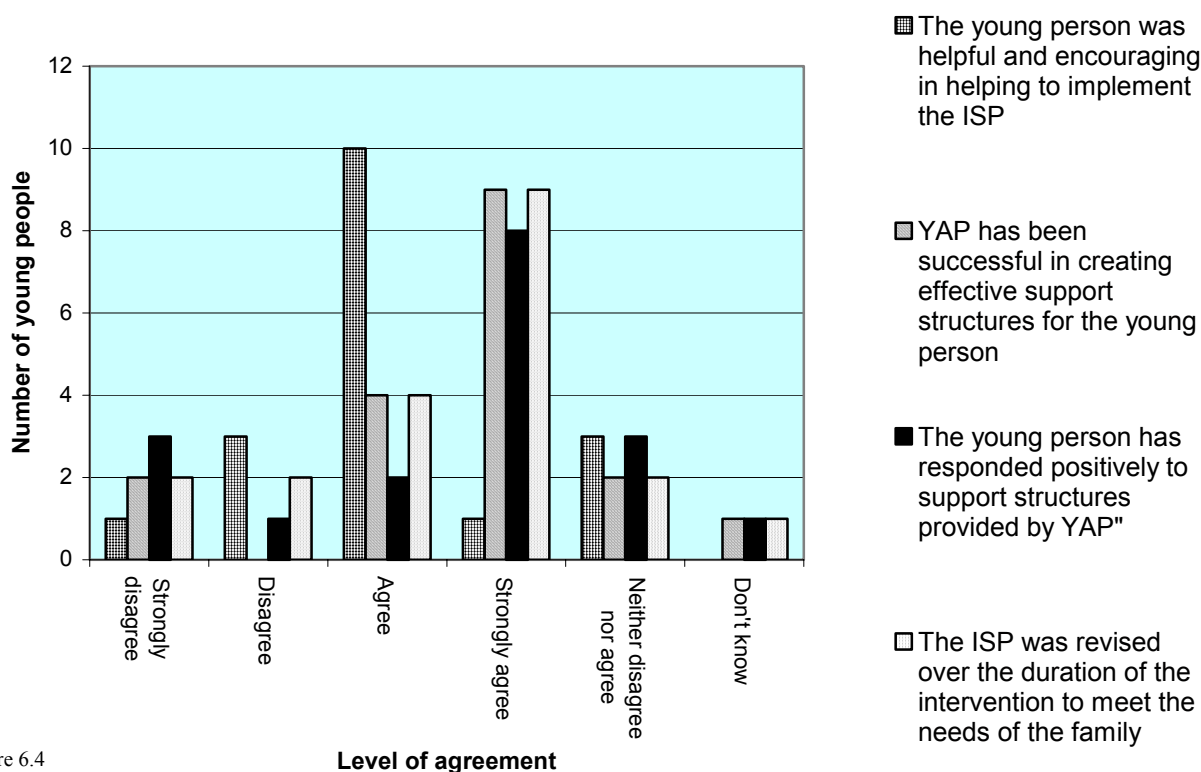


Figure 6.4

*Community Programme*

In many cases, the advocates did not come from the same community as the young people they had worked with. In seven cases advocates said that they lived in the same community as the young person and in two cases deputies said they had<sup>27</sup>. In ten cases advocates said they did not and in four cases deputies neither disagreed nor agreed with this statement

*Wraparound Meeting*

In the majority of cases, families had participated at the wraparound meeting and staff felt it had motivated a change in lifestyle. In thirteen cases advocates agreed that the family had participated but in five out of the six cases they spoke about deputies were mixed regarding this; in two cases they agreed, in two cases they neither agreed nor disagreed and in one case said the family did not participate. In ten cases, advocates agreed that the wraparound had motivated a change in lifestyle on the part of the young person and deputies agreed with this in the case of five out of six families. One advocate said that the success of wraparound meeting depended on the circumstances within individual families and in certain situations, young people did not enjoy speaking out in front of their parents and family's due to a fear of negative consequences that might arise at home after the meeting. Deputies stressed that it was important to ensure that wraparounds are implemented at the right time for the young person so that they link with services and if properly implemented, supports will remain in place once the programme ends.

*Individualised Service Plan*

The majority of staff felt that the I.S.P. had been successfully followed by the young person, advocates agreeing in eleven cases and deputies agreeing in four cases. In one case, the deputy manager was unable to agree or disagree with the statement. In eleven cases, advocates felt that the young person was helpful and encouraging in implementing the I.S.P. and in three cases, deputies said the same. In thirteen cases, the I.S.P. had been revised over the duration of the intervention while deputies said it had been revised in five cases. Some

<sup>27</sup> N = 6 in relation to no. of cases deputy managers refer to

advocates had experienced difficulties engaging the young people in activities as many had never participated in groups or activities before and were reluctant to begin at this stage of their lives. Usually, the first stage of the individualised service plan was spent talking to the young person and getting them to “chill out” before asking them to partake in any activities.

### Support Structures

In the majority of cases, staff reported success in creating effective support structures for the young people and in all cases they had worked with deputies felt this had been achieved. In ten cases advocates said the young person had responded positively to the support structures and in all six cases deputies acknowledged the same. However, many advocates had experienced difficulties setting up supports due to the lack of suitable amenities in the catchment areas. The advocates in Roscommon who were restricted by this particularly stressed this point. Advocates felt that there was no point bringing the young people to services that would not be accessible after the six-month programme.

### 6.11 Participation of Service Users

Respondents worked with a different number of cases while with the programme. Nine advocates said they worked with one case, two worked with three cases and two with four cases. Sixteen of these cases were in need of the intervention, according to the advocates and in the case of three young people, advocates were unsure if the intervention was needed. In all six cases they had worked with, deputy managers felt the intervention programme was needed.

Advocates said it was common to experience apprehension on the part of the young people initially. Within the first few days they could gauge whether the young person is going to ‘buy in’ to the programme or not. Deputies said that the young people had participated willingly once they recognised that the service YAP offered was genuine and safe. Advocates said that in ten cases, the young people willingly participated with the programme and in four cases, they were unwilling participants. In nine cases, a high to very high level of participation was reported, in five a medium level of participation and in five a low to very low level of participation was reported. In all cases they worked with the deputy managers strongly agreed that the young people willingly participated with the programme and they said that five clients had displayed a high to very high level of engagement throughout the duration of the programme.

**Level of participation of young person in advocates view N = 19**

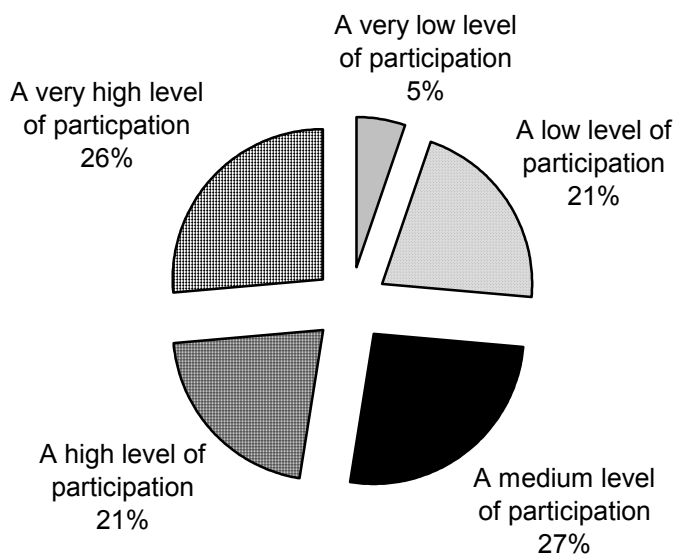


Figure 6.5

Advocates said that some families were willing to be involved throughout the entire process but others had been difficult to involve with the programme. Advocates felt that in some cases parents did not fully comprehend the aims and methods of YAP. One deputy felt the level of participation depended greatly on the problems experienced within the family and many had been reluctant to dig deep into their problems. When asked to rate the level of family participation in YAP related activities, in two cases (10%) advocates reported a very low level of participation and in five cases (20%) a low level of participation which suggests that almost one third of the families had limited involvement with the programme. In eight cases (40%), there was a medium level of participation on the part of the family and in four cases (20%), there was a very high level of participation in the advocates view. Deputies reported in three cases a medium level of participation, in one case a high level of participation and in the remaining two a very high level of participation.

*Statements*

Respondents were asked to agree or disagree with the following set of statements in relation to the young people and their families:

1. I think this young person highly values YAP
2. I think this young person highly values the mentor relationship
3. I think this young person has manipulated the programme
4. I think this young person understands what the programme endeavours to do
5. I think this young person willing participates with the programme
6. I think this young person feels that the advocate has helped them to have their voice heard
7. I think the family feel that YAP has helped them to voice their opinions about matters concerning them

**Statements relating to the young person N = 18**

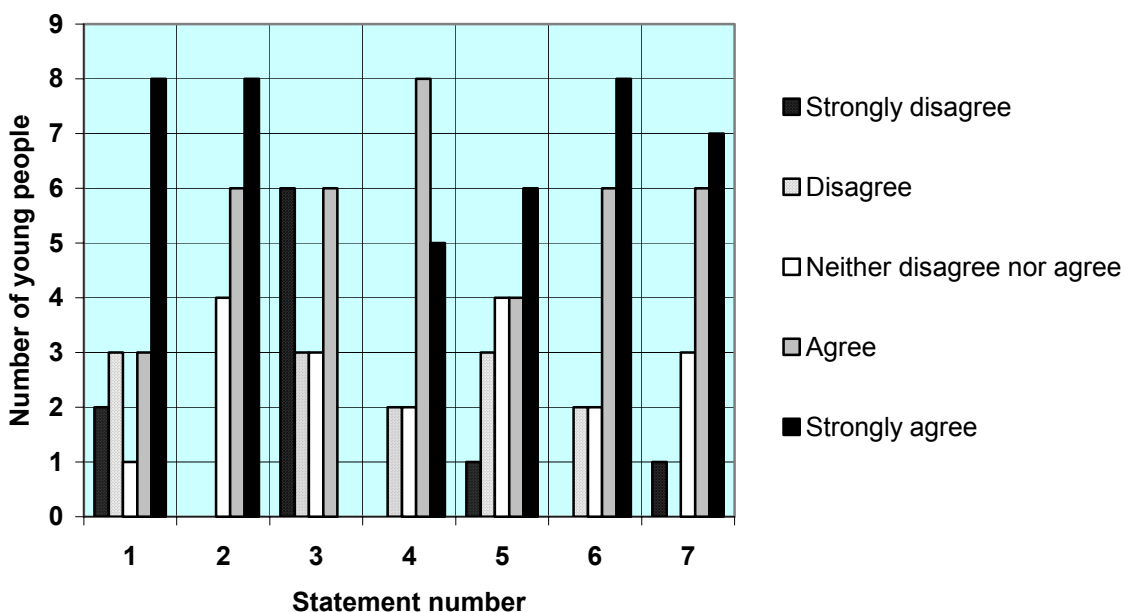


Figure 6.6

The majority said that the young people they had worked with had understood what the programme endeavoured to do and deputy managers agreed with this in four cases. For the majority of cases staff felt that the young person highly valued both the programme and the mentor relationship and in all their cases, deputies said the young people valued the programme and the mentor relationship. In six cases advocates said the young person had manipulated the programme however nine cases it was felt that this was not the case. When asked if they believed if the young person had manipulated the programme, in the case of four young people deputy managers ‘strongly disagreed’ and one case they ‘disagreed’. In one case, the deputy manager ‘neither disagreed nor agreed’. In fourteen cases, the advocate had helped the young person to have their voice heard and in thirteen cases, the programme had helped the family to have their voice heard. Deputies said the young person felt their voice was heard in four cases and helped the family have their voice heard in five cases.

## 6.12 Benefits

In eighteen cases (90%), the advocate felt that the relationship established between themselves and the young person had a positive effect on the latter. In the remaining two cases (10%), the advocate was ‘unsure’ if the relationship has had a positive effect. Some advocates felt they had brought benefits to the client that other services could not:

*“I have linked him to employment and training and have fought for his right to education. He would not have achieved this on his own or indeed the health services would not have facilitated this”*

In all six cases, deputies felt that the relationship established between themselves and the young person had a positive effect on the latter. Respondents were asked to note down the positive changes they have seen in the young people and families since participating with the programme and to make note of any other benefits they feel the programme has brought the clients. Table 6.8 provides details of the changes identified in the families they have worked with and they have been categorised into nine areas. Table 6.9 provides details of the changes in the young people and they have been categorised into seven areas.

	Advocates	Deputies
Increased trust and responsibility	<ul style="list-style-type: none"> <li>▪ More capable of sourcing information</li> <li>▪ Opening up to state agency support</li> <li>▪ Support for mum to have another adult to talk to</li> <li>▪ The family are no longer afraid to trust others outside of the family</li> <li>▪ No longer hiding from services</li> <li>▪ Strong link with the advocate</li> </ul>	<ul style="list-style-type: none"> <li>▪ Father taking control and becoming more responsible</li> <li>▪ Trust has been rebuilt</li> <li>▪ Mother taking control</li> <li>▪ Parent supporting the young people and their ability to make choices</li> </ul>
Social Behaviour	<ul style="list-style-type: none"> <li>▪ Less giving out and nagging</li> </ul>	<ul style="list-style-type: none"> <li>▪ Developing activities/ events</li> </ul>
Employment	<ul style="list-style-type: none"> <li>▪ Moving out of crisis into a position where work is possible</li> </ul>	<ul style="list-style-type: none"> <li>▪</li> </ul>
Education	<ul style="list-style-type: none"> <li>▪ Father has taken active role in his son’s education</li> </ul>	<ul style="list-style-type: none"> <li>▪</li> </ul>
Psychological	<ul style="list-style-type: none"> <li>▪ Seeing positive results in their child</li> <li>▪ Entered counselling for drug and alcohol misuse</li> <li>▪ Better understanding of their child</li> <li>▪ Become aware of anger</li> </ul>	<ul style="list-style-type: none"> <li>▪ Self belief/ Respect</li> <li>▪ Empowerment</li> <li>▪ Respect/ Openness/ Love</li> <li>▪ Linked in with family support services</li> </ul>
Appreciation	<ul style="list-style-type: none"> <li>▪ Lone mother – thankful that a state agency gave her some practical help without judgement</li> </ul>	<ul style="list-style-type: none"> <li>▪ Father and son relations improved</li> <li>▪ Reinvestment in children</li> </ul>
Accommodation	<ul style="list-style-type: none"> <li>▪ Changed mind regarding putting client into care</li> </ul>	<ul style="list-style-type: none"> <li>▪</li> </ul>
Community	<ul style="list-style-type: none"> <li>▪</li> </ul>	<ul style="list-style-type: none"> <li>▪ Dignity within the community after stigma of delinquency</li> </ul>
Relationships	<ul style="list-style-type: none"> <li>▪</li> </ul>	<ul style="list-style-type: none"> <li>▪ Extended family have become involved and ease stress</li> <li>▪ Relationship bonding</li> </ul>

**Table 6.4 Positive changes and benefits to clients’ families as identified by YAP Staff**

	Advocates	Deputies
Increased trust and responsibility	<ul style="list-style-type: none"> <li>▪ Talks to the advocate about life</li> <li>▪ Is attending most appointments</li> <li>▪ Increased responsibility for actions and awareness of consequences</li> <li>▪ Greater willingness to help and to stay out of trouble</li> <li>▪ Happier in himself – knows that people are there to help him when he needs it</li> <li>▪ Greater sense of empathy towards other people/services position</li> <li>▪ Knowing there is somebody reliable to look after needs (rather than food and clothes)</li> <li>▪ Discusses thoughts and ideas with someone outside of his experience</li> </ul>	<ul style="list-style-type: none"> <li>▪ Relates well to advocate and a strong bond exists</li> <li>▪ View of future and planning own choices and paths</li> <li>▪ Saving for the future</li> <li>▪ Better communication</li> <li>▪ Recognition of past difficulties</li> <li>▪ Trusting in someone who gives them a voice</li> </ul>
Social Behaviour & Peer Associations	<ul style="list-style-type: none"> <li>▪ Shown no sign of cruelty/violence despite reputation</li> <li>▪ Less criminal and anti-social behaviour</li> <li>▪ Control over alcohol and drugs</li> <li>▪ Walked away from fights</li> <li>▪ More sociable</li> <li>▪ More respect for others</li> <li>▪ Made new friends within the community</li> <li>▪ Learning day-to day tasks, handling money, meeting people</li> <li>▪ Out of same physical environment – able to see other places, people and possibilities</li> </ul>	<ul style="list-style-type: none"> <li>▪ Will not go out with old peers at night</li> <li>▪ Involved in football and social club</li> <li>▪ Better engagement with services and activities</li> <li>▪ Better peer and behaviour choices</li> <li>▪ Discontinued drug use</li> <li>▪ Stopping drug and alcohol use</li> <li>▪ Better behaviour at home/outside</li> <li>▪ Better personal relationships</li> </ul>
Employment	<ul style="list-style-type: none"> <li>▪ Worked for a length of time</li> <li>▪ Participated in work experience</li> <li>▪ Set up client with a part-time job</li> </ul>	<ul style="list-style-type: none"> <li>▪ Found work experience</li> <li>▪ Began work experience</li> <li>▪ Working</li> </ul>
Education	<ul style="list-style-type: none"> <li>▪ Went back to school</li> </ul>	<ul style="list-style-type: none"> <li>▪ Back at school</li> <li>▪ Doing well at school</li> <li>▪ Linked back with education</li> <li>▪ Education</li> <li>▪ Engaging in education</li> </ul>
Psychological	<ul style="list-style-type: none"> <li>▪ Better feeling of self worth and more aware of [own] capabilities</li> <li>▪ Higher self-esteem</li> <li>▪ Increased positive self-image</li> <li>▪ More confident</li> <li>▪ Better at controlling anger</li> <li>▪ No longer a fear of engaging with formal structures</li> <li>▪ Confidence in his ability to put forward his views</li> <li>▪ Confidence to say no to men</li> </ul>	<ul style="list-style-type: none"> <li>▪ Better anger management and self discipline</li> <li>▪ More positive/ Increased self esteem</li> <li>▪ More self directed</li> <li>▪ More self belief and communication of needs</li> <li>▪ Greater self-esteem</li> </ul>
Family	<ul style="list-style-type: none"> <li>▪ More contact with family</li> <li>▪ Closer contact with family</li> <li>▪ Re-introduced client to godparents</li> </ul>	<ul style="list-style-type: none"> <li>▪ Returns home at night</li> <li>▪ Improved relations with mother and family</li> <li>▪ More aware that family want to help him</li> <li>▪ Developing natural openness with parents</li> <li>▪ More stability in family relationships</li> <li>▪ Family support</li> </ul>
Accommodation	<ul style="list-style-type: none"> <li>▪ No longer in emergency accommodation</li> <li>▪ No longer destitute</li> </ul>	<ul style="list-style-type: none"> <li>▪ No longer sleeping rough</li> </ul>

**Table 6.5 Positive changes and benefits in the young person identified by YAP staff**

### **6.13 Negative Consequences**

Three advocates and two deputies felt there were negative consequences associated with the programme. Seven advocates were unsure about this. At the focus groups these were discussed.

#### *Labelling*

Advocates working within the smaller community areas felt that young people might suffer due to negative labelling because of participating with the programme. Advocates feared that people might become aware of the young persons background or nature solely through their connection to the programme. To avoid this occurring some advocates have had to keep the nature of their work quiet as a means of protecting the young person.

#### *Over-Dependency*

When asked if they believed if the programme encouraged the young person to become overly-dependent on them, in four cases (20%) the advocate said that it had and in fourteen cases (70 %) the they said it had not. In one case, the advocate was 'unsure'. In certain cases, particularly in situations where the family situation had not improved, advocates felt over-dependency was a significant issue. However, they were confident that the situation could be controlled by putting in place certain procedures such as gradually phasing down the hours, constantly reminding the young person that the programme is only for a six month duration and engaging the young person in closure activities to mark the end of the programme. Advocates did not see over-dependency as a major problem as contact is maintained with the young person for as long as they feel is necessary.

#### *Lack of Step-Down*

A lack of any 'step down' service to offer clients rose as a significant issue at the focus groups and some felt that a group for YAP participants needed to be set up to ease the transition as their time with the programme draws to an end. Others felt that bringing these young people together as a group was a bad idea, as they needed to learn to mix with "normal" kids within the community setting. They discussed the possibility of bringing the young people together in small groups of two or three and working with them on activities such as communication and self-esteem, that would help them to mix with other groups in the future.

*"The transition from intensive contact on completion of [a] six-month time period – very difficult for client to deal with – sense of abandonment"*

#### *Continued support*

Deputies said they were anxious about the maintenance of support structures once the programme drew to an end and one deputy said that if the services do not come on board as promised, families will have been given a false sense of hope and progress made by the programme will be stunted. In many cases, families had prior experience of being let down by people who did not come together for them and they had engaged with YAP because they had come to trust the advocate.

#### *External Factors Hindering Client Progress*

Six advocates and three deputies reported they had encountered factors external to YAP that have hindered the progress with the clients: Difficult relationships with services; red tape and delayed action from other services; communities wielding negative stigmas against individuals; a lack of local youth services to facilitate clients; delays in judicial charges being brought to the fore consequently impinging upon the clients progress and negative attitudes towards the client are factors that have been encountered.

### **6.14 Suggested Improvements to Programme**

#### *Improved Working Conditions*

All three deputy managers believed more training in supervision and group facilitation would be of benefit to them. A permanent contract offering increased stability within the programme structure and increased support from YAP staff in the UK & USA would improve their position. Nine advocates said that changes could be made to improve the position of advocate. The majority believed an increase in wages and expenses would improve the job and some believed a full-time salary was needed to keep core advocates in the job. Increased job security and employment rights were considered issues also needing to be addressed. One advocate and one



deputy believed that advocates should obtain a recognised qualification after a certain period of working with the programme. Advocates said they would like to see improved communication between YAP staff and with other services. An increased recognition by other services of the programme and more access to facilities would improve the advocates working conditions. There was mention by one advocate of the need of an independent space or agency where complaints could be made regarding issues with YAP management.

*Wraparound and Individualised Service Plan*

Responses were mixed regarding changing the wraparound meeting. Four respondents believed that changes could be made to improve the wraparound meeting. Some felt a greater commitment from social services and the client’s family was needed and that these services needed to commit to a flexible time frame to ensure all helpful people are involved. Five were unsure if changes need be made and four believed that no changes were required.

*“Each case is different – I think it is excellent from my experience”*

Seven advocates believed that changes could be made to improve the implementation of the ISP’s. Some thought specific tasks and duties should be given to designate people and a follow-up wraparound planned at that stage. Some felt more personal involvement was needed from representatives from other services involved with the client. There was also the suggestion from one advocate that the wraparound meeting frightens the young person into agreeing to the conditions of the individualised service plan. In one case, the advocate reported that the young person agreed to suggestions made at the meeting when in truth he had no interest in the named activity and didn’t partake in these activities after the meeting. Two deputy managers believed changes could be made to improve the wraparound meeting. Extra training for the facilitators in conflict resolution was a suggested improvement for wraparound meetings.

One deputy and one advocate said that closer monitoring of their implementation was needed and plans needed to be written up, signed and distributed to every member of the team within 48 hours in order to be ultimately effective. The longer it takes for the plan to be distributed the less powerful effect it will have on the young person. Ancillary to the workings of the programme was the need of some form of local service directory to aid YAP staff in formulating the plans. At present, no formal directory identifying youth services within the catchment areas exists. The most significant strength attributed to the ISP is its flexible nature.

**Advocates suggestions to improve programme delivery**

Services	<ul style="list-style-type: none"> <li>• “Make people more aware of who we are”</li> <li>• “Presentation for all services”</li> <li>• “Sometimes it’s hard to maintain the services after YAP”</li> </ul>
Expenses	<ul style="list-style-type: none"> <li>• “There could be more money allocated to the youth”</li> <li>• “Petrol expense” - particularly for advocates in rural areas”</li> </ul>
Staff	<ul style="list-style-type: none"> <li>• “Core team developed”</li> <li>• “Salary for core team”</li> </ul>
Training	<ul style="list-style-type: none"> <li>• “Needs to be improved”</li> </ul>
Family	<ul style="list-style-type: none"> <li>• “Increase parental participation”</li> </ul>
Structure	<ul style="list-style-type: none"> <li>• “Wraparound meeting need to happen faster”</li> <li>• “Implementation Group can highlight the loopholes”</li> <li>• “Other people have to start taking ownership – wraparound team don’t actually properly take ownership”</li> <li>• “Transitional Group”</li> </ul>
Supervision	<ul style="list-style-type: none"> <li>• “Increased supervision for staff in rural areas”</li> </ul>

Table 6.6

**6.15 Programme Model**

All of the programme staff said they were in favour of the YAP model. Eight advocates and two deputy managers believed the programme was ‘extremely valuable’ and four advocates and one deputy believed the

programme was 'valuable' in meeting the needs of the young people. One advocate believed the service they provided was no different from related services however, twelve advocates and all three deputies believed that the service provided by them differed greatly from other services available to the target group. The elements of the service that make it different included: The programme offered a 'hands on' client based approach; the programme was not part of a state authority which makes it a friendlier service; it offered a more human approach allowing the young people to have fun and learn to place trust in someone who is not considered to be an 'enemy'; it offered round the clock availability.

*"We're not tied by rules, regulations, fear etc. The youth doesn't see us attached to any agency and confides more. By working with one child only we have more time to link him to services and develop the relationship. In fact if properly funded this programme is excellent"*

Deputies believed that families had engaged with the service because it allowed them the choice to do so and did not impose rules and methods on them.

## SECTION 2 – Programme Manager

### 6.16 Interview

A face-to-face interview was carried out with the programme manager in October 2003. The interview was recorded and transcribed. The most salient points from this interview are presented in this section.

#### *Implementation*

The programme manager started in September 2002 and began working with the first case in October 2002 and had the programme up and running very quickly. Early issues faced by the programme included:

- People not understanding what the programme was about
- Reservations in relation to bringing in unskilled people
- Trying to find the place in the continuity of services
- Issue with one residential unit cleared up at this stage following mediation with the support of the implementation group
- Saying that YAP was different and challenging for a number of reasons -seven day full time service, flexibility, individual service plans

Over time, the programme structure has changed to meet needs and issues that have arisen within the region. The manager said that three part-time deputy managers had been recruited and the programme was looking at creating specialised roles within the team.

#### *Target Group*

The programme manager was happy that the programme targeted the right young people. He said that nearly 100% of those who should have been on the programme were provided with places. He said at the start of the programme there were a few inappropriate referrals. He said that out of eight young people who had been referred to Castleblaney, YAP was working with six and two were in residential care.

#### *Wraparound & ISP*

The programme manager believed that a key aspect of the wraparound was its non-statutory and non-professional style. The programme was pro-active in relation to issues that had arisen at the wraparound and the meeting allowed people to be challenged. The flexibility of the service has challenged other professionals who are constrained by time. The manager felt that the individualised service plans were 100% accurate in relation to identifying what needs to be done with each case. The methodology used in designing a plan is a key part of the process. The levels of family involvement varied due to the varying nature of needs.

#### *Support structures*

The programme manager believed that YAP provided support structures to families but the provision and identification of suitable structures and resources for young people needed to be improved upon.

#### *Advocate Relationship*

The manager felt that the advocates had positively engaged with the programme and that the young people got a lot of out relationship with advocate. While he accepted that there was possibility of manipulation by the young people, he saw the relationship between advocates and young people as becoming more direct, whereby young people realise that there is more to be gained by engaging honestly with the advocate.

#### *Other Services*

The basis of YAP's success depends on its working partnership with other services and the biggest challenge has been in getting services to work with the programme. The programme manager gives a 70% rating on the engagement with the services that YAP needed to work with in order to support the young people. By developing better links with other services it was felt that the programme could be developed better to suit clients needs and how from this a 'step down' could be created from the programme into a mentoring programme.

### *Success of Programme*

The programme manager believed that the programme had been successful in achieving the target level of success, but saw plenty of scope for improvement. Room for improvement included hanging the implementation surrounding programme extensions. While short extensions of the programme were reasonable, long ones were not and it is felt that it was better for the young person to go off the programme and be re-referred then to get an extension. Three factors were identified supporting the success of the programme: successful recruitment of advocates; the existing service context in which the programme was established and the model.

## **SUMMARY: Chapter 6**

The majority of programme staff said they were satisfied with their jobs, although a number of significant areas existed that they would like to see addressed. Advocates are paid by the hour but are not guaranteed a consistent number of hours from week to week and in order to be paid they must rely on the young person honouring arrangements. On occasion advocates had experience of young people refusing to engage or failing to show to meet as promised. Accordingly, it was reported that some advocates had finished employment with the programme due to undependable payment methods and inconsistent nature of the work. Staff would like to see a payment increase or fixed weekly wage for those who have worked with the programme since its inception, many of whom have acquired an array of necessary skills that are of benefit to the programmes success. Another area that needed improvement was the relationship with other services. While there has been a definite improvement in inter-service relations since the programme has been established, communication levels needed to be increased and services needed to provide further impetus as members of YAP child and family teams. Staff felt this would increase the chances of creating lasting support structures for the young person. A greater coordination of all services was needed across the board to increase the multi-agency support for the young person. For the most-part, staff were satisfied with the level of training they had received although all respondents but one felt that on-going training was needed due to the multitude of social problems they have come into contact with. Support and supervision of cases is adequate with the majority reporting they receive adequate support from other staff members.

Staff felt that nearly all the young people involved were in need of an intervention such as YAP and their work has been effective with the majority of participants. The majority of young people had participated well with the programme and valued highly both the programme and the mentor relationship. The level of participation on the part of the young people was very high and was relatively high on the part of the families. A salient point emerging from the focus groups was that the families with the greatest problems are often the least open to discussion and are most difficult to engage with the programme. Often the young person is viewed as the only problem within the household and the family fails to engage to the required level. Some felt families should be under more obligations to participate but others argued that forcing vulnerable families to become involved is an unsuitable method. Often when the young person becomes involved with the programme, the family engages once they get used to the advocate. For the most-part, according to programme staff, the programme has achieved many of its goals: In half the cases advocates felt that support structures were successfully created and clients had responded well to them; in fourteen cases the advocates felt that the programme had provided the young person and the family with a voice; in more than half the cases they had worked with staff felt that the wraparound had been effective in motivating the young person to realise a change in lifestyle was needed and that the young person had been helpful and encouraging in implementing the I.S.P. All programme staff were in favour of the programme model.

The programme manager believed that the programme has been successful in achieving its target level of success. A large part of the programmes success is its non-statutory nature and its quick response to the needs of families. He said that all the needs of families were identified by the needs assessment. The programme manager was happy with the success but felt that identifying support structures and working in partnership with other services needed improvement. The recruitment of successful advocates, their focus on the specific target group and the implementation of the model has been integral to the programme's success to date, in his view.

## Chapter 7 – Referrers Perspective

---

### 7.1 Introduction

The following chapter presents the views of the programmes referral agents. The first section presents the views of the referrers and the second section gives details of the views of the Children Act Services managers.

### SECTION 1: Referral Agents

#### 7.2 Methodology

Questionnaires were sent to twenty-two people who were involved in referring young people to the Youth Advocate Programme. This section is concerned with those cases referred and accepted to the programme prior to the end of August 2003. The questionnaires, distributed to the referral agents in September 2003, comprised of thirty-seven questions, aiming to explore the referrers views on the following areas: expectations and performance; the target group; programme staff; programme delivery and overall value of the programme. Six questionnaires were returned by the initial deadline. Follow up letters were sent to remind those who had yet to complete the questionnaire to do so as soon as possible and ten more questionnaires were returned following the follow-up letter. The final response rate was sixteen (73%). The questionnaire asked respondents to answer questions about themselves and about each of the cases they had referred as a means of assessing their view on the progress of individual clients. In total, referrers responded in relation to twenty-five young people and where *cases* are referred to in this section, it can be assumed that reference is being made to the young people rather than the referrers.

#### 7.3 Introduction to the Programme

Roles held by the referral agents were varied. The majority of the referral agents worked for the Social Work Department: ten were Social Workers; three were Social Work Team Leaders and one held the post of Principal Social Worker. The two remaining referral agents were a Project Leader and a Project Worker from local Neighbourhood Youth Programmes. Respondents made referrals to the programme based on the knowledge they had gained from a number of different sources. Six of the referrers were introduced to the Youth Advocate Programme by a presentation at work. Five respondents learned of YAP through the Children Act Services Managers and one respondent was told about the programme by a Principal Social Worker. The remainder replied ‘through work’. Twelve referrers had been given written information about the programme in advance of making their referral. Nine believed the information clearly outlined the objectives of the programme. The remaining three were ‘unsure’ on the point.

Respondents shared similar motives in their decisions to refer young people to the programme. Firstly, the fact that no other service was available to address the needs of the client group was an important aspect of the programme’s appeal. Secondly, the programme methodology with its focus on one to one, intensive, around the clock intervention was felt by referrers to be a powerful and important method of dealing with the target group; many had little experience of positive adult role models available when needed. Thirdly, creating a partnership with the family and focusing on including their opinions took a ‘different’ and ‘new’ approach that appealed to referrers and fourthly, in many cases, due to restrictions within the structures of existing services, referral agents felt they could offer no further support to the clients and referred them to YAP as they felt the programme could do more for their situation.

*“Advocate could link in with [the] teenager on a more regular basis, to focus on more practical matters than my job constraints will allow. The focus is on its ties within the community”*

According to referrers, the approximate length of time between initial referral and the young person initiating the programme was varied. Three referrers answered 1 – 2 weeks, four referrers answered 3 – 4 weeks, three referrers answered 5 – 6 weeks, two referrers answered 7 – 8 weeks, one referrer answered 11 – 12 weeks and two answered more than 12 weeks. When asked if they were happy with the timeliness of this response, ten said that they were, three said they were not and one responded ‘yes and no’, stating they were happy with the length of time involved for one case but unhappy in a second case.

### *Expectations and Performance*

When asked if their experience with YAP matched their initial expectations of the programme the response was mixed. Four referrers answered 'yes', six referrers answered 'no' and four referrers were 'unsure'. Those who were happy with the programme delivery said the programme had done exactly what it had set out to do by providing a one to one service that spanned seven days and focused always on the interests of the young person. In some cases referrers said that there was improvement in the young person's behaviour and they had come to be better integrated within their community. In other cases, it was felt that YAP had aided the family's engagement with other services. One referrer had an extremely positive experience of the programme;

*“The work that YAP does and the advocates surpassed my hopes and expectations. I am very impressed with the availability and diligence of the workers”*

Some referrers said that their expectations had not been met for a number of reasons. Some considered YAP staff to be 'unprofessional' and felt their informal manner was at times inappropriate. They felt YAP staff needed to be better trained in issues of child protection, child legislation and family law. There is a sense that the position of the YAP worker needs to be clarified within the professional care spectrum so that there is a better understanding for all involved what the precise role of the advocate is. In certain cases, this lack of understanding has been cause for a breakdown in communication between related services; at times, the referrer has been excluded or has not been informed about important issues the client had disclosed to the advocate. In some cases, it was felt by the referrer that an inappropriate match of young person and advocate resulting in a personality clash had caused the young person's situation more harm than good.

With regard to expectations they had for the young people they referred, respondents felt let down in three main areas. Firstly, the waiting list caused aggravation to some referrers, who felt certain cases could not afford to wait to begin the intervention. Secondly, some referrers felt that YAP workers had not spent as much time working with the clients as had been expected. Thirdly, the changes seen in the young people during and after participation with the programme were very small and some referrers questioned their sustainability. For some, there was a sense of disappointment regarding the programmes initial performance in comparison to initial expectations: one referrer put it; “it doesn't solve all the problems”.

#### **7.4 The Target Group**

Twenty-five young people were referred to YAP by the sixteen respondents who completed the questionnaire. Twenty-two (88%) of the young people had previous involvement with other services prior to their referral to YAP. Referrers were asked to outline the key factors that distinguished the target group from other young people they had worked with. In the majority of cases, the young people were referred due to their involvement in criminal behaviour, non-attendance at school, alcohol and drug use and the lack of parental supervision and family participation. All factors mentioned by referrers are outlined in the following table.

Category	Reason for Referral	No. Of Young People Involved
Legal	▪ In the Juvenile Justice system	2
	▪ Criminal Behaviour	13
Accommodation	▪ Out of Home	2
	▪ Homeless	2
	▪ Living in emergency accommodation	4
	▪ In & Out of Care	1
Education	▪ Out of school	10
	▪ Learning Disability	4
	▪ Difficulties in school	1
	▪ Not performing well at school	2
Psychological	▪ Attempted overdose	1
	▪ Self Harm	1
Family	▪ Very little family contact	1
	▪ Lack of parental supervision and participation	6
	▪ Poor family relationships	1
	▪ Alcoholism in the family	2
	▪ Suffered family bereavement	1
Social Behaviour	▪ Alcohol and drug use	9
	▪ Sexually Active	2
	▪ Physically challenging	1
	▪ Staying out late	1
	▪ Mixing with inappropriate/older peers	1
	▪ Not linking with peers – very withdrawn	1
	▪ Easily led by peers	1
Other Services	▪ Previous contact with other services	2
	▪ Refusing to engage with the Social Work Department	1

Table 7.1 Reasons Respondent's referred young people to YAP

#### *Participation of Service Users & Families*

For the most part, referrers said the young people had participated with the programme willingly. Some had responded eagerly at the prospect of doing activities such as swimming and horse-riding and some had boasted to their friends about the one to one service. One respondent said the young people had been glad to receive support and direction from adult mentors. Others had not been so eager to participate, according to referrers, and responded cynically to the prospect of becoming involved with another service. However, once they came to understand its nature, many of them had engaged with the programme.

Referrers said in thirteen cases the young person had actively participated at the wraparound meeting and in five cases they had not. In one case the referral agent was 'unsure'. Referrers who had not attended the wraparound meetings were unable to answer the question in respect of four cases. With regard to the level of the young person's participation in activities, referrers claimed that there was a high to very high level of participation in thirteen cases. In three cases, referrers reported 'a very low level of participation', in four cases a 'low level of participation' and in another four cases, the level of participation was categorised at a medium level.



**Level of participation of young person in referrers view  
N = 24 cases**

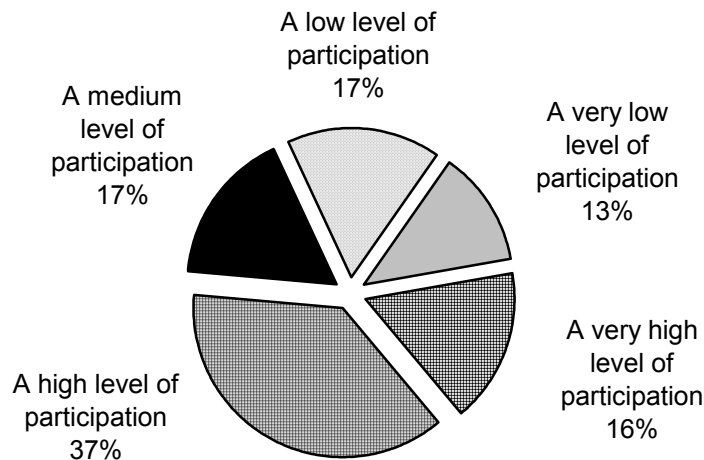


Figure 7.1

Families actively participated at the wraparound meeting in seventeen cases and in two cases they had not, while in another case the referral agent had been unsure. The level of participation varied from family to family; three families were reported to have participated in YAP related activities to a very high level and six families to a high level. However, three families displayed a very low level of participation, four families displayed a low level of participation and four families displayed a medium level of participation.

**Level of participation of families in referrers view  
N = 24 cases**

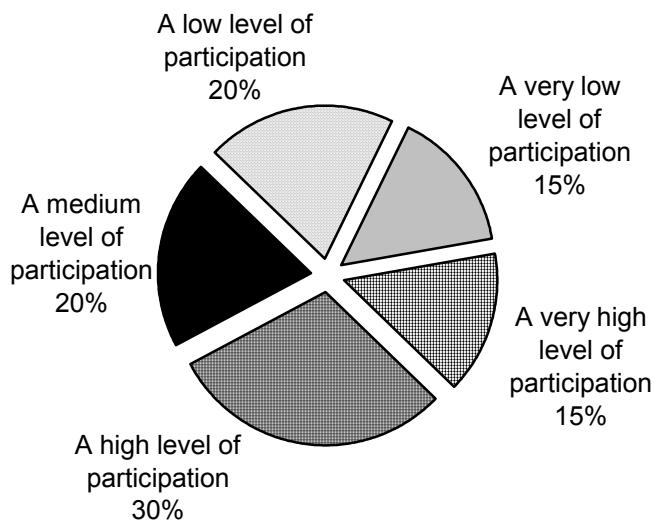


Figure 7.2

### *Benefits and Costs*

In fourteen cases (56%) referrers reported no negative consequences experienced by the young person because of being on the programme. In two cases (8%) referrers believed negative consequences were experienced and in the case of nine (36%) young people, referring agents were 'unsure'. In thirteen cases (52%) referrers stated that they did not think that the programme encouraged young people to become overly dependent on the advocate. In four cases (16%) referrers believed that over-dependency was an issue. In seven cases (28%) respondents were unsure regarding this. In one case the referrer did not respond

In sixteen cases (64%) the referring agent believed that the relationship with the advocate had a positive effect on the young person. In two cases (8%) the referrer believed that the relationship had not had a positive effect on the young person while in six cases (24%) the referrer was 'unsure'. In sixteen cases (64%) the referring agent believed that the young person valued the relationship they had established with the advocate. In three cases (12%) the respondents believed the young person did not value the relationship with the advocate. In five cases (20%) referrers were 'unsure'.

In seventeen cases (68%) referrers believed that the young person had benefited from the programme, in three cases (12%) the referring agents believed the programme had not benefited the young person and in four cases (16%) respondents were 'unsure'. One referrer did not respond to this question. The referrers said that in eleven cases (44%) the programme had benefited the young person's family but no benefits were identified in ten cases (40%) and referrers were unsure in respect of three cases (12%). There was one non-response. For the most part, in the view of referring agents, the programme has been of benefit to clients and to a lesser extent to their families.

### **7.5 Programme Staff**

There was a mixed response from the referring group regarding the role of the advocate and their ability to do the job. Four referrers believed that YAP staff were adequately skilled for the role they played, six referrers believed YAP staff were not adequately skilled and four were 'unsure' regarding this. Two referrers did not answer this question.

Referrers are of the opinion that the position of the advocate and where it stands within the voluntary-service/professional spectrum needs greater clarification. Some felt that advocates have been stepping on their toes by criticising the work both they and other services had done and felt that advocates, at times, had been involved in decisions they were not qualified to speak out about. Others felt that the YAP service had little more to offer the young people than existing services and tended to duplicate work already being done. A major complaint from referring agents was with regard to the poor level of communication between YAP staff and referrers that has prevented relevant information surrounding cases from being passed on. Many respondents felt that further training would be of benefit to advocates.

When asked if they felt it was appropriate for people without relevant qualifications to be working with young people and their families, four referrers replied 'yes'. This group found it appropriate if advocates were skilfully chosen, were trained well, were adequately supported and supervised by management and were willing to share important information with other relevant services. Six referrers replied 'no'. Their reasons included a fear that an untrained person might increase problems for families in serious difficulty and the fact that trained advocates have little understanding of the child care and legal system and have no related relevant qualifications. Three referrers were 'unsure' regarding this.

*"I believe a minimum childcare/community type qualification would be invaluable"*

Referrers were then asked if they had been kept up to date by YAP staff. Six referrers claimed that YAP staff had kept them up to date and two referrers said they had not. One referrer answered 'yes & no' maintaining that they had been kept well informed about one case but not in another. Four referrers were 'unsure' regarding this. When asked if the agreed level of contact had been maintained between themselves and YAP staff, seven answered 'yes'. Four were 'unsure' regarding this and one answered 'yes & no' noting that different staff members maintained different levels of contact, depending on cases.

*“We were very praxis orientated on this issue. I have a phone and they do. If I needed some info I phoned them”*

Two referrers were not so content with the level of contact with staff.

*“A month and more has gone by on cases with no contact”*

Seven referrers were ‘satisfied’ or ‘very satisfied’ with the relationship they had with YAP staff. Six referrers said that they were ‘neither dissatisfied nor satisfied’, while three referrers said they were ‘dissatisfied’ with the relationship with YAP staff.

**Referrers level of satisfaction with relationship with YAP staff N = 16**

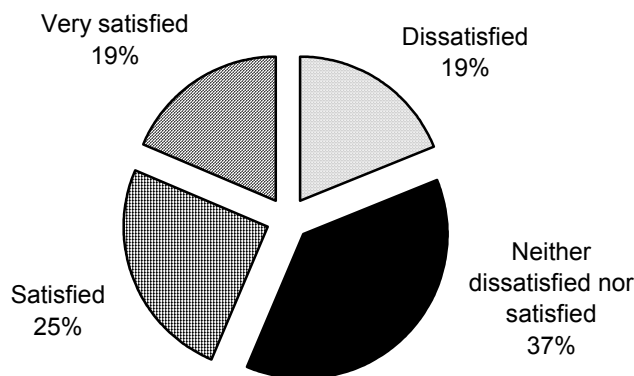


Figure 7.3

## 7.6 Programme Delivery

Referrers were presented with a number of statements and were asked to consider them in relation to each case and to agree or disagree on a scale of one to five with the statement. The statements mirrored the goals outlined by programme protocols and the service agreement between the Western Health Board Service and YAP. Agreement or disagreement indicated the extent to which these goals have been achieved in the referrers’ view.

### *Wraparound Meeting*

In eighteen cases (72%) the referring agent had attended the wraparound meeting and in four cases (24%) they had not. In three cases, the wraparound meeting had not yet taken place. When asked if the wraparound was effective in motivating the young person to realise a change in lifestyle is needed, the majority of respondents indicated some level of agreement. Eight referrers (32%) agreed and five referrers (20%) strongly agreed with the statement. In five cases (20%) respondents neither agreed nor disagreed, in three cases (12%) the referrers disagreed and in one case (4%) the referrer strongly disagreed. In many cases, therefore the wraparound has been successful in its endeavour in the view of referrers

**Implementation of model in relation to individual cases - referrers  
perspective N = 22**

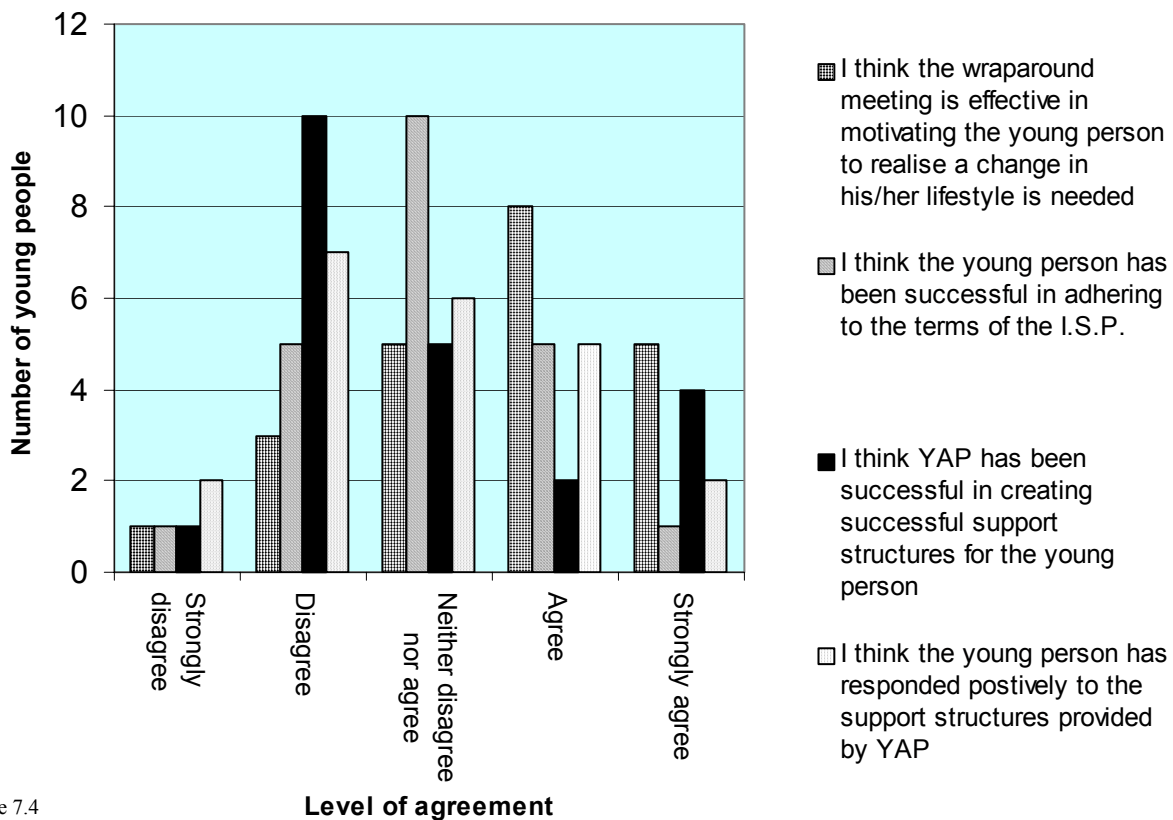


Figure 7.4

*Individualised Service Plan*

Responses were very mixed regarding the ISP. In ten cases (40%) respondents ‘neither agreed nor disagreed’ with the statement ‘I think the young person has been successful in adhering to the terms of the individualised service plan’. In five cases (20%) referrers ‘disagreed’ and in the case of one young person (4%) the referrer ‘strongly disagreed’. Referrers indicated agreement with the statement in five cases (20%) and strong agreement in one (4%). The individualised service plan had not been devised in the case of three people.

*Support Structures*

Referrers were not so positive regarding the statement that implied that YAP had successfully created support structures for the clients. In eleven cases referrers disagreed to some degree – in ten cases (40%) referrers ‘disagreed’ and in one case (4%) the referrer ‘strongly disagreed’ with the statement. Referrers were unable to agree or disagree with regard to five cases (20%). In six cases (24%) respondents either agreed (two cases; 8%) or strongly agreed (four cases; 16%). When asked if they thought the young person responded positively to support structures set up by the programme, in two cases (8%) respondents ‘strongly disagreed’, in seven cases (28%) respondents ‘disagreed’. In six cases (24%) respondents ‘neither disagreed nor agreed’. For five cases (20%) referrers ‘agreed’ and in two cases (8%) ‘strongly agreed’ that the young person they had referred had responded positively. In 28% of cases therefore, there was a positive reaction to support structures.

*Key Strengths & Weaknesses*

Referrers pointed to five key strengths related to the programme. Firstly, it is a service designed specifically for young people and is the first of its kind and is needed. Secondly, it is less bureaucratic and more flexible than other services, which suits the nature of the target group. Thirdly, it promised to focus on the strengths of the young person and it has delivered this promise successfully. Fourthly, highly motivated and interested people staff it. Fifthly, it is community and family focused and this is central to its success.

Five key weaknesses associated with programme are with regard to manipulation, context, dependency and advocate/young person relationship and communication. Firstly, some referrers were anxious about the possibility of the young person manipulating the programme to their benefit and participating purely for financial or other gain and the sense that the young person is spoiled while participating on the programme. In the long run, this could have negative effects on their behaviour.

*“Child may become engaged solely on the basis of what the advocate can offer them financially e.g. haircuts on birthdays, cinema, dinners, clothes”*

Secondly, referrers are concerned with the programme model and where and how it fits within the Irish context particularly in relation to statutory services. Thirdly, there were concerns regarding over dependency on the part of the young person, particularly when the six-month programme is not sufficient for the case and the young person can be left high and dry on programme expiration. Fourthly, a poor match of advocate and young person can worsen the situation for the young person. Fifthly, the level of communication between YAP and other services has generally been poor in standard.

#### *Suggested Improvements*

Seven referrers believed that changes could be made to improve the wraparound meeting. Three referrers believed no changes were needed, while two referrers were ‘unsure’ regarding this. Four referrers did not answer this question, as they had not yet attended any wraparound. When asked if they thought that any changes could be made to improve the implementation of the individualised service plans, six responded ‘yes’, two responded ‘no’, and three referrers were ‘unsure’. Five did not answer this question. Ten referrers said that they had experienced problems while working with YAP with five referrers saying that they have encountered no problems whatsoever.

Category	Referrers suggested improvements to programme	Number of referrers
<b>Communication</b>	<ul style="list-style-type: none"> <li>Improved communication</li> </ul>	2
<b>Training</b>	<ul style="list-style-type: none"> <li>More training for workers</li> </ul>	4
	<ul style="list-style-type: none"> <li>More training for management in supervision</li> </ul>	1
<b>Supervision</b>	<ul style="list-style-type: none"> <li>Better supervision</li> </ul>	2
<b>Advocate Role</b>	<ul style="list-style-type: none"> <li>More careful selection of advocates</li> </ul>	1
	<ul style="list-style-type: none"> <li>Appropriate match of advocate and young person</li> </ul>	1
	<ul style="list-style-type: none"> <li>Clearer role definition for advocates</li> </ul>	2
	<ul style="list-style-type: none"> <li>Clearer boundaries for advocates</li> </ul>	1
<b>Availability</b>	<ul style="list-style-type: none"> <li>Available longer than 6 months 11</li> </ul>	2
	<ul style="list-style-type: none"> <li>Lessen amount of hours with individual young people so a greater amount can be worked with</li> </ul>	1
<b>Other Services</b>	<ul style="list-style-type: none"> <li>Listen to experience of other services</li> </ul>	1
	<ul style="list-style-type: none"> <li>Integrate YAP workers within the childcare team</li> </ul>	1
<b>Wraparound Meeting</b>	<ul style="list-style-type: none"> <li>Quicker implementation of wraparound meeting</li> </ul>	1

Table 7.2

#### **7.7 Value of Programme**

Ten referrers believed that an intervention such as YAP was necessary and five of the referrers were ‘unsure’. Similarly, ten referrers believed that the service provided by YAP differed from other services currently available for the target group, two referrers did not think the service was different and three referrers were ‘unsure’. When asked if they believed if the service could be made available by existing services, there was a mixed response. Five referrers said that it could, four said that it could not and six referrers were unsure on the point.

When asked to rate how valuable they believed YAP to be in meeting the needs of the young people, five referrers believed the programme to be 'extremely valuable', two believed the programme to be 'valuable' and three claimed it was 'of some value'. On the other hand, five believed the programme was 'of little value' and one referrer claims the programme was 'of no value'. However, the majority of the group (twelve) are in favour of the model. Three referrers are 'unsure' if they support the model and one is not in favour of the YAP model.

**Value of the programme in meeting the needs of the young people - referrers view N = 16**

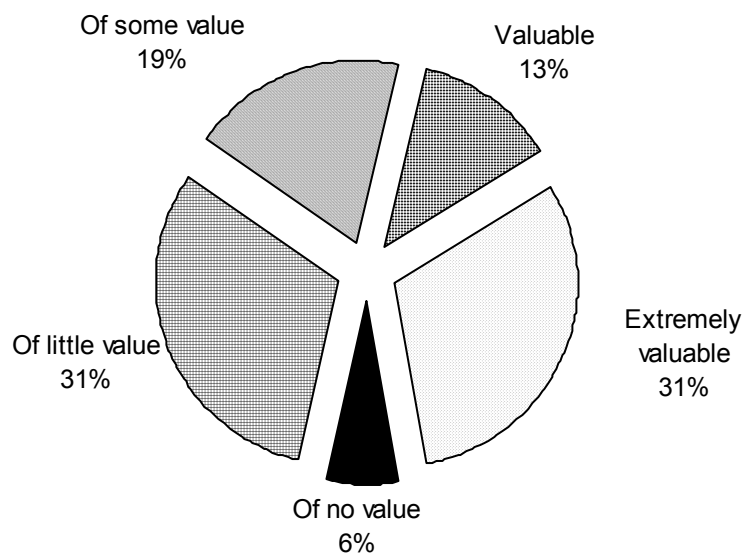


Figure 7.5

## SECTION 2: Children Act Service Managers (CASMs)

### 7.8 Methodology

Interviews were carried out with the three Children Act Services Managers from Galway, Roscommon and Mayo in late January and early February 2004. The interviews were recorded and transcribed and the main points are presented in this section.

### 7.9 Introduction to YAP

The CASMs were introduced to YAP by the Regional Manager for Community Services and the Childcare Manager in July 2002. Within a fortnight, an information day had been organised in Merlin Park, for related services, such as social services, NYPs, community programmes and residential centres, to learn about the programme and its pending implementation within the Galway and Roscommon areas and to a lesser extent, the Mayo area. CASMs were instrumental in introducing the model to the region and worked closely with Health Board management in deciding the criteria of the target group, in hiring the programme manager and overseeing the programmes general implementation. CASMs said they thought YAP had been brought to the Western Health Board region for a number of reasons. Firstly, its focus on community prevention was in tune with the terms of the Children Act 2001. Secondly, there were a number of young individuals within the region who had been displaying very worrying ‘out of control’ behaviour and existing services had run out of answers in response to their problems. Thirdly, the service offered intensive, around the clock intervention, which no other service within the region had been able to provide.

### 7.10 Target Group

#### *Young People*

CASMs were asked to describe the nature of the young people they had referred to the programme. One manager said the young people were beyond the control of their families, some had experienced family breakdown and existing services had been unable to intervene effectively.

*“Beyond NYPs and Springboards, have no support, who the services have no real answer for”*

The other CASMs said the young people they had referred had displayed physical and psychological problems such as challenging behaviour, difficulties with education, low confidence and low self-esteem. They said many had been on the streets where they had been exposed to criminal behaviour, drug use, alcohol use, prostitution, sexual activity and many had become known to the Gardai.

*“More than half, probably three-quarters have criminal charges against them”*

CASMs were asked why they felt the service would suit the individuals they had referred. They replied with a number of reasons.

- Other forms of intervention had failed them
- The young people needed someone to talk to
- The service is available out of hours, which is when they get into trouble
- There is a focus on family involvement
- There is an intense relationship between the advocate and the young person
- YAP responds quickly to their needs

#### *Adults with disabilities*

One respondent said that adults with disabilities had been referred due to their challenging behaviour and a need for extra support within their family homes. Adult referrals, prioritised by the Brothers of Charity or Western Care, are sent to the CASMs, who forward them to YAP. Whether YAP should be dealing with this group arose as an issue for CASMs. Two respondents felt that while the service had been extremely successful and supportive of the group, six months had been an insufficient length of time to work with them. Many needed ongoing care and support and YAP were unable to provide this. The introduction of long-term advocacy

services within the Brothers of Charity and Western Care service would be a more realistic method of dealing with this group, according to two of the CASMs.

*“YAP made good strides with him but at the end there was a bit of panic because there was nothing in place for him”*

*“[It] has been extremely successful with them but the problem is these adults need more than six months”*

### **7.11 Effectiveness Of Programme**

One CASM said the programme hadn't suited all the cases that had been referred particularly in the case of those who lived in residential homes and had no family structure. Two of the managers said they felt that the programme had suited all participants they had referred yet they said that in the case of certain individuals, the programme hadn't reached the levels they had hoped for. Referring to a particular case, it was said

*“It had some success and there were ups and downs and progress and dips and relapses and it didn't ultimately achieve what we would have hoped [but] ...he [young person] was getting so much out of it, he claimed, so he would say it was meeting his needs”*

One CASM said, in hindsight, some of the cases referred in the early days were unsuitable referrals and in those cases, the programme had not been as effective as had been hoped. As time had gone by, the criteria for referrals had become more specific to suit the programme's nature. In some early cases, problems within families were very severe and it had been unrealistic to expect the programme to 'fix' the family in a six months time frame.

*“I think we referred the wrong problems ... dealing with chronic alcoholism...won't be done in six months”*

One of the managers said the programme had been very successful with the older youths that had been referred. Engaging the young person at the right time was an important element to the impact of the intervention. Young people had to be ready for the programme in order for success to be achieved.

### **7.12 Waiting Process**

CASMs are responsible for controlling and managing the waiting process. There are twenty-five people on the programme at any one time and theoretically, Galway gets two thirds of the places and Roscommon gets one third of the places, however, this is flexible to allow Mayo space in certain cases and allows for those with the greatest needs to be given priority. There are always more referrals to the programme than places available and the CASMs meet once a month to discuss candidates and decide who is most in need of the next place on the programme. The individual / family considered to be most in need of intervention will be offered a place. One CASM said that in recent times, the referral agent has been asked to firstly consider a family welfare conference for the YAP candidate. The family is informed of the waiting procedure and after the Family Welfare Conference, they can then decide if they still want to become involved with YAP. At present, there are five referral candidates in Galway and there are six referral candidates in Roscommon. To date thirty referrals (65%) have been made by the Galway CASM, thirteen (28%) have been made by the Roscommon CASM and three (7%) have been made by the Mayo CASM



**Percentage of referrals to YAP to date by Children's Act  
Services Managers N = 46**

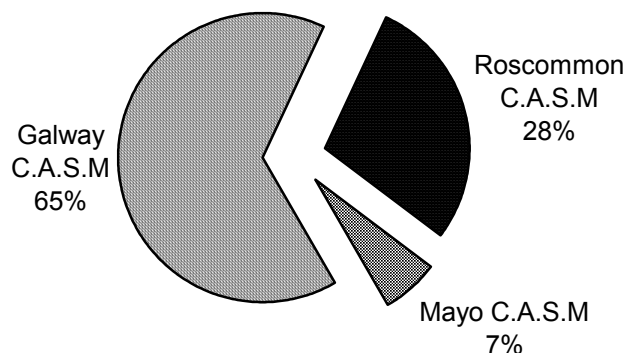


Figure 7.6

### 7.13 Expectations

CASMs were asked to list the initial expectations they had about the programme. Two said that they had high expectations of the programme.

*“Dreamy, the idea that it would literally take these kids and wrap around the families”*

*“The expectations were pitched at a high level because of the way they sold it and my expectations were based on the way they would have pitched it”*

They said they had been excited about introducing a twenty-four hour community intervention that promised a very high success rate with young people in need. One CASM was said to be slightly cynical about how the American model would fit within the Western Health Board region but remained open-minded about its potential.

All CASMs said the programme had met with their expectations and it had delivered as promised. One manager said the 80 – 85% claim of success that YAP had promised had been delivered and the programme had met with most expectations. Where it had not, expectations had been unrealistic and in certain cases, six months had not been enough time to expect massive change. However, the programme has had a positive impact on the majority of the young people.

*“I feel that it has made a difference to a lot of kids”*

Another CASM said that the programme had met more than her expectations. She put the programmes success down to the advocates enthusiasm and dedication. The third CASM felt the programme had definitely met with expectations but felt there was room for improvement within the programme. Since its inception the programme has advanced and progressed, however, it had only been in recent times that YAP had started to meet with the expectations of the professionals

### 7.14 Programme Implementation

#### *Implementation Group*

The CASMs form part of the implementation group that meet once every three months. They said that the meeting has a strategic function, overseeing the programmes implementation, keeping up to date on recent developments, teasing out issues, and offering advice on how best to tackle problems and broader issues that

come into play. One manager said that it was the only forum where they met representatives from the learning disability sector.

#### *Existing Services*

CASMs were asked if they felt that existing services could provide the YAP service. Two replied they could not because YAP filled a gap - present structures within other services meant the intensive out of hours service couldn't be provided. The fact that YAP wasn't tied into the Health Board structure meant it was not as bureaucratic as other services and the needs of the young people could be responded to much faster. The third interviewee felt the service could be provided by present services but present services would have to change their structures in order to successfully deliver.

#### *Suggested Improvements*

The CASMs were asked what changes they would make to improve the programme.

	Changes CASMs feel would improve the programme	Number of CASMs
<b>Adults with disabilities</b>	<ul style="list-style-type: none"> <li>The learning disability aspect in relation to adults should be removed from CASM remit</li> </ul>	1
<b>More spaces</b>	<ul style="list-style-type: none"> <li>More than twenty-five spaces should be available at one time</li> </ul>	2
<b>Step-down programme</b>	<ul style="list-style-type: none"> <li>Increased planning was needed regarding a step-down from the programme</li> </ul>	2
<b>Safe practice</b>	<ul style="list-style-type: none"> <li>Safe practice reviews into the service in terms of YAP staff needed to be introduced</li> </ul>	1
<b>Extensions</b>	<ul style="list-style-type: none"> <li>More clarity on cases seeking extensions</li> </ul>	2

Table 7.3

#### *Changes & Outcomes*

All CASMs agreed that the programme had benefited the individuals it had referred. The level of support behind its' implementation had been extremely positive and according to one CASM, YAP had come to be "another tool" to address the needs of the target group.

At the interviews, CASMs were provided with a table and they were asked to provide details about each of the young people they had referred to YAP. They were asked to provide examples of change they had seen and to say if they were happy with the outcome in each case. In the majority of cases (34) CASMs reported a positive change, in five cases, they replied 'yes & no', and in three cases 'no change' and in one case it was 'too early' to tell.

**Have you seen a positive change in the cases you have referred?**  
**N = 46**

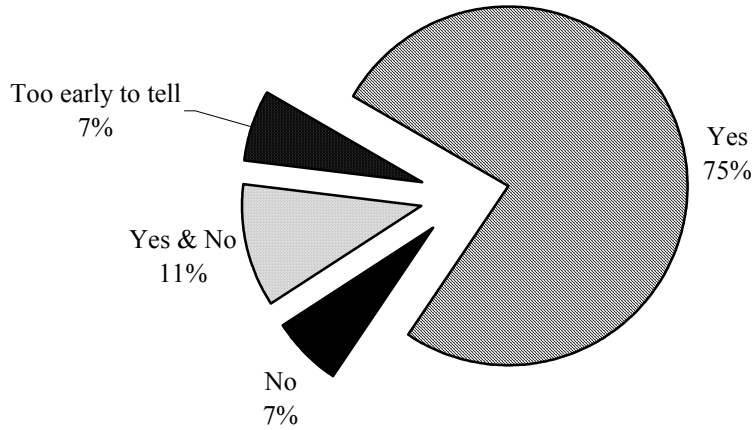


Figure 7.7

CASMs were asked if they were happy with the outcomes of the cases they had referred. In the case of twenty-six young people, they were happy with the outcome and in the case of five young people, they were happy with the outcome 'to date'. In the case of ten young people, they were 'unsure' if they were happy with the outcome and in the case of two young people, they were not happy with the outcome.

**Are you happy with the outcome of this case?**  
**N = 46**

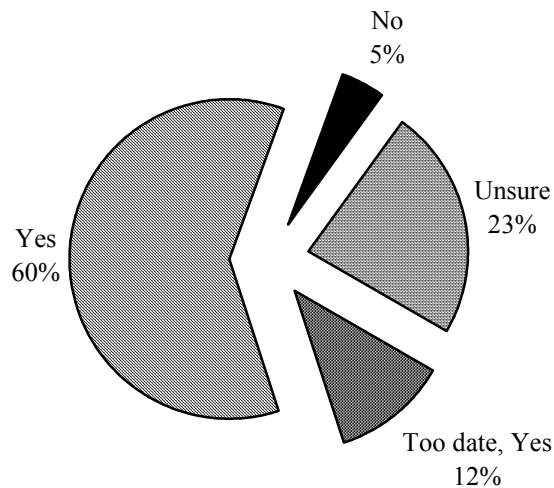


Figure 7.8

## **SUMMARY: Chapter 7**

### **Referral Agents**

The young people were referred to YAP because it was the first service of its kind to focus on the needs of the specific target group. It offered a fresh approach that was intensive and family focused and provided a service to a group who were in need of further support, that present services had been incapable of providing. In general, young people were referred due to criminal behaviour, non-attendance at school, alcohol and drug use, lack of parental supervision and accommodation needs. For the most part, respondents felt the levels of engagement with YAP had been high and reported a high level of participation from the young person in 53% of cases and a high level of family participation in 45% of cases. While many referrers were in favour of the wraparound meeting and its ability to motivate changes, many felt that YAP had not been so effective in creating long-term support structures for the clients. One quarter of respondents felt the programme had delivered its promised goals by improving community integration, behaviour and engagement with related services on the part of the young person and their family.

Ten referral agents said they had experienced problems while working with the programme. The quality of inter-service staff relationships varied and caused mixed responses from respondents: 44% were 'satisfied' to some level with the relationship; 37% were 'neither satisfied nor dissatisfied' and 19% were 'dissatisfied'. In their experience, YAP staff had been unprofessional, were in need of further training, needed to improve their communication levels with extant services and needed further clarity on their role within the spectrum of care. For the programme to be more successful, staff needed to be skilfully chosen and properly supervised by management. Other points of complaint surrounding the programme included the waiting process, the limitation of spaces and also questioned was the sustainability of change once the programme has finished with a client.

Ten referrers felt that an intervention such as YAP was needed and in 44% of cases, it was said that the programme had been valuable in meeting the needs of young people. In the majority of cases (64%) referrers said the advocate had a positive effect on the young person and they had benefited from the programme. It was only in the case of two young people that negative consequences were reported to have arisen. The programmes key strengths included: its focus on young people; its flexibility; its focus on strengths; its highly motivated staff and its community and family focus. Its weaknesses included: its potential to be manipulated; its ambiguous location within the care spectrum; its potential to generate over-dependency; the possibility of mis-matching advocate and young person and its inadequate levels of communicating with related services.

### **Children Act Services Managers**

CASMs believed the programmes participants had been beyond the control of existing services at the time they were referred and were in need of an intensive out-of-hours service that could respond quickly to their needs. For the most part, CASMs have found the programme to be effective, were happy with the outcomes in 60% of the cases and have identified positive change in 75% of the cases referred. In certain cases where the programme did not reach the levels they had hoped for, they had come to realise that some problems were too difficult to 'fix' in a six month time-frame and were not suitable referrals to the programme. Changes suggested to improve the programme included removing the disability section from the remit; increasing the number of spaces; providing a suitable step-down service; introducing safe practice monitoring and lessening potential for extensions. CASMs felt that YAP has filled a significant gap by providing a service specific to the target group. The programme had met their expectations, had delivered as promised and all were very much in favour of the model.

**8.1 Introduction**

This section provides details of the experience of the people within services who are linked to YAP through the programmes clients. The data was gathered using two different methods to suit two different kinds of service. Taking into consideration the intense nature of the service they provide, the managers of four residential centres were interviewed to allow them to express their views. All other services were sent questionnaires as a means of gathering this data.

**SECTION 1: Questionnaire Responses**

**8.2 Service Providers**

Questionnaires were designed for service providers with the aim of exploring their understanding of the programme model, the level of participation of the programme users with their service and the relationship and level of contact they have had with the advocates. A list of relevant contact persons within services that were linked to the programme was compiled from information in the advocates’ questionnaires and with help from the programme administrator. To avoid repetition of information, those services that referred clients to the programme were not included, as their opinions had already been collected and documented in the referral section of the evaluation.

In November 2003, evaluation questionnaires were sent to twenty-five services. Seven questionnaires were completed and returned by the initial deadline. Follow up letters were sent to remind those who had yet to complete the questionnaire to do so as soon as possible and a further six questionnaires were returned. The response rate stands at 13 in total (52%). Some questions asked respondents to answer in relation to specific cases they had come into contact with and as a result thirty-one cases were referred to. However, this number does not necessarily refer to thirty-one individuals, as it is probable some were answering in relation to the same person. Most of the clients had contact with more than one service during the course of the programme. This crossover is incidental to this part of the research as the aim here is to understand the perceptions of service providers in relation to the programme rather than gauge the progress of individual cases.

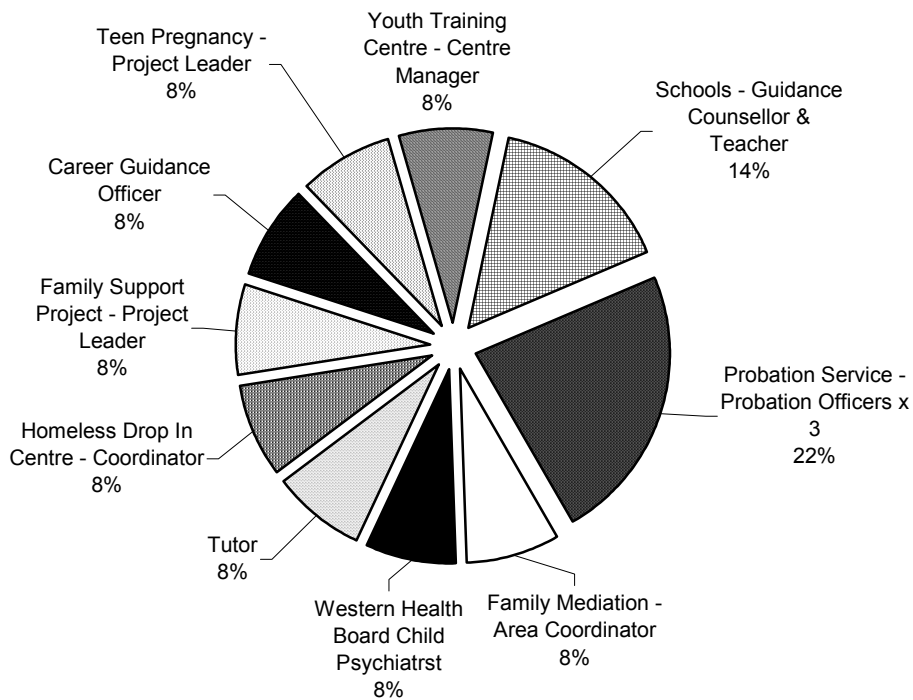


Figure 8.1

**Ten services who responded to the questionnaire**

### Respondent Profile

In total, thirteen individuals from ten services responded to the questionnaires. Three respondents were probation officers, two respondents were from schools, one was a Western Health Board child psychiatrist, two were involved in the education and training sector and the remainder were project leaders and coordinators from a variety of family and community-based services.

### 8.3 Contact with YAP

Six respondents were introduced to the programme by the individual advocates who had already been working with the young people. Two respondents had been introduced to the programme at case conferences, another at a seminar, another had met with the programme manager and another had said programme workers had approached their service. One of the services had received a leaflet about the programme through the post.

As a means of identifying the relationship they have established with the programme, respondents were asked what they understood the programme to be about. All respondents seemed to be aware of programme methods and procedures. The majority focused on the mentoring/advocacy aspect of the programme and some referred to the target group. Others were aware of its strength based individualised service. At no stage did they refer to the programme's endeavour to build lasting support structures for the clients.

<i>What do you understand YAP to be about?</i>	
<b>Mentoring</b>	<ul style="list-style-type: none"> <li>• “A service that mentors or advises students who have been marginalized e.g. homeless, addiction, crime, poverty”</li> <li>• “Young person is befriended by a volunteer worker who will work on a support programme for the young people”</li> <li>• “Building a positive relationship with the young people... positive role modelling – mentoring, encouraging pro-social behaviour and expressions”</li> <li>• “To provide “buddy” type programmes with the aim of introducing clients to positive alternatives in terms of behaviours at home/social activities”</li> </ul>
<b>Target Group</b>	<ul style="list-style-type: none"> <li>• “Targeting individual young people who are at risk – supporting them, putting them on an even keel, run a 6 month programme”</li> <li>• “... programme for young people who have had problems with drug and alcohol addiction...work as an advocate worker for each individual client up to 15 hrs per week”</li> <li>• “YAP works with young people at risk”</li> <li>• “Caring for disaffected youth from dysfunctional families usually YAP creates a family-like tribe like setting to help the child over his/her difficulties”</li> </ul>
<b>Individualised/Needs based</b>	<ul style="list-style-type: none"> <li>• “A programme to specifically work with a young person on an intensive basis in order to best meet their needs”</li> </ul>
<b>Child/Family Orientated</b>	<ul style="list-style-type: none"> <li>• “Similar to family welfare conferencing – independent child/family focused solutions”</li> </ul>
<b>Strength based guidance</b>	<ul style="list-style-type: none"> <li>• “Focus on strengths”</li> <li>• “Support, guidance, understanding for young people – work on their strengths”</li> <li>• “The delivery of an intense model of individual intervention with a young person working to a ‘strengths perspective’”</li> </ul>

Table 8.1

## 8.4 YAP Programme

### *Participation & Engagement*

In twenty-three cases (74%) the young person had participated with the service prior to their engagement with YAP. In five cases, the client became known to the service provider subsequent to becoming involved with YAP. In two cases respondents were unsure regarding this. In seventeen cases (63%) where respondents answered, they said they had noticed a difference in the level of participation on the part of the young person subsequent to becoming involved with YAP. In nine cases (33%) there was no difference and in one case (4%), the respondent was unsure.

Some service providers gave examples relating to their responses. In many cases where a positive change was seen, respondents directly attributed the improved behaviour to the support of the programme. Improved behaviour included better attendance, increased levels of communication and self-esteem and non re-offending behaviour. Three service providers noted no change in four cases. One respondent was unable to give an example because the young person had left the service before change could be identified. Another respondent reported that change had occurred while participants had been on the programme however, they had reverted to former behaviours once the programme had ended.

**Any difference in level of participation subsequent to YAP intervention N = 27**

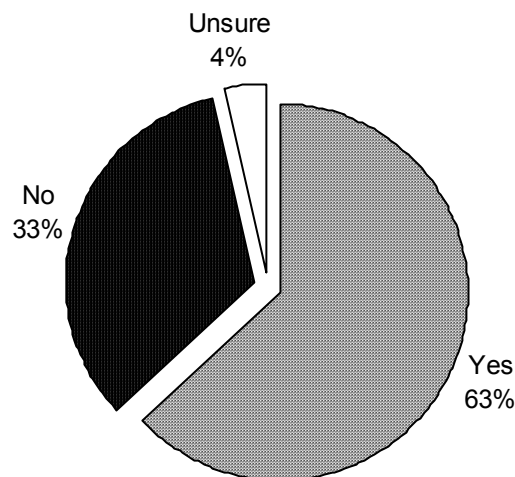


Figure 8.2

<b>Remarks made regarding the difference in participation with services subsequent to becoming involved with YAP</b>	
<b>Positive</b>	<ul style="list-style-type: none"> <li>• “In both cases the YAP workers encouraged the students to attend and cooperate. The YAP workers helped out in difficult situations”.</li> <li>• “The young person’s communication skills and self-esteem were enhanced. Positive role modelling helped him to keep appointments and follow through the tasks given to him”.</li> <li>• “More regular attendance/cooperation”</li> <li>• Two cases “involved well with service because of their support from the YAP programme”.</li> <li>• One of three cases “has worked very well primarily due to the sincere interest of the YAP advocate and the sharing of information”</li> <li>• “The young person used our service intermittently prior to YAP involvement. Following YAP involvement there was a structured use of our service by the young person. He began to utilise the facilities provided by our service”.</li> <li>• “Both cases would have re-offended without the involvement of YAP”.</li> </ul>
<b>Negative</b>	<ul style="list-style-type: none"> <li>• “No change” in one case.</li> <li>• One case was “still unwilling to have much involvement with the programme”.</li> <li>• In Case two – “No”</li> </ul>
<b>Unsure</b>	<ul style="list-style-type: none"> <li>• “Student left school” so progress is not known</li> <li>• “Yes, during the YAP but once it finished most of the 4 individuals reverted back to their old ways again. However, I do feel that YAP really gave them love and a sense of belonging for a while”.</li> </ul>

Table 8.2

## 8.5 YAP Staff

### *Relationship*

In twenty-one cases service providers agreed or strongly agreed that they had a good working relationship with YAP staff. In five cases respondents felt they did not have a good working relationship.

**I have a good working relationship with YAP staff N = 28**

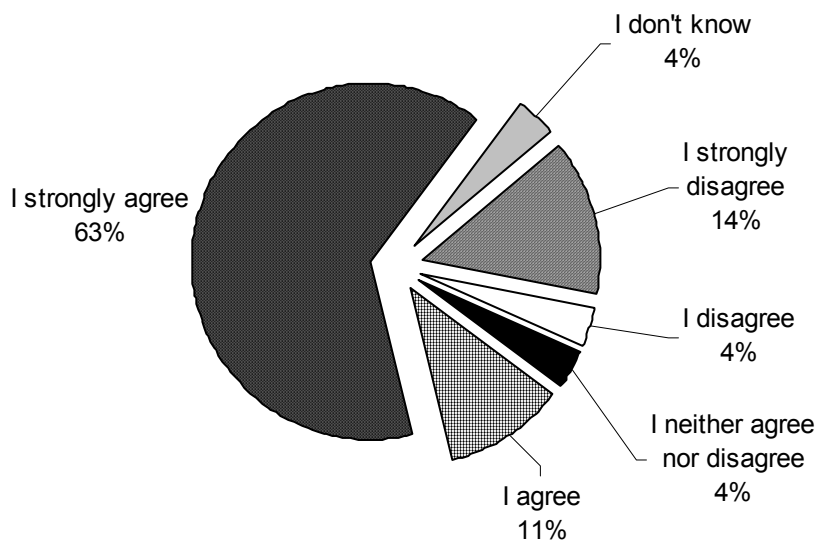


Figure 8.3



*Advocate Role*

Services were asked what they understood the role of the advocate to be. Many felt the advocate provided positive support to the young person. Some recognised the advocate as a spokesperson for them. Others made reference to the friendship and availability to meet their needs aspects. Two viewed the role as a vehicle for linking the young person to other services.

<b><i>What do you understand the role of the advocate to be?</i></b>	
<b>Spokesperson</b>	<ul style="list-style-type: none"> <li>• “To represent the young person’s views to third parties and to clarify issues for the young person”</li> <li>• “Advocating on his or her behalf with voluntary statutory agencies”</li> </ul>
<b>Available to meet needs</b>	<ul style="list-style-type: none"> <li>• “Someone who is always on hand to cater for the students’ needs as they arise”</li> </ul>
<b>Positive Support</b>	<ul style="list-style-type: none"> <li>• “A positive role model for the young person. A positive support, maintaining an optimistic perspective of the young person</li> <li>• “The advocate acts as a support and befriends the young person – gaining their trust and confidence and helps them to avail of services by identifying their individual needs”</li> <li>• “To provide support to the young person within the family and services engaged in”</li> <li>• “Accompany, support and empower the young person”</li> <li>• “A person who can be in both a supportive and monitoring role to the young person. They would endorse pro-social modelling”</li> </ul>
<b>Support Structures</b>	<ul style="list-style-type: none"> <li>• “I believe the role of the youth worker to be a support to the young person to fulfil what requirements have been made and agreed at the wraparound meeting. In our particular cases because the young person was the primary carer of the family the YAP worker also allowed him to pursue interests as a young person should rather than have to deal with adult responsibilities all the time”</li> <li>• “To engage the young person on an individual level, to link the young person with agreed local links, to be available ‘out of hours’, to source appropriate opportunities of interest to young person – to work to an agreed plan – link with existing services where appropriate”</li> </ul>
<b>Friendship</b>	<ul style="list-style-type: none"> <li>• “Specially there” for the young person, a friend to understand, support, encourage at all times”</li> <li>• “...a true friend, a loyal helper, a concerned human being. One who is totally supportive”.</li> </ul>

Table 8.3

*Contact*

In sixteen cases respondents agreed to some extent that they had regular face to face contact with the advocate and in six cases (20%) respondents said they disagreed saying they did not.

**I have regular face to face contact with the YAP advocate  
N = 28**

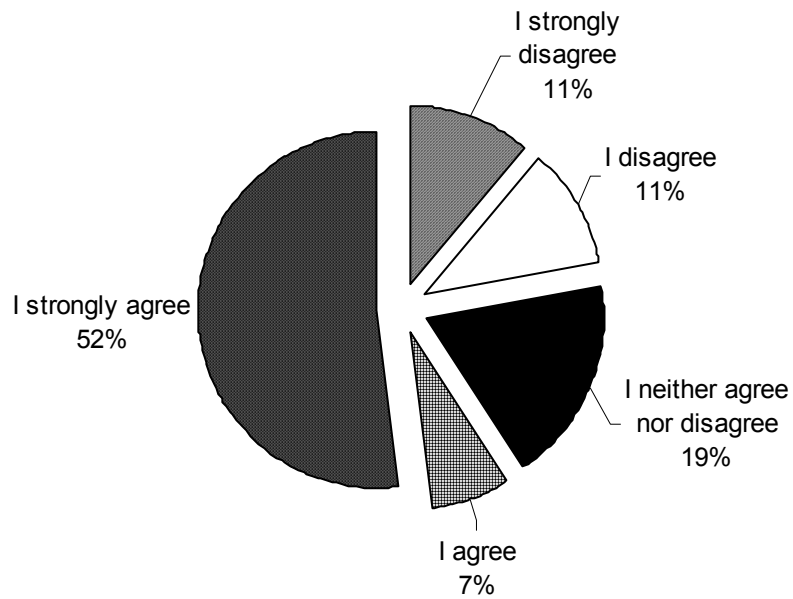


Figure 8.4

In twenty-two cases it was said that YAP had contributed to the young person's engagement with the service. Only in three cases did the respondents think the programme had not contributed to the young person's attendance.

**YAP has not contributed to the young person's  
engagement with my service N = 28**

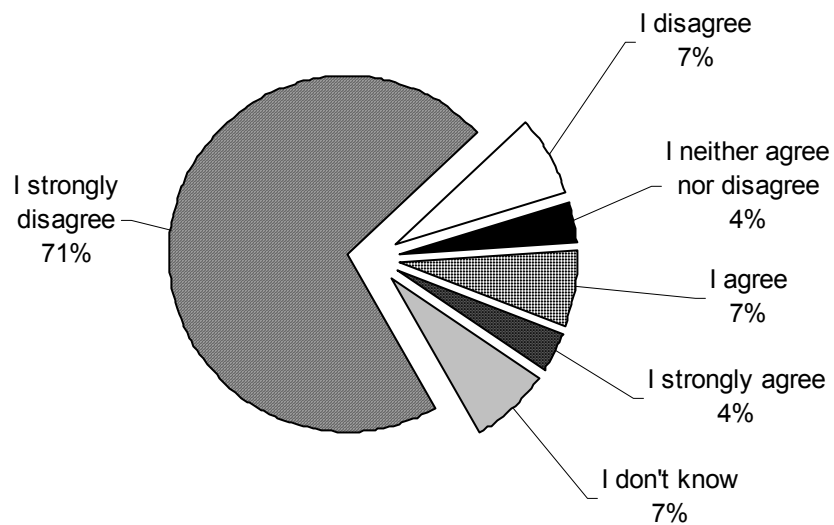


Figure 8.5

The majority of service providers (71%) felt that YAP has been effective in supporting and encouraging young people to attend and engage with their services.

**The advocate didn't directly support the young person's attendance of my service N = 28**

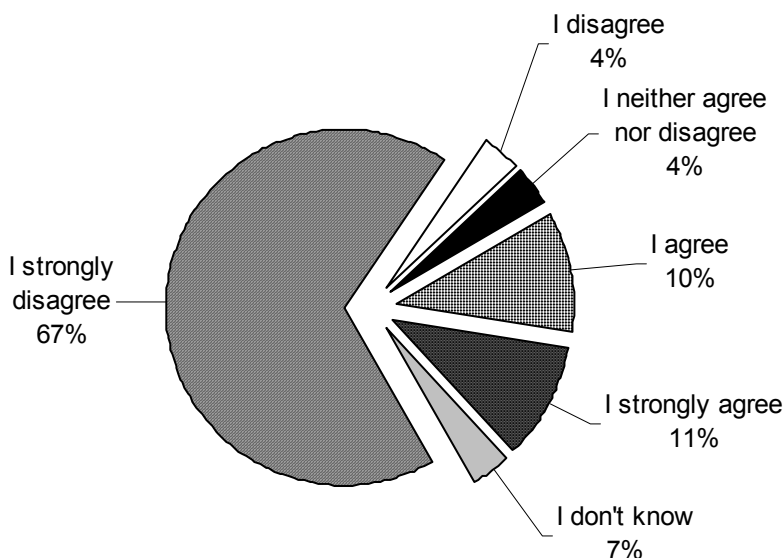


Figure 8.6

### 8.6 Further Comments

Some respondents added comments at the end of the questionnaires. These are provided below in the following table.

Advocate – Client relationship	<ul style="list-style-type: none"> <li>• “The relationship which is key to the YAP engagement with the young person”</li> <li>• “I also think that the advocates are doing a truly remarkable job. They make a real difference to these young people’s lives, for the duration of the programme... when YAP ended they returned to their old ways but with less anger and aggression. The YAP had a positive effect on them”</li> </ul>
Positive experience / Outcome	<ul style="list-style-type: none"> <li>• “Our service has a positive experience of working with YAP. In our opinion YAP targets the most “at risk” young people in the city, YAP staff work in a professional manner, the YAP programme is too short, YAP has established a strong reputation”</li> <li>• “They were innovative with their ways of work and overall a positive outcome was reached for the young person”</li> <li>• “I have found that YAP involvement with a young person has been nothing but positive. There was a marked change in behaviour and attitude following YAP involvement with the young person. It allowed the young person to relax and also feel he was being listened to. The YAP worker was excellent in all areas, that is to say that he established an extremely positive rapport with the young person. It was obvious that there was a mutual respect whilst also attaining all goals that were got following YAP involvement. The six months are almost up and the young person is no longer in trouble with the law, child protection order has been lifted and he has been approved for independent living. I cannot praise YAP highly enough.”</li> <li>• “The two cases I’ve been involved with would almost certainly have re-offended but for the involvement of YAP”</li> </ul>
Supportive	<ul style="list-style-type: none"> <li>• “I have found the YAP programme to be very supportive of young people and their needs and they make every effort to encourage the young person to engage with the service”</li> </ul>
Negative response	<ul style="list-style-type: none"> <li>• “In my opinion the YAP advocates in the main have not been a great success as they do not share information and in the main they shield the young person inappropriately. This has a negative effect in terms of interagency work. Also it is naïve as we would tend to know family background / young person’s involvement in negative activity. It also hinders services like ourselves in putting into place programmes specific in meeting the young persons need whilst with us”</li> </ul>

Table 8.4

## **SECTION 2: Residential Centre Managers**

### **8.7 Methodology**

Interviews were conducted with four residential centre managers as a means of understanding their experience of working with YAP. Three interviews were conducted in the residential centres and the fourth was conducted over the phone. Each manager was asked the same questions and at the end of the interview was asked to make further comments regarding the programme. The following information relates completely to the views of the Residential Managers.

### **8.8 Interview Responses**

#### *Introduction to YAP*

Interviews were conducted with the managers of Arkle House, Aras Geal, Barr Aille and Rice House. Three said they had heard of YAP prior to the young peoples engagement with the service. One manager said that YAP first became known to their service when advocates arrived at the residential centre. Managers reported that the overall number of young people who linked with their service and YAP, was fifteen in total.

#### *Expectations*

Managers were asked about their initial expectations of the programme. Managers said they had expected YAP to:

- Provide the young person with independence and neutrality
- Get the young person in touch with other links within the family and community
- Provide an additional supportive service to the young person
- Provide a service that would bring the young person outside of the residential centre
- Work closely with the individual care plans
- Have a lot more freedom than residential workers
- Provide a new service that had a lot of potential

When asked if the programme had met with their expectations one manager said that the programme had met expectations “almost 100%”. Another manager felt in two thirds of cases the programme “did as much as it could do” but in the remaining third had created conflict for residential staff. Another manager said that expectations had changed as time had gone on; initially they had been hopeful, then disappointing, but after a review between the services, expectations were high again and they had been met to the extent that “they are an extra support and an asset to the young person”. The remaining Manager said expectations had not been met.

### **8.9 YAP Staff**

#### *Advocate Role*

According to the managers the role of the advocate was:

- To listen to the young person and represent their views in meetings and reviews
- To introduce the young people to services and agencies and the larger community
- To help facilitate the relationship between residential care centres and families and to provide other wraparound services
- To look for the best outcomes for the young person
- To look after the young people, to meet them on a consistent basis and to ensure that they establish a good relationship.

#### *Qualifications and Training*

Two of the residential managers felt that it was inappropriate for people without related qualifications to be working with this group of young people. Two felt it was okay as long as they were “well trained, qualified and above all supervised” and that their practice was well monitored. Both these managers said that many people have skills and competencies that allow them to do the job as long as certain practice codes are adhered to.

However, one stressed that a certain element of professionalism was necessary with regard to “record keeping, report writing, handovers and systems”. Three managers mentioned that YAP workers lack of professionalism had caused serious problems for their staff. All of the managers stressed the importance of adequate training, qualifications and supervision when working with this group of young people.

### *Problems*

Problems between YAP staff and residential staff arose when their methods of work practice conflicted. Three managers reported this to have caused serious upheaval within the homes. One Manager felt that YAP had come onto the scene, armed with a philosophy but unsure how to put it into practice. Residential staff felt they were being demeaned by YAP workers who had no real qualifications or experience compared to their own level of training. Another manager felt that YAP workers needed to be trained in the area of residential care because they had displayed little understanding of its complex workings. Another manager felt their lack of experience was evident by the way they behaved with the young people in the care homes. It was said that residential workers felt that using swear words and offering cigarettes to the young people who are underage was inappropriate behaviour for people looking out for the young person’s best interests. It was reported by one manager that the behaviour of the young people had at times worsened when the YAP worker had been present.

### *Working Relationship*

There was a varied response regarding the relationship and level of contact managers had with YAP staff. One reported “good two way communication with very professional people” and that access to the worker had been very good and there had been no problems. Another said that the relationship had not been “good or bad”, but depended on the individual case and any difficulties that arose were talked through with advocates. Two managers said that difficulties arose when advocates had not been forthcoming with information in relation to the cases and the relationship had changed from welcoming to disapproving and again to welcoming, as certain protocols had been put in place and staff started to communicate with one another. Prior to that, the relationship had been quite poor.

*“Staff were so angry and so undermined by people not really representing the best interests of the children”*

Another manager had reported that no improvements had been made since the protocols had been put in place and said they were not very trusting of YAP staff due to negative experiences.

Two managers said that the level of contact depended greatly on the individual advocate and it was reported that the best contact had been with advocates who had had a working knowledge of residential care.

## **8.10 Young People**

### *Participation*

The managers said the young people’s responses to the programme had been varied. One manager reported that they were “delighted, very welcoming and their YAP worker was very important to them”. Another manager said the young person’s initial response had been reluctant, however the skills of both the YAP worker and the key worker together allowed the young person to progress and take to the programme very quickly. Another reported that the young people did “quite well of it” and the young people were “open to it”. The fourth manager said that there had been no positive reports about the programme from the young people and that they did not seem to have a lot of respect for it.

Residential managers were asked about the relationship between the young people and the advocates. One manager said the relationship had been “excellent” because it had been ensured that the key worker and the advocate had met each other before the latter began to work with the young person. Another manager said that in one case the relationship had been “quite positive” initially but that it may have lost some of its power as the programme drew on into an extension.

Two of the residential Managers felt that the young people had initially taken advantage of the programme because it had given them what they wanted and they didn’t have to pay the consequences for their actions. One

went on to say that the programme had been used as a taxi service and that the young people often had negative things to say about it. It was also said by one manager that sometimes the young people wanted the YAP worker to leave them alone.

#### *Change in Behaviour*

Manager's were asked if they had seen a change in the young persons' behaviour or participation within the care home subsequent to their involvement with YAP. Again, the response was mixed. In relation to one case, the manager said that it was noticed that the relationship between residential staff and the young person had become healthier because the level of dependence was lessened. Community links improved and there were other obvious signs of improvement.

Another manager felt that in the beginning, due to a lack of clarity of their role, YAP workers were partly responsible for incidences of negative behaviour on the part of the young person.

*“When they came originally they were trying to be a big rescue fantasy”*

As the programme has evolved and YAP workers have more definite roles, the same respondent reports, there has been greater evidence of change with regard to the young people, particularly in those cases where YAP successfully linked back in with the family. In more recent times, this manager noticed a positive difference in the behaviour of those young people linked with 'strong' advocates, who worked closely with the residential centre to support the young person.

Another manager said there had been no change in behaviour but there had been a change in attitude, and referred to a young person who he felt had begun to channel his aggression differently and outside of the care home because he had been given the outlet by YAP to do so. Again it was said that one of the programme's strengths was its' ability to be flexible in creating links with families. The fourth manager felt for the most part, there had been no improvement in terms of the young people's behaviour and participation. There had been an improvement in the case of one young person but whether this can be linked directly to YAP was questionable.

#### *Benefit, Consequences & Improvements*

Managers were asked how beneficial they felt the programme had been in meeting the needs of young people in residential care. Two of the managers remarked that it had a lot of potential but there were many areas that needed to be worked on. Another manager felt that the programme was of particular benefit in providing a service to meet the next level of their needs beyond the scope of residential homes; “education, links with community, involvement in activities and recreation, sport and fun”. It was said that the most positive outcomes occurred when YAP were successful in developing links with their families.

The remaining Manager felt that the programme was of little benefit to participants. There were times when the flexibility of the staff had helped them facilitate a young person's attendance at school or other services, however beyond that, it was said that there had been few positive outcomes. One manager expressed a fear that the programme added another service to the lives of young people already contending with a plethora of services.

Managers suggested the following to improve the programme:

- Activities need to be monitored more closely and suitable activities agreed upon by all involved. Better boundaries regarding activities that are suitable and unsuitable
- Staff need to learn about how residential care works and learn to work within those structures
- Ensure the YAP worker and Key worker are matched suitably and are willing to work together on the part of the young person
- Working relationships could become even tighter - Unified approach is very important
- Increased communication, training, supervision for staff.

## 8.11 Final Comments

Provided below are final comments from the residential centre managers regarding the programme:

“I think it’s a great asset to me as someone running a residential centre, it has huge potential, it’s a very normal, human kind of a service to provide to someone in residential care and I would like to think that it would continue...very much support its’ philosophy, it has great potential like any new service it needs to be reshaped and monitored a bit more”

“They have really come on and it would be hard to do without them now ... the process of how they were introduced set them back loads.. am absolutely happy with working relationship [present] .. they’re an added support to what the child needs”

“There is a lot of potential there especially for quite difficult kids ... it gives them an outlet to their programme as opposed to working within the centre ... it’s good fun for them to go out and talk... communication between the staff is important”

“YAP working by themselves, going out on their own does not help and doesn’t work. There’s a need for increased communication, training, supervision for staff. On a positive note, they are doing something, but it is not working. Speaking from the point of view of the staff [residential] they have not made the job easier”.

## **SUMMARY: Chapter 8**

### *Service Providers*

In the main, existing services had a good experience of YAP and were supportive of the service. In more than half of the cases they worked with, the level of participation on the part of young person was noticed by the service providers to have improved subsequent to their involvement with YAP and in almost three-quarters of cases the service provider said that YAP had contributed to the young persons engagement with their service. Positive changes recognised by service providers included increased communication, increased self-esteem and non re-offending behaviour but in four cases no such changes were evident. In some cases, the sustainability of changes was questionable, as one respondent reported that some young people reverted to former behaviours once the programme had ended. In the majority of cases the working relationship with YAP staff was good and services were aware of the advocates role as a spokesperson, a friend, a positive support, who is available to meet the needs of the young person and engage them with existing services. The large majority of service users (85%) agreed that YAP had been effective in supporting and encouraging young people to attend their service.

### *Residential Centre Managers*

Residential Centre managers had mixed responses regarding the programmes implementation. Three residential managers criticised the lack of professional standards on the part of the YAP workers. The remaining manager said YAP staff had been very professional because he had ensured that the YAP worker and key worker had met and discussed their intended practice before the young person had met with the YAP worker. In this case, a high level of communication was maintained throughout the programme duration and the result was said to be positive for the young person and the residential centre. In the experience of the remaining managers, situations have arisen where methods of working have clashed, levels of communication have been poor and therefore all involved had experienced serious problems. YAP came onto the scene with insufficient knowledge of existing services and without adequate knowledge to deal with young people in the care system. Problems arose and relationships soured when residential workers felt undermined by advocates. All of the managers stressed the importance of adequate training and supervision for anyone working with this group of young people. One manager said working relationships have improved as time has gone on but another reported no improvements. The quality of service varied and depended on individual YAP workers. Managers saw signs of improvement when the programme linked people with their families, where advocates were 'strong'. In some cases, dependence on residential staff was lessened and community links improved. Three managers felt that the programme was beneficial to the target group but needed to be improved in a number of areas: Activities need to be monitored more closely; staff need to learn about residential care; key workers and advocates need to be matched suitably; working relationships need to be tightened and increased supervision and training for staff is essential. The remaining manager felt the programme was of little benefit to participants.



### 9.1 Introduction

The following chapter provides details of the programme's operation and practice from the participants' perspective. The experience of eight young people and five parents is provided below. Most important to this section is the perception of participants regarding the implementation of the programme, their level of participation, and recognition of change and self-development in themselves and their families. The interviews were conducted between October and December of 2003. It had been the intention to interview a greater number of participants, however it proved impossible to interview many participants in spite of strenuous efforts by the researcher to do so. For these young people and their families, personal circumstances made organising interviews with them very difficult and various occurrences within families disrupted the fieldwork process. Despite having previously agreed to take part, a number of young people failed to show up or postponed appointments. Advocates were integral to organising and facilitating many of the interviews that took place and their input was greatly appreciated. In some cases, arrangements were not kept by advocates as promised and while attempts were made to reorganise these interviews, time constraints prevented further interviews from taking place. While the following provides details of the experience of programme participants, the views cannot be viewed as representative of the entire group. Section 1 provides details of interviews with the young people and section 2 provides details of interviews with their parents and carers.

### SECTION 1: Interviews with Young People

#### 9.2 Methodology

Interviews were implemented with five young people in the Galway region and three young people in the Roscommon region. At the time the interviews took place, six of the young people had completed the programme and two had almost completed the programme. Interviewees were aged between twelve and seventeen. Seven respondents were male and one was female. Interviews mostly took place in the participant's homes. Two interviews were conducted in the YAP office in Galway. During each interview, the young person was asked twenty-four questions in relation to their experiences with YAP. The questions covered the following areas: their understanding of the programme, their relationship with the advocate, their view of the wraparound meeting and the individualised service plan, their level of family participation and any positive and negative aspects they have experienced while on the programme. All of the interviews were taped and transcribed for analysis.

#### 9.3 Reactions To YAP

All of the interviewees said they had been referred to the programme due to their involvement in criminal behaviour which ranged from stealing from shops, underage drinking, drugs-taking, fighting, breaking curfews and car theft. Introduction to the programme was different in each case. Some respondents were introduced to the programme by probation officers or local community Gardai who had prior knowledge of their behaviour. Three respondents were introduced to the programme when the advocate arrived at their place of residence.

The respondent's initial understanding of the programme varied. Some thought they were on the programme "to keep [me] out of trouble" and to prevent them from being bored, by involving them in sports and other activities. Others thought they were on the programme to help them get a job and "help [you] out in all sorts of ways". Two young people said they participated with the programme as part of their court orders.

Interviewees reacted differently when told they had to participate with the programme. Two participants said they wanted to be on the programme. The first was very excited about the prospect of coming on board.

*"I wanted my name to be top of the list"*

Another interviewee was intrigued by the programme but it was only when he realised that "the programme staff were very nice and [then] I started to like them" that he became a willing participant. The remaining five did not want to participate with the programme but said they had no choice but to comply. Some felt their families had forced them onto it. Two said they had to comply for their own sakes and due to court proceedings.

*“No, had to do it, it was in my court”*

#### **9.4 Relationship with the Advocate**

##### *Quality*

Seven interviewees said the relationship with the advocate had been ‘good’ throughout the duration of the programme and they had come to enjoy spending time with them. Respondents described the advocate-client relationship differently. In two cases, the young people viewed the relationship as a friendship and considered the advocate to be a close friend and someone they could trust.

*“He was like one of my best friends”*

Two young people considered the advocate to be someone they could have good ‘chats’ with and someone who listened to them. One young person considered the advocate to be someone who taught them skills relating to employment and education. One young person said they did not enjoy spending time with the advocate and another said the relationship was good to start but deteriorated through the course of the programme and after a while it felt like the programme was “dragging out” when the advocate was telling them what to do.

##### *Lessons Taught and Learned*

The majority of young people said the advocate had taught them to stay out of trouble and to look after themselves.

*“She has, not to get into trouble again”*

*“Yeah, he’s taught me that you have to fend for yourself in this world and he’s taught me that even if you are scraping by then you have to scrape by, don’t get greedy, [look] what happens to you...”*

Some young people said that advocates had introduced them to other interests and others said that advocates had taught them how to behave in job interviews, how to apply for jobs and encouraged them to follow opportunities

*“Taught me lots of things... he taught me how to stay out of trouble, he taught me how to become good at the kayak, he taught me how to play tennis, he taught me how to swim really good”*

*“Yeah, helping at interviews and talking up ... and getting prepared for them”*

One respondent felt that the advocate had taught him ‘self-belief’ and continued to support and encourage him where others had put him down.

*“He gave you self-belief like, not many people before that would have, they’d always put me down”*

One respondent remarked that the advocate had only taught him to repeat himself as he said the advocate had done throughout the programme.

##### *Around the Clock Intervention*

Interviewees said that advocates were available to them whenever they were needed.

*“Always, every time I ring him he’d answer the phone straight away, I could ring him at 2.00 am and he’d answer the phone”*

Most of the young people said they had seen the advocate between two and three times a week, others said they had spent fifteen hours per week together. One respondent reported seeing the advocate as often as six times per week and another said the hours spent with the advocate were increased when necessary.

*“Whenever I needed him he was there”*

One respondent remarked that when he had missed a day of school the advocate would phone him or call to the house to see why he had not attended. The young person who said he had not enjoyed spending time with the advocate reported he saw the advocate “too many times”.

#### *Voice*

Six of the respondents agreed that the advocate had helped them have their voice heard in matters concerning them. Some said that YAP staff had spoken on their behalf in court. Others said YAP negotiations had prevented them being sent to prison or reduced their sentences in detention centres. Two young people said they would have been sent to a detention centre had it not been for the programme.

*“He’s stood up for me an awful lot in courts and prison”*

One young person said the advocate had not helped them to have their voice heard.

#### *Dependency*

One respondent said that he had missed the advocate ‘an awful lot’ for the first few weeks after the programme had ended. This passed after a while and the young person reported that a reduced level of contact remained between them and he was happy about this. Three replied that they had missed the advocate to some extent and had maintained contact with them once the programme had ended. Two young people said they had not missed the advocate’s company when the programme had ended.

Two respondents, who were still on the programme at the time of interview, said they would definitely miss the company of the advocate. One respondent said that he was trying to get the programme extended so that they could spend more time with his advocate.

#### *Privacy*

Only one young person strongly felt that the advocate had intruded upon their private life. The remainder felt they had not.

### **9.5 Programme Structure**

#### *The Wraparound Meeting*

Interviewees were asked to think about the wraparound meeting and to consider what the meeting was about. The first interviewee immediately recalled the positive strengths based approach.

*“[It was] about what was good for me to do and what I liked to do .. they said I was great...”*

Another said they thought the purpose of the meeting was to get them involved in other activities because he had been getting into trouble. Another said the meeting was set up to discuss what they had ‘done’ and another simply said the meeting was “just about me”.

One young person said he thought the meeting was brilliant. Two young people said they found the meeting embarrassing because people were talking about the things they were good at. Another said he got bigheaded because of all the good things that were being said about him. Three replied saying it was ‘alright’ or ‘grand’. One respondent thought that the meeting was “absolute crap”.

Three interviewees said they spoke out at some parts of the wraparound meeting.

*“ I talked a bit when they asked me what I would like to do ”*

*“It was a bit difficult but I got it out in the end”*

Three said they did not speak out at the meeting.

*“No – I don’t like talking about myself”*

*“No I kept quiet”*

#### *The Individualised Service Plan*

Seven interviewees said that a plan had been formulated at the wraparound meeting. The terms of the plan varied from case to case; these included staying out of trouble, finding work, attending education, keeping up appointments, participating in activities, keeping to curfews, court orders and bail conditions, securing accommodation and learning how to spend and save money.

*“My goal was to get a place at the time and I had to stay out of trouble forever and learn how to spend my money and make my money last and how to live better and I’ve actually started doing that now”*

All agreed they had stuck to the terms of the plan at least to some extent. Some found the plan easy to stick to.

*“I think I did... it was easy... the chart was stuck up on the side of the door and I was looking at it every day and I saw what I’m meant to do”*

Others said they stuck to the plan because they had to and another said it was easy to stick to initially but got harder over time.

#### **9.6 Change & Improvement**

In all cases, the young people said their behaviour had changed since they had participated on the programme. Many said they had come to be more sensible and more responsible, had quietened down and were no longer involved in troublesome behaviour. One interviewee said he still drank alcohol but did not cause trouble as he had done before. Another said that he still smoked hash but no longer took harder drugs such as ecstasy and cocaine. Two respondents said they had been staying at home a lot more than they would have done before they were on the programme. When they were asked if they thought that participating with the programme had brought about these changes, two interviewees said it had been responsible for the changes, and others felt it was the effect of the programme coupled with other events in their lives such as pregnancy and fear of imprisonment. One respondent put his change in behaviour down to “common sense” and did not give any credit to the programme. One young person felt the programme had not made him change as such, but had taught him a few valuable lessons that he has stuck by.

#### *Family Participation*

In all cases respondents said their families had attended the meeting and had spoken about them. Almost all of the respondents said that the programme had helped their family. Examples included their own improved behaviour, improved inter-family relationships and improvement in the structure of family residences.

*“I get to see them (family) more often, my relationship is better with my mam”*

#### *Positive Aspects*

According to the young people, the best things about the programme were that staff were nice to them, taught them to be ‘good’, they felt supported and they were always available to them if needed. The young people said that YAP staff had a lot to offer them and in one case the young person said the best thing about the programme was his advocate, because he understood what was going on in his life.

*“They are there to support you, they really like to be with kids who are in trouble, who are in care, who are with their family but the kids might be in trouble or something or may have other difficulties...at least YAP is there to support you ..I recommend it to any other young kid...they take you out, they don’t*

*let you do whatever you want to do but if you need to talk to someone they are there....that's very helpful...*

Six of the eight interviewees felt that the programme had met expectations and more. One respondent did not answer this question and another said he had no expectations regarding the programme.

#### *Negative aspects*

Six interviewees could think of nothing bad to say about the programme. One young person did not like when he had to stay in and wait for the advocate.

*“[That] you have to be here when they come”*

The second young person said that not getting along with the advocate could be a negative aspect to the programme but said this was not a significant issue in her case.

*“Maybe if you don't get on with your YAP worker, that's the kind of worst thing... maybe when you meet them first you say no I don't really want to meet you..”*

#### *Improvements*

One young person felt that the programme would be improved if there were somewhere for the young people to meet up, play pool, partake in art classes or woodwork classes and talk together.

### **9.7 Before and after YAP**

The young people were asked to think about their situation before they came onto the programme and to compare it to their situation at the time of the interview. In all but one case, the young person felt they had experienced a change for the better. Positive changes included increased school attendance, lessened drug use, more stable and responsible behaviour, being less troublesome and feeling happier with themselves.

*“Way better, they got me back to school, I wasn't going to school at all when they came first”*

*“I was doing drugs and stuff and now I am not...”*

All of the young people agreed that they would recommend the programme to others in similar positions to themselves. However, one said he would recommend it only to someone who was bored. Another young person felt that the programme was effective dependent on the personality of the young people who were on board.

*“It depends really cos there are fellas ... they wouldn't learn anything from it, they wouldn't even listen to you, they just come and get what they can out of you and then they leave”*

He felt the programme was wasted on people who would not listen to the advocate's advice, as they will end up in prison at any rate.

## SECTION 2: Interviews with Parents & Carers

### 9.8 Methodology

Interviews were conducted with parents of three participants in the Galway region and parents / carers of two young people in the Roscommon region. Three of the interviewees were mothers, one was a father and one was a grandmother of programme participants. Four of the interviews took place in the participant's homes. One interview was conducted in the YAP office in Galway. Interviewees were asked twenty-one questions in relation to their experience with YAP. The questions covered the following areas: family participation with the programme, relationship with the advocate, the wraparound meeting, the individualised service plan and positive and negative aspects to the programme. All of the interviews were taped and later transcribed for analysis.

### 9.9 Reasons for Referral

Parents<sup>28</sup> said their families had been linked to YAP through various services including social workers, community guards and schools, according to the respondents. They reported that the young people had been referred to the programme because they had been getting into trouble, sneaking out at night and getting into the wrong company.

*“John<sup>29</sup> was doing a lot of things he shouldn't be doing, going places and coming in all hours at night...”*

*“He wanted to get away from the lads he was hanging around with that was taking stuff”*

Once they had been told about it, all said they had been keen for the young people to participate with the programme. Some had said they were 'happy' or had 'no problem' with their son/daughter/grandson joining the programme. Others said that they would have been keen to participate with any programme that might have helped with their behaviour. Another respondent expressed how worried she had been about her son and was delighted at the prospect of the YAP intervention. Three parents reported that the young people were keen to participate with the programme. Two said that the young person had been hesitant about joining the programme but had relaxed once they had become involved.

### 9.10 Advocate Relationship

In all cases, parents reported they had witnessed a positive relationship between the advocate and the young person. Two parents had said that in general their sons were difficult to talk to, but reported that after spending some time with the advocate they had got on well with them. All the parents and carers said they had established good relationships with the advocate and had welcomed their presence in the family home.

*“Very good... like someone I knew for years... friendly person, we'd have cups of tea”*

In general, parents felt that the advocate had had a positive effect on the young person and some felt that they had helped them to have their voice heard in matters concerning them. All the parents reported that the advocate had always been available to them when needed.

*“Yeah, just rang [advocate's name] and he'd be there in ten minutes”*

### 9.11 Programme Structure

#### *The Wraparound Meeting*

Four of the respondents said they had attended the wraparound meeting and one respondent was not sure. When asked what they thought of the meeting respondents who had attended said it had been 'good', 'very good' and 'interesting'. One respondent said that the young person had come out of the meeting with a big head because it had been so positive.

---

<sup>28</sup> Parents refers to parents/grandparents/carers

<sup>29</sup> Pseudonym

### *The Individualised Service Plan*

The plans differed for each of the young people. Parents said that terms of the plans varied from seeking employment, playing soccer, building a gym, going back to education and getting on better with family.

*“They got him into a... shop...he enjoyed working with ...”*

One parent said that the plan was good but felt the terms of the plan hadn't been adhered to by the young person. Another parent said that his son had stuck to the plan as promised and he had noticed a difference in his behaviour at home. One parent felt that the plan had made her son interested in new activities.

## **9.12 Changes and Improvement**

### *Young Person*

Some parents gave examples of the change in the behaviour they had seen in the young people after participating with YAP. One such interviewee had remarked that his son had begun sticking to curfews and was no longer hanging around with former peers. Another said that her son had stopped sneaking out at night

*“Sneaking out at night, now that's all stopped and that was the biggest thing”*

*“Every time he comes in now at 10 o'clock.... you couldn't have taught him that before, you mightn't have seen him for two nights, or he might come in at 3 in the morning...now at the right time, and he's not hanging around with lads that he shouldn't be with”*

### *Family*

When asked if they thought their family had changed since participating with the programme, one respondent replied 'some', two replied 'yes' and the remainder replied 'yes, definitely'. Mostly, the changes reported related to the young person's improved behaviour.

*“They helped John<sup>30</sup>, so they helped us, and that was the trouble in our house”*

Two interviewees reported that their level of communication with young person had improved and now they had begun to admit to wrongdoings.

*“He'd come to me more so now... he'd come out and say something to me and if he has done something wrong he will come and say it to me...which is something”*

One interviewee had noted a change in behaviour within the family home.

*“John<sup>31</sup> is getting on well with the smaller kids where before he used to bully them, now he has great time for them”*

## **9.13 YAP & Other Services**

All interviewees said they had contact with other services prior to their contact with YAP. The services named were social services, NYPs and the Gardai. The majority felt that YAP offered a different service to others.

*“I think they offer more than anything else – I don't think anyone else in Galway offers that service”*

Respondents felt the intervention was different because YAP workers had attended court on behalf of the young people, had been more 'hands on' and had worked with the young person for hours at a time when other services did not have the time. Two respondents felt that social services and YAP were both needed to help their families. Two parents commented that their children were in need of a service like YAP a long time ago.

---

<sup>30</sup> Pseudonym

<sup>31</sup> Pseudonym

*“A long time ago he needed it cos there was no help for him”*

*“Both good, YAP do a lot more stuff with (son’s name), (social worker’s name)...he doesn’t have that much time because he has more calls and more houses...more people...just working with (son’s name)...(son’s name) needed someone close like (advocate’s name) and he got on well with (advocate’s name) as well”*

## **9.14 Positive & Negative Aspects**

### *Positive Aspects*

The most positive aspects of the programme according to parents and carers include:

1. The programme sought employment for young people
2. Behaviour at home had improved
3. The advocates paid an interest in the young person and try to get to know them
4. They are always available for families
5. They are there to help
6. They work one to one with the young person

### *Negative Aspects*

Two respondents mentioned two negative aspects to the programme.

1. Structural work in the family home had not been completed by the advocate as promised.
2. YAP workers who are on call at the weekend may not be in the locality in the event of a crisis or even know who the young person in crisis is.

All of the parents said they were in favour of YAP and said they would recommend it to other families experiencing similar difficulties to themselves. One mother expressed the need for help in particular.

*“It’s too hard to cope on your own ... no-one can understand it unless you go through it”*



## **SUMMARY: Chapter 9**

### *Young People*

The young people said YAP had become involved with them for a number of reasons: To help them to stay out of trouble; to involve them in extra-curricular activities and prevent them from feeling bored; to help them to get a job; to help them stick to the conditions of the court. The majority were not eager to participate with the programme but had no choice due to court orders and family pressure. Seven interviewees thought the relationship with the advocate had been good and the same number felt the advocate had taught them lessons including how to stay out of trouble and look after themselves, how to partake in other activities and how to apply for jobs and behave in interviews and how to believe in themselves. YAP provided an around the clock service and all the young people felt that they had been available when needed. One young person felt strongly that the advocate had intruded upon his private life; however six of the young people said YAP had spoken out for them, particularly in the case of legal matters. While most of the young people said they had / would miss/ed the advocate to some extent, over-dependency did not present as a significant issue with the group as they were aware that a certain level of contact would be maintained between them. Responses to their feelings about the wraparound meeting varied from “brilliant” to “absolute crap” and many said they found it difficult to talk at the meeting. They said the terms of the ISPs involved staying out of trouble; finding work; attending education; keeping up appointments; participating in activities; keeping to curfews and bail conditions; securing accommodation and learning how to spend and save money. Most said they had stuck to terms of the plan at least to some extent.

All of the young people said their behaviour had changed since they had begun the programme. Change in behaviour included becoming more sensible, responsible and quiet and no longer being involved in troublesome behaviour, increased school attendance, lessened drug use and feeling happier within themselves. Two young people reported improved inter-family relationships. Two interviewees felt the programme had brought about these changes and five said it had been the programme coupled with other factors. The programme’s positive aspects were that the staff were nice, they taught them to be good, they felt supported and they were always available when needed. Six reported that there were no negative aspects associated with the programme however one young person said he did not like having to hang around at home for the advocate to arrive and another said that it could have negative consequences if young people do not get on with their advocate. All of the young people would recommend the programme to others in similar positions to themselves.

### *Parents*

All of the parents were keen for their children to participate with YAP and in all five cases they had witnessed a positive relationship between the advocate and young person and had established a good relationship with the advocates themselves. The parents were supportive of the wraparound meetings. Terms of the ISPs had included seeking employment, becoming involved with sports, attending education and improving family relationships. Two parents noticed a marked change in the young persons behaviour during and after the programme; one parent said his son had stuck to his curfews and had improved behaviour within the family home, another said her son no longer left the house during the night. Two parents noticed an improved level of communication between themselves and the young people.

The entire parental group said they had prior contact with other services and felt that the service offered by YAP was different. The positive aspects of the service were it aims to find employment for young people, it improves the young people’s behaviour, it pays an interest in the young people, it is always available, it is there to help families and it works one to one with the young person. Negative aspects included the fact that advocates did not finish structural work within a house as promised and that people ‘on call’ at the weekends did not know the young people who were in crisis. All of the parents were in favour of the programme and would recommend it to others in need of support.

## Chapter 10 – Adults with Learning Disabilities

---

### 10.1 Introduction

When YAP was introduced to its catchment area, the Western Health Board allocated approximately ten per cent of the programme's spaces to adults with learning disabilities in need of extra intervention due to challenging behaviour. Representatives from the Brothers of Charity and Western Care were responsible for identifying the clients who would benefit most from YAP. To date, YAP has worked with five male adults with learning difficulties; two from Galway, two from Mayo and one from Roscommon. The group have been provided with an identical service incorporating the elements of the wraparound model. The following chapter explores the effect the service has had on this group.

### 10.2 Methodology

In December 2003, interviews were conducted with two of the adult service users who had participated with the programme. In the first case the client, client's mother, advocate and referral agent interviewed. The interviews were tape-recorded and transcribed for analysis. In the second case, the respondent chose not to be tape-recorded, so the account is based on notes taken by the researcher after the interview. A deputy manager sat in on the interview to provide support to the respondent. In spite of efforts, it proved very difficult to arrange meetings with the clients' family, advocate and referral agent at that time.

### 10.3 Findings

#### *Service Users Views*

#### Case 1

The client said the programme had been 'good' because he had talked about his problems and had been helped through these problems by the advocate. He said he got on very well with the advocate, liked talking to her and said his relationship with the other YAP staff he had met had also been positive. He had returned to his former work / education programme since participating with YAP where he had been visited by the advocate a number of times. He joked she had come to check up on him. The wraparound meeting had been about 'what he wanted' to do and while a plan had been made at the meeting, the client could not remember what it had been about. The client said he did not speak out at the meeting but that YAP staff spoke out for him and had said everything on his behalf. The best aspects of the programme were choosing activities that he enjoyed such as playing football and going cycling. He also enjoyed being brought to places he had wanted to go and said the staff had always been available to him. On occasion, when he had to listen to people talk about him, he had found the programme boring, however in general, he was glad that he had made friends with the advocate and said he will miss her a little now the programme had ended. The client said since participating with the programme he had learned to stay away from trouble.

#### Case 2

The second service user had been referred to the programme by the Brothers of Charity because he had come from a difficult family home, was embarking upon independent living and it had been proposed that YAP would offer him extra support through the transitional period. The client said he got on very well with the advocate for the duration of the six-months and enjoyed spending time with him. They spent a lot of time talking and the advocate had helped the client find somewhere to live. After the six-month period, the advocate left the programme and this caused great upset to the client. The deputy manager said the client had been 'devastated' when this happened and YAP staff decided not to withdraw the intervention as he had come to be very dependent on the programme and little else had been available to meet his needs. Without any family support, the client had no other structures to rely on and he was very vulnerable due to his disability. YAP is currently providing the client with supervision, companionship and company on an ongoing basis that is less intensive than fifteen hours a week. The deputy manager stressed that this had come about because there was no such service available within the learning disability remit but expressed that the wraparound / advocate intervention model had been extremely successful with the client.

### *Advocates view*

The client displayed characteristics such as low concentration, lack of social skills and lack of confidence and the purpose of the intervention had been to help him get back into education, increase his self confidence, improve his social skills and encourage him to become more involved within his community. The family had been happy to participate with the programme and there had been a high level of participation on their part. While the initial wraparound meeting had intimidated the client because there had been a number of strangers talking about him, the outcome of the second meeting was better as by that time he had relaxed with YAP staff and his mother had been given the forum to speak out about matters concerning the family. The ISP was designed to get the client back into education, to improve his social skills and to integrate him into the local community. The advocate and client participated in various day to day activities such as going into shops and learning how to ask for goods, going to restaurants, sight-seeing, going to cinema and asking for tickets, learning how to approach strangers in different situations. The main intention had been to teach the client how to mix with people and not to hide away from them as he had done before. The advocate reported that the client had participated well with the programme and had looked forward to spending time with her as the programme had been about 'having fun'. Positive changes recognised by the advocate included returning to education and displaying new signs of confidence such as an increased level of eye contact and an improved appetite. While the advocate would like to have seen increased levels of community integration she felt the family had come to realise the importance of community through the course of the intervention and further action on their part may prevent further isolation for the client. The advocate felt that the relationship has had a positive effect on the client and the programme, particularly the social aspects, have been very valuable to the client. The advocate does not see any weaknesses linked to the programme because it is so individual and meets the needs of individuals. The advocate had no former experience of working with people with learning disabilities and said she would have benefited from knowledge about disabilities prior to beginning work with the case however when issues had arisen, YAP management had been able to provide her with adequate support.

### *Parents View*

A mother of a client with a learning disability said she had been keen for her son to participate with the programme although she did not know what to expect when she first heard of it. Her son had been referred to YAP through a Brothers of Charity social worker with whom the family had contact. She said her son had taken to the advocate very well after meeting her and their relationship had been very positive throughout the duration of the intervention. She too had developed a positive relationship with the YAP worker also because she had been a nice person and easy to talk to. While the first wraparound meeting had not been extremely successful, the second had been better because YAP staff had come to know the family and they all talked about what could be done to help her son. When asked if her son's behaviour had changed since he had participated with the programme, she said it was hard to tell, but the friendship with the advocate had 'probably' helped her son and family. The programme had been good in her view, because it had given her son something to look forward to on Fridays. She did not know how the service compared to the other services she had come into contact with but was sure she had experienced no negative aspects related to the programme.

### *Referral Agents View*

The referral agent worked as a social worker for the Brothers of Charity and heard about YAP through the implementation group. The client he had referred had been a priority in his opinion. He had been suspended from education and was in need of as many resources as possible. His level of learning difficulty was said to be mild to moderate and the referrer said he struggled with what was appropriate behaviour in certain settings. The referrer expected YAP to link the client with other services and social opportunities and share information about the case. The referrer did not attend the wraparound meeting because he had not been given enough notice. He did not know if lasting support structures had been established but was aware that the client was back in education. He did not know about the quality of the client's relationship with the advocate or if the client had become over-dependent on the programme, but he felt it might be a concern with this client group. He said YAP had stepped in and replaced the service they had been providing. He said he felt communication needed to be improved between services, particularly in terms of the day-to-day progress of the client. He said he was not sure if any negative consequences had occurred due to the client's participation with YAP. He stressed that the responsibility of these cases needed to remain with their service because these clients will not benefit from a short-term intervention. He said he would refer another client to the programme and felt that his expectations had been met in terms of the resources the programme had provided. He said the only negative feedback related

to the implementation of the wraparound meeting within the community and the negative focus the family may have to endure from other community members that may reflect negatively on them.

#### *CASMs*

Whether YAP should be working with adults with learning disabilities was an issue for two CASMs, who said while the programmes methods had been extremely successful with this group, a six-month intervention was insufficient as they needed a level of ongoing care and support that YAP is unable to provide. According to them, the introduction of long-term advocacy services within the Brothers of Charity and Western Care service would be a more realistic method of dealing with this group.

*“YAP made good strides with him but at the end there was a bit of panic because there was nothing in place for him”*

*“[It] has been extremely successful with them but the problem is these adults need more than six months”*

#### *Deputy Managers*

At the focus group, deputies said they were particularly concerned about adults with special needs becoming over-dependent on the programme. Deputies felt that this group really are in need of continual support and the six-month programme did not suffice in meeting their needs. While deputies and related services reported that the programme has worked successfully with this group, the concern is around what will happen once the programme ends. Currently YAP is unable to facilitate continual support but a continued link needs to be put in place. Sourcing people and training someone within the YAP programme to look after adults with special needs is an option.

## **SUMMARY – Chapter 10**

Two adult service users and one mother said they had enjoyed their experience with YAP because the staff had always been available to them, had listened to them and became friends with them. They enjoyed the fact that the service had allowed them do what they chose to do and had given them support. The only negative consequence that arose was that one client had become very attached to the advocate and had been very distressed when the advocate had left the programme. As a result, the programme was reluctant to pull away from the client and the service was extended for an indefinite length of time. This exemplifies the issue pointed out by the referrer from the Brothers of Charity, the CASMs and the deputy managers; a short term intervention service, while popular and effective in meeting their short-term needs, is not suitable for the long-term needs of the adult target group. Adults with disabilities are in need of a more long-term intervention that will provide them with support for an indefinite time frame. While YAP has done this in the case of one young man, it cannot become a regular occurrence due to demand for the programme. It was suggested by CASMs that a similar service should be set up by services within the learning disability remit that incorporated YAP philosophy but delivered a more long-term service. Increased communication within services would also benefit the client's situations.

## Chapter 11 – Evaluation Discussion and Conclusion

---

### 11.1 Introduction

In October 2002, the Western Health Board introduced the Youth Advocate Programme to the region to specifically address the needs of a number of teenagers and adults with disabilities who were known to the services due to behavioural problems and placement difficulties. The programme promised to reintegrate socially excluded young people into the community and provide them with support for a six-month period, by creating links with services and supporting their participation at them. Two key aspects of the programme's appeal included the provision of an advocate service and twenty-four hour supervision if required. The programme promised to work with anyone referred to it and promised to provide intervention on an individual needs basis. The Child and Family Research and Policy Unit were asked to evaluate the programme. The evaluation guidelines proposed a set of objectives that have been pursued using a variety of research methods: (i) Relevant literature, current policies and methods of intervention were explored in order to locate the programme within the present service context. What emerged is that the programme's philosophy and practice is in line with government legislation and recognised methods of practice. It was discovered from this data that a gap exists within the service spectrum for interventions that seek to create community links for this non-offending and offending 'at risk' teenage target group; (ii) a detailed description of the programme has demonstrated that it has been working in line with the YAP theoretical model. The programme has been assessed in relation to its costs and has proven to be cost effective in relation to comparable alternative placement facilities for the target group; (iii) an analysis of YAP files focused on the objectives set for the young people and the extent to which these have been achieved and surveys and interviews have provided extensive attitudinal data on the value and effectiveness of the programme; (iv) interviews were implemented with key stakeholders involved with the programme, service users, staff and linked services and this data has provided evidence of how the programme has worked with existing services in respect of referrals, participation and delivery.

### 11.2 Implementation of the Model

The initial cases referred to the programme were challenging young people and families who were greatly in need of intervention and some were at very high risk. There was urgency, by all parties, to get the programme started and to provide a service for these cases immediately. The first cases were up and running by October 2002. The programme has delivered a strength-based wraparound model of intervention and has executed all aspects of the model as documented in YAP information. The features of the model (advocate services; needs assessments; wraparound meetings and individualised service plans) have been put into operation and formulated to provide a working programme within the local community context. The programme focuses on the client's individuality, considers the range of factors that they are faced with and engages them with a number of activities in an attempt to meet their needs. Programme staff have been practical and solution focused in sourcing suitable activities, educational programmes and employment opportunities within the local areas and have provided the clients with a greater scope of community life during their time with the programme.

#### *Service Agreement*

Evaluation data has shown that the programme has been established within the catchment area of Galway and Roscommon and to a lesser extent Mayo and has delivered without delay an individualised service to families from a range of urban and rural backgrounds over a large geographical spread. The programme has been implemented in line with the terms of the Western Health Board service agreement and this has been indicated by the number, the living status and the behavioural nature of the clients and families it has worked with within the first year and two months of operation. Two sets of data confirmed that the programme's service users faced high levels of adversity in their lives. Norm-referenced and self-report research instruments indicated problems with conduct, hyperactivity, criminal and anti-social behaviour and referral information confirmed that many of the clients' backgrounds, living circumstances and educational needs were seriously problematic at the time of referral. The service users needs qualify under the terms of the Children Act 2001 as a group in need of care and protection of the Health Board. Referrals to the programme have been prioritised by CASMs as a means of ensuring the most needy cases are provided with intervention. CASMs reported the programme's

participants to have been beyond the control of existing services at the time they were referred. In no case has a referral been turned away by the programme and all forty-six clients have been worked with to the highest capability on the part of the programme staff. The programme, while stretched at times, managed to provide without exception a service to all the families and young people referred over the start –up year. While acknowledging that the level of participation at times varied, no family or young person refused to engage or left once they had linked in with the programme.

#### *Wraparound Meeting*

In general, YAP staff and referrers said that the wraparound meetings had motivated the clients to realise a change in lifestyle was needed and while the parent group was generally supportive of the meeting, there were mixed reactions from service users; some felt embarrassed and others found it difficult to speak out about themselves. While adult stakeholders felt that the wraparound had been successful, the young person's opinions are central to the YAP process and it is important that they feel comfortable about speaking out about their needs in front of family and services. Ensuring in every case that the wraparound meeting is in the child's best interest is an important aspect from the point of view of the young person. Advocates have experienced difficulty organising wraparound meetings. Restrictions imposed by services and families have meant meetings have taken place late into the process, which has directly challenged the effectiveness of the intervention. Meetings need to be held at the right time to have maximum impact on the young person, and it is preferable that they are held as early into the intervention period as possible. YAP staff need to be active in emphasising the importance of this point to related services.

#### *Individualised Service Plans (ISPs)*

ISPs are an important aspect of the programme's methodology and for the most part, programme staff felt the young people had adhered to them. One concern is the extent to which the ISPs are recorded. At present, there is no standard formula to monitor the documentation of ISPs and they are recorded and typed up on the initiative of individual advocates. Some advocates work towards achieving the specific goals identified and do not write up plans because the terms of the plans often change through the course of the intervention. Therefore, in practice, ISPs are a less formalised process than the model supposes. Without any 'hard copy', members of wraparound teams have no guidelines to refer to. Some programme staff said this area needed improvement and it was suggested by a Deputy Manager that plans should be drawn up, signed by and distributed to all members of the team within forty-eight hours of the wraparound. By providing them with plans, the clients and families would have a constant reminder of the wraparound meeting and its intended goals.

#### *Support Structures*

One of the main aims of the programme is to link clients to services and to support their attendance at existing services. The majority of YAP staff felt that the programme had been effective in establishing support structures for its clients. However, some referral agents said they felt it had not. The evaluation has found that in cases where structures have not been established, YAP staff had actively attempted to engage the clients, but had been unsuccessful for a number of reasons. A lack of available amenities in local communities, particularly in more rural areas, emerged as a major obstacle when attempting to introduce clients to lasting support structures. Staff were reluctant to introduce clients to activities that were costly or far away and were unsustainable without the advocate service. Another obstacle faced by staff has been the clients' lack of enthusiasm about joining groups or becoming involved in activities with other young people. As many of them had never participated in activities or groups before, they had been reluctant to begin at this stage. Within these limitations, the staff have been solution focused and innovative and have successfully engaged a number of the young people in a number of services through the course of the programme. In the main, YAP has successfully linked with and worked with a wide range of community groups, services, employers and informal services within its first year. However, as the programme has drawn to the end of a case, its community-based philosophy has been challenged, and fears have been expressed by stakeholders that existing support structures are not sustainable. While there is an onus on programme staff to ensure supports are maintained, it is not within its remit to maintain the service after the six-month time frame. The service provided by YAP is a short-term intervention and it cannot be responsible for the safeguarding of services on its completion. For structures to be maintained, YAP needs to clarify its role within the service spectrum and become more focused on post-YAP scenarios. The services involved that have a stake in the client's welfare, need to become more aware of their responsibility for the client's long-term care.

### **11.3 Outcomes, Costs and Benefits**

The key question driving the evaluation ‘does the programme work?’ relates specifically to the outcomes of the individual young people and the level of improvement they have experienced since participating with the programme. Evaluation data focused on every participant who had completed the programme and found at a general level, that outcomes have been largely positive. Files and opinions from stakeholders have shown that the programme is capable of bringing about a certain level of change in every case worked with. YAP files highlighted the extent of intervention by programme staff in the myriad of identified problems of the client group. The needs of individual clients were identified and broken into various categories and an assessment of the files has shown a sixty-three per cent improvement across all the categories of need, showing every programme participant to have experienced improvement in at least one category of need. Of the small number of service users and families who were interviewed, a number of positive aspects related to the programme were identified by them and overall they felt they had benefited from the programme, naming improved behaviour, increased communication and better links with their families as signs of improvements. The majority of YAP staff said that the programme had been of benefit in meeting the needs of the client group. Related services felt the programme had contributed to the young person’s attendance of their service and the majority of referrers felt that the programme was needed within the services structure. Two residential managers said the programme had been of particular benefit in linking young people back with their families, and provided an extended service they had been unable to provide. CASMs said they had seen a positive change in seventy-five per cent of cases and were happy with the outcome in sixty per cent of cases and agreed that cases they had referred were most in need of intervention. In sum, it can be said that the methods of the programme are largely effective and have brought about positive results to the target group. YAPs achievements must also be considered in terms of its demonstrated capacity to achieve cost savings to the Western Health Board vis-à-vis high support care, and the likelihood that it has contributed to cost savings in relation to other forms of care.

### **11.4 Attitudes**

A major part of the research methodology was discovering the attitudes of all programme stakeholders. In this section, significant issues identified by individual stakeholder groups are found.

#### *YAP Staff*

When the programme was first established, because of the need to establish links and get the programme up and running, a number of advocates initially selected were not from the same communities as the young people they worked with. However, this has changed since the programme has become more embedded in target communities and the percentage of advocates from these areas is growing all the time. Advocates are offered a package on commencing employment with the programme that includes training, supervision and support and are paid a wage level that has been recommended by local funders. However, a number of them highlighted a range of issues they had experienced in relation to pay and job insecurity. The majority of programme staff said they were satisfied with their jobs but would like to see increased job security and reliable payment methods introduced, particularly for those who have worked with the programme for a significant length of time. It needs to be stressed that while YAP workers may have voiced legitimate complaints regarding their working conditions, their requirements for training and secure work run against the core programme philosophy that promotes the use of flexible community lay workers as opposed to trained professionals. Since October 2003 YAP management have put a six-month contract in place for advocates.

A significant area needing improvement is the relationship with other services. While there had been a definite improvement in inter-service relations since the programme has been established, communication levels need to be improved and services need to take more responsibility in their roles as members of YAP child and family teams. For the most-part, staff were satisfied with the level of training they had received although all respondents but one felt that on-going training was needed. Again, the contradiction arises that while staff expressed the need for more training, the ethos of the model promotes the use of non-professional people with no definite skills that will support the young person. It has been difficult convincing staff of the effectiveness of the model without formal training. Management may need to find a balance so that staff are not out of their depth in certain situations yet maintain a level of normality that would be diminished by excessive training. Support and supervision of cases was considered adequate, with the majority reporting they received adequate support from other staff members. Staff felt that nearly all the young people involved were in need of the



intervention and their work has been effective with the majority of participants. Young people had participated well with the programme and valued highly both the programme and the mentor relationship. The level of participation on the part of the young people was very high and was relatively high on the part of the families. For the most part, according to programme staff, the programme has achieved many of its goals and all programme staff were in favour of the programme model.

#### *Referral Agents & CASMs*

As services seeking solutions that were not achievable within their own structures, the views of the referrers are significant and the report findings illustrate these views are mixed. On the one hand, referrers said YAP had not been overly effective in creating long-term support structures for the clients, had not always delivered its promised goals (community integration, improved behaviour and increased levels of engagement with related services), had been unprofessional and needed to increase staff training and communication skills. On the other hand, referrers were generally supportive of the wraparound meeting, wanted more programme places to be made available, felt an intervention such as YAP was needed and said the programme had been valuable in meeting the needs of young people. In the majority of cases, referrers said the advocate had a positive effect on the young person and the young person had benefited from the programme. CASMs found the programme to be effective and were happy with the majority of outcomes. In certain cases they realised some problems were too difficult to expect the programme to sort out within a six-month period. The programme had met their expectations, had delivered as promised and all were very much in favour of the model.

#### *Service Providers and Residential Centre Managers*

Services reported having a good experience of YAP in general and were supportive of it. In many cases, the young persons attendance at their service improved subsequent to their involvement with the programme. While the sustainability of change was questioned on completion of the programme, in the main, these services supported the programme and gave evidence of positive changes they had recognised in the young person. For the majority of services, the relationship they had established with the programme staff had been good. The majority said YAP had supported and encouraged young people to attend their service. Findings from interviews with residential managers found a number of issues with YAP staff including poor levels of communication, unprofessional standards, and a failure to understand the methods of practice in residential centres. In general, relations have improved over time and three residential centre managers said they were supportive of the model if further training and supervision was provided for staff.

#### *Service Users and Families*

While the number of service users interviewed was relatively small and cannot be said to be completely representative of the target group, in general, their response was extremely positive about the programme. Situations had improved and their behaviour had changed for the better since participating with the programme. Young people said they had learned from the advocate, felt supported by them and had a good relationship with them. Responses to their feelings about the wraparound meeting varied but many had stuck to terms of the plan, at least to some extent. Six reported that there were no negative aspects associated with the programme and the entire group said they would recommend the programme to others in similar positions to themselves. Families had participated with the programme well and the parents were generally happy with the YAP service and reported varying levels of changed behaviour in the young people. They said YAP was different to other services they have had contact with and they found its individualised, flexible nature to be effective. All of the parents were in favour of the programme and would recommend it to others in need of support. In short, the service users' view, as indicated by findings from this small sample of parents and young people, is extremely positive.

### **11.5 Programme Strengths & Weaknesses**

The foregoing sections indicate a range of positive findings and areas of possible improvement in YAP. In this section, these points are crystallised into a set of programme strengths and weaknesses.

### *Programme Strengths*

- (i) The programme works with the needs of individuals and families. The needs are broken into various categories and an assessment of the files has shown a sixty-three per cent improvement across all the categories of need, showing every programme participant to have experienced improvement in at least one category of need.
- (ii) For the most part, the wraparound meeting has motivated the clients to realise a change in lifestyle was needed.
- (iii) YAP has been successful in sourcing available services for the client group and the programme staff have been innovative in attempting to engage the young people with a number of services for the duration of the programme. The files highlighted the extent of intervention by programme staff in the myriad of identified problems of the client group.
- (iv) Related services said the programme had contributed to the young person's attendance of their service and the majority of referrers felt that the programme was needed within the services structure.
- (v) Clients and families participated well with the programme. Clients found the intensive, unstructured and friendly methods to be effective. All of the parents were in favour of the programme and said they would recommend it to others in need of support.
- (vi) The programme delivers a service beyond the limitations of other services and provides clients with an intervention that meets needs beyond their basic needs. The programme has been successful linking a number of young people with their families and communities.
- (vii) The majority of clients have benefited from the programme. Improved behaviour, increased communication and better links with families and educational facilities have been recognised as signs of improvement.
- (viii) CASMs said they had seen a positive change in seventy-five per cent of cases and were happy with the outcome in sixty per cent of cases and agreed that cases they had referred were most in need of intervention.
- (ix) The relationship with the advocate has had a positive effect on the clients. Young people said they had learned from the advocate, felt supported by them and valued the relationship they had established.
- (x) When compared with potential alternatives such as care in special schools, special care arrangements and prison, it is clear that the programme represents a significantly cheaper option with the possibility of better long-term outcomes.

### *Programme Weaknesses*

- (i) Programme staff feel they are poorly paid and have no guarantee of work from case to case. Under current employment conditions, reliable and trained staff are susceptible to leaving the programme. Losing trained staff would have a direct effect on the success of the programme that has been developed and enhanced by an enthusiastic core team. However, it needs to be reflected that this is what the model dictates and advocates are not promised work beyond the initial cases as the programme has no control over what part of the region the cases will next arise. Many of the core team who have remained with the programme have since been given higher positions within the programme. Advocates need to be clear on the programmes philosophy prior to accepting employment.

- (ii) Notwithstanding improvements in the quality of relationships during the first year of YAPs operation, it is clear that poor relations caused by quick implementation, high-risk cases, geographical area and demand in certain areas negatively affected programme implementation and effectiveness.
- (iii) The lack of a 'step-down' service providing continued support to the clients when they finish the intensive six-month programme has caused concern. There is a fear that young people, who have linked with services successfully for the duration of the six-month programme, will revert to their old ways or experience a sense of desertion, ultimately causing the intervention to be ineffective.
- (iv) Inadequate monitoring mechanisms for staff training and supervision brought about many initial problems for related services causing misunderstanding and a slow delivery of services initially. Many of these have since been addressed by the programme as it has become more established and accepted by other services.
- (v) The potential for manipulation of the programmes never-give-up approach on the part of the young person arose as an issue and it was reported that some of the young people had taken advantage of the service.
- (vi) Interviews with CASMs and residential centre managers suggested that the programme is not as beneficial to young people living in residential care, particularly those with few existing family links, because there were few structures YAP can link them with.
- (vii) On certain occasions, the wraparound meeting has caused the young person to be intimidated, as they have feared the consequences of the meeting.
- (viii) A poor match between the advocate and client can cause the intervention to be less effective.

## 11.6 Conclusion

The Youth Advocate Programme has been implemented within the terms of the WHB agreement and has had a relatively high level of success in meeting the needs of the target group. As with any new service, there were initial problems with implementation and difficulties arose when trying to locate itself as a new service within the range of established services. However, within the eleven-month evaluation period, the programme has been self-reflective and open to change. The programme has been effective in identifying the needs of the target group. It meets their needs in a practical manner and is popular with service users because it takes an interest in the individual personalities and opinions of its clients. In general, the programme has made a difference and clients have benefited from its continuity and are happy with the programme. A large majority of the stakeholders are in favour of the programme model and all of the Children Act Services Managers are happy with the cases they have referred and felt that YAP has filled a significant gap in the services.

While in a large part, the programme has successfully delivered, a number of issues have emerged through the course of the evaluation, in relation to its implementation. The most significant is the need for a greater coordination of services to increase the multi-agency support for the young person. At present, disagreement regarding methods of practice and less than perfect communication levels have meant the quality of the intervention has suffered and has slowed down the progress of individual cases. Initially individuals and services were sceptical of the YAP model, especially the concept of using untrained advocates and it took time to work through areas of disagreement, confusion and resistance to the model, for the new programme to develop working protocols with the other service providers. As different services have come to understand the YAP service, the programme has begun to settle and understand itself better in the scheme and services continue to refer young people to the programme. YAP needs to establish itself as a short-term intervention service that aims to link its clients with more lasting supports and other services need to be clearer on its role. Other

services need to fulfil their roles as members of the YAP child and family teams and provide continued support once the programme has ended.

As with any service, this report has indicated that there is scope for improvement. Among the suggestions made by stakeholders were: Increasing levels of inter-service communication; removing the section for adults with disabilities from the remit and focusing on the teenage target group; increasing the number of spaces on the programme to provide greater scope for intervention; establishing a suitable step-down service to provide continued support; lessening potential for extensions and strengthening the services position as a short-term intervention; increasing levels of training and supervision for all staff members; improving staff working conditions; ensuring advocates have a clearer role definition; and ensuring faster implementation of wraparound meeting and ISPs.

At present, YAP is the only intervention service of its kind established to meet the specific needs of the teenage target group. While there is need for improvement in a number of significant areas, it has proven to be effective in meeting the needs of young people and is supported by the Children Act Services Managers whose role is to ensure the needs of the specific target group are being met. The programme provides an added support to existing services that work closely with families in need of care and protection.

### **11.7 Recommendations**

- (i) YAP needs to make its role as a short-term intervention service clear to all stakeholders involved with the service (clients, services, referrers).
- (ii) YAP and the services with which it works must work to establish respectful effective links based on mutual recognition of their strengths and capabilities.
- (iii) The quality of the working conditions for the advocates should be improved to hold on to the core team of trained staff whose knowledge would benefit the programme in the long-term but on the flip-side advocates must be accepting of the employment package if they commence work with the programme as it reflects the programme philosophy.
- (iv) Ensure the wraparound meetings are orchestrated soon into the intervention so that ISPs are developed as early as possible.
- (v) Ensure as much as possible that the young people are comfortable about speaking out about their needs in front of family and services.
- (vi) Introduce a standard format for monitoring and documenting individualised service plans. Each member of the team should be provided with a copy of the plan so they are aware where the young person stands in relation to the goals.
- (vii) Ensure services take more responsibility of their roles as members of YAP child and family teams.
- (viii) CASMs need to be sure that the cases they refer will benefit from a short-term, six-month intervention service.
- (ix) YAP staff should receive further training on the operation of related Health Board services.
- (x) Ensure consistency in the quality of training, monitoring and supervision of YAP staff.
- (xi) Ensure a positive match between young person and advocate.
- (xii) YAP and other services should consider the development of a low-intensive service to support and monitor clients when they have completed the programme.

## APPENDIX

### Content of Appendix

<b>Appendix 1</b>	<b>QUESTIONNAIRES</b>	
	Advocate Questionnaire	126
	Referrer Questionnaire	142
	Service Provider Questionnaire	155
<b>Appendix 2</b>	<b>INTERVIEW QUESTIONS AND FOCUS GROUP POINTS</b>	
	Interview questions for clients	160
	Interview questions for parents	161
	Interview questions for programme manager	162
	Interview questions for CASMs	163
	Interview questions for residential centre managers	164
	Interview questions for advocates working with adults with learning disabilities	165
	Interview questions for referrers of adults with learning disabilities	166
	Points of discussion at advocate and deputy manager focus groups	167
<b>Appendix 3</b>	<b>MISCELLANEOUS</b>	
	CASM information table re: cases referred	169
	Youth profile information table	170
	Risk behaviour questionnaire	171

**APPENDIX 1: Questionnaires sent to advocates, referrers and service providers**

## ***QUESTIONNAIRE FOR YOUTH ADVOCATE PROGRAMME ADVOCATES***

This questionnaire forms a part of the Western Health Board/ National University Of Ireland, Galway, Child & Family Research & Policy Unit evaluation of the Youth Advocate Programme. As an advocate, it is important that we document your experiences and attitudes regarding the programme. This questionnaire allows for your participation in the evaluation. Please read the following instructions carefully before completing the questionnaire.

### **INSTRUCTIONS FOR COMPLETING QUESTIONNAIRE**

1. Please allow approximately 1 hour to complete the questionnaire.
2. To ensure the research is of value, please make an attempt to answer all questions to the best of your ability. It is extremely important that all questionnaires are fully completed. If you are unclear regarding any aspect of the questionnaire, please contact us for clarification.
3. Most questions in Section F are in relation to the specific cases you have worked with. For each question, please consider each young person individually and answer to the best of your knowledge. If you have worked with just one young person, please write relevant details under *Case 1* in each question. If you have worked with two or more cases, please write relevant details regarding the first young person under Case 1, the second young person under Case 2, the third under *Case 3* and so forth. Please answer these questions **ONLY** in relation to cases you have worked with for a three-month period or more. Please do not answer these questions about cases you have worked with for a shorter time frame.
4. Some questions ask you to *rate* your experiences. For each, a numeric rating scale is provided. For each question requiring a rating, please circle the number most appropriate to your experience.
5. The aim of this part of the research is to understand your experience and opinion so please answer honestly and openly.
6. Please feel free to make use of the space at the end of the questionnaire to make known your comments regarding the programme. We are interested to hear what you have to say.
7. Do not make reference to your own name or to the names of others. The questionnaire is anonymous and will be treated as confidential.
8. On completion, please place questionnaire in the stamped addressed envelope and put in the post as soon as possible.

Thank you for your cooperation

**Section A :** The following section asks you general questions about your role as an advocate.

1. How did you hear about YAP?

---

---

---

---

2. When did you begin work as an advocate? \_\_\_\_\_ / \_\_\_\_\_  
Month Year

3. How many young people have you worked with?

---

4. What were the main motivating factors in your decision to become an advocate?

---

---

---

---

---

5. Does your experience of being an advocate match your initial expectations of the role?

Yes  No  Unsure

5a. Please outline the ways these expectations have been met.

---

---

---

---

5b. Please outline the way the way these expectations have not been met.

---

---

---

---

6. What aspects of being an advocate do you enjoy most?

---

---

---

---

7. What aspects of being an advocate do you enjoy least?

---

---

---

---



8. Do you intend to remain as an advocate for the medium to long-term (1-3 years)?

Yes  No  Unsure

Comment:

---

---

---

9. Please indicate your overall level of job satisfaction in your role as advocate on a scale of 1 – 5 where 1 = Very Dissatisfied & 5 = Very Satisfied

1 2 3 4 5

Comment:

---

---

---

**Section B:** The following section is about your education and experience related to working with young people.

10. Do you have any formal qualifications that relate to working with young people and their families?

Yes  No  Unsure

*If yes, please provide details.*

---

---

---

11. Do you have any previous experience working with young people?

A. In a paid capacity? Yes  No  Unsure

If yes, please give details

---

---

---

B. In a voluntary Yes  No  Unsure  capacity

If yes, please give details:

---

---

---

C. In a private capacity (parenting, looking after family or relations etc)

Yes

No

Unsure

If yes, please give details:

---

---

---

---

**Section C: The following section asks you about YAP training.**

12. Was the YAP training you received adequate in dealing with issues you have encountered while working with young people and their families?

Yes

No

Unsure

Comment:

---

---

---

---

13. Please indicate on a scale of 1 – 5 your level of satisfaction regarding the training you received from YAP where 1 = Very Dissatisfied & 5 = Very Satisfied

1

2

3

4

5

Comment:

---

---

---

---

14. Do you think you need more training?

Yes

No

Unsure

If yes, please specify the areas you would like additional training.

---

---

---

---

---

---

---

---

**Section D: The following section is concerned with the support you get in your role as advocate.**

15. Do you feel you receive support in your role as advocate from other advocates?

Yes  No  Unsure

15a. If yes, what form does this support take?

---

---

---

---

---

16. Do you feel you receive support in your role as advocate from YAP management?

Yes  No  Unsure

16a. If yes, what form does this support take?

---

---

---

---

---

**Section E: The following section is concerned with other related services you are in contact with.**

17. Have the agencies that agreed to play a part in implementing individualised service plans participated as promised?

Yes  No  Unsure

Comment:

---

---

---

---

---

18. How would you rate the quality of the relationship you have with other specific services in contact with the young person(s) you are working with? Please name the three services you are in most contact with and indicate how satisfied you are with the relationship with each.

1 = Very Dissatisfied – 5 = Very Satisfied

Name of Service 1 \_\_\_\_\_

1                                  2                                  3                                  4                                  5

Name of Service 2 \_\_\_\_\_

1    2    3    4    5

Name of Service 3 \_\_\_\_\_

1    2    3    4    5

Comment:

---

---

---

19. Do you feel that other related services you are in contact with understand what YAP is about?

Yes     No     Unsure

Comment:

---

---

---

20. Do you feel the service you provide as a YAP advocate is different to that provided by other services for this group of young people?

Yes     No     Unsure

Comment:

---

---

---

---

**SECTION F: This section requires information about the young people on the programme.**

21. Please consider the following statements specific to each young person you have worked with and indicate your level of agreement or disagreement on a five point scale where 1 = I Strongly Disagree and 5 = I Strongly Agree

	<i>CASE 1</i>						Don't Know
A.	I live in the same community as the young person I work(ed) with.	1	2	3	4	5	
B.	Family members actively participated in the wraparound meeting.	1	2	3	4	5	
C.	The wraparound is effective in motivating young people to realise change in lifestyle is needed.	1	2	3	4	5	
D.	The Individualised service plan has been successfully implemented and followed by the young person.	1	2	3	4	5	
E.	The young person was helpful and encouraging in helping to implement the Individualised Service Plan.	1	2	3	4	5	
F.	Yap has been successful in creating effective support structures for the young person.	1	2	3	4	5	
G.	The young person has responded positively to support structures provided by Yap.	1	2	3	4	5	
H.	The Individualised Service Plan was revised over the duration of the intervention to meet the needs of the family.	1	2	3	4	5	

	<i>CASE 2</i>							Don't Know
A.	I live in the same community as the young person I work(ed) with.	1	2	3	4	5		
B.	Family members actively participated in the wraparound meeting.	1	2	3	4	5		
C.	The wraparound is effective in motivating young people to realise change in lifestyle is needed.	1	2	3	4	5		
D.	The Individualised service plan has been successfully implemented and followed by the young person.	1	2	3	4	5		
E.	The young person was helpful and encouraging in helping to implement the Individualised Service Plan.	1	2	3	4	5		
F.	Yap has been successful in creating effective support structures for the young person.	1	2	3	4	5		
G.	The young person has responded positively to support structures provided by Yap.	1	2	3	4	5		
H.	The Individualised Service Plan was revised over the duration of the intervention to meet the needs of the family.	1	2	3	4	5		

	<i>CASE 3</i>							Don't Know
A.	I live in the same community as the young person I work(ed) with.	1	2	3	4	5		
B.	Family members actively participated in the wraparound meeting.	1	2	3	4	5		
C.	The wraparound is effective in motivating young people to realise change in lifestyle is needed.	1	2	3	4	5		
D.	The Individualised service plan has been successfully implemented and followed by the young person.	1	2	3	4	5		
E.	The young person was helpful and encouraging in helping to implement the Individualised Service Plan.	1	2	3	4	5		
F.	Yap has been successful in creating effective support structures for the young person.	1	2	3	4	5		
G.	The young person has responded positively to support structures provided by Yap.	1	2	3	4	5		
H.	The Individualised Service Plan was revised over the duration of the intervention to meet the needs of the family.	1	2	3	4	5		

22. Please rate the level of the young persons participation in YAP related activities on a scale of 1 – 5 where 1 = a Very Low Level of Participation and 5 = a Very High Level of Participation.

<b>CASE 1</b>	1	2	3	4	5
---------------	---	---	---	---	---

<b>CASE 2</b>	1	2	3	4	5
---------------	---	---	---	---	---

<b>CASE 3</b>	1	2	3	4	5
---------------	---	---	---	---	---

23. Please rate the level of family participation in YAP related activities on a scale of 1 – 5 where 1 = a Very Low Level of Participation and 5 = a Very High Level of Participation.

<b>CASE 1</b>	1	2	3	4	5
---------------	---	---	---	---	---

<b>CASE 2</b>	1	2	3	4	5
---------------	---	---	---	---	---

<b>CASE 3</b>	1	2	3	4	5
---------------	---	---	---	---	---

Comment:

---

---

---

---

---

---

---

---

24. Please identify any positive changes you have seen in the young person(s) behaviour since participating on the programme.

Case 1	
Case 2	
Case 3	

24a. Please identify other benefits the programme has brought the young person.

Case 1	
Case 2	
Case 3	

25. Are there any negative consequences experienced by the young person(s) as a result of being on the programme?

Yes  No  Unsure

If yes, please outline

---



---



---



---



26. Please identify any positive changes you have seen in the family since participating on the programme.

Case 1	
Case 2	
Case 3	

27. Please consider the following statements specific to each young person you have worked with and indicate your level of agreement or disagreement where 1 = I strongly disagree and 5 = I strongly agree.

	<b>CASE 1</b>						Don't Know
a.	I think this young person highly values YAP	1	2	3	4	5	
b.	I think this young person highly values the mentor relationship	1	2	3	4	5	
c.	I think this young person has manipulated the programme	1	2	3	4	5	
d.	I think this young person understands what the programme endeavours to do	1	2	3	4	5	
e.	I think this young person willingly participates on the programme	1	2	3	4	5	
f.	I think this young person feels the advocate has helped them have their voice heard	1	2	3	4	5	
g.	I think the family feel that YAP has helped them to voice their opinions about matters concerning them	1	2	3	4	5	

	<b>CASE 2</b>						Don't Know
a.	I think this young person highly values YAP	1	2	3	4	5	
b.	I think this young person highly values the mentor relationship	1	2	3	4	5	
c.	I think this young person has manipulated the programme	1	2	3	4	5	
d.	I think this young person understands what the programme endeavours to do	1	2	3	4	5	
e.	I think this young person willingly participates on the programme	1	2	3	4	5	
f.	I think this young person feels the advocate has helped them have their voice heard	1	2	3	4	5	
g.	I think the family feel that YAP has helped them to voice their opinions about matters concerning them	1	2	3	4	5	

	<b>CASE 3</b>							Don't Know
a.	I think this young person highly values YAP	1	2	3	4	5		
b.	I think this young person highly values the mentor relationship	1	2	3	4	5		
c.	I think this young person has manipulated the programme	1	2	3	4	5		
d.	I think this young person understands what the programme endeavours to do	1	2	3	4	5		
e.	I think this young person willingly participates on the programme	1	2	3	4	5		
f.	I think this young person feels the advocate has helped them have their voice heard	1	2	3	4	5		
g.	I think the family feel that YAP has helped them to voice their opinions about matters concerning them	1	2	3	4	5		

28. In general, do you feel the relationship you have established with the young person has had a positive effect on them?

- CASE 1**      Yes                       No                       Unsure
- CASE 2**      Yes                       No                       Unsure
- CASE 3**      Yes                       No                       Unsure

Comment:

---



---



---



---

29. In general, do you think the programme encourages the young person to become overly dependent on the advocate?

- CASE 1**      Yes                       No                       Unsure
- CASE 2**      Yes                       No                       Unsure
- CASE 3**      Yes                       No                       Unsure

Comment:

---



---



---



---

30. In general, do you feel that the young person you have worked with needed an intervention programme such as YAP?

<b>CASE 1</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 2</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 3</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>

Comment:

---

---

---

31. In comparison with other services with which they have been involved, how do you think the young people view YAP?

---

---

---

---

---

**Section G: This section completes the questionnaire by asking your opinion about changes that could be made to improve YAP.**

32. Are there any changes that could be made to improve your position as advocate?

Yes  No  Unsure

Comment:

---

---

---

33. Are there any changes that could be made to improve the wraparound meeting

Yes  No  Unsure

Comment:

---

---

---

34. Are there any changes that could be made to improve the implementation of individualised service plans?

Yes  No  Unsure

Comment:

---

---

---

---

35. Have you met any factors external to YAP that have hindered your work with the young person?

Yes  No  Unsure

If yes, please provide details.

---

---

---

---

36. Please list the programme strengths and weaknesses.

Strengths:

---

---

---

---

Weaknesses:

---

---

---

---

37. What elements of the programme would you change (if any) to create a more effective service?

---

---

---

---

38. On the whole are you in favour of the YAP model?

Yes  No  Unsure

Comment:

---

---

---

---

39. Overall, how valuable is YAP in meeting the needs of the young people?

1 = Of no Value & 5 = Extremely Valuable

1 2 3 4 5

Comment:

---

---

---

---

---

---

40. Please use the space provided to make further comments that you consider to be significant.

---

---

---

---

---

---

---

---

---

---

## ***QUESTIONNAIRE FOR YOUTH ADVOCATE PROGRAMME REFERRERS***

This questionnaire forms a part of the Western Health Board/ National University Of Ireland, Galway, Child & Family Research & Policy Unit evaluation of the Youth Advocate Programme. As someone who has referred a young person to the programme, it is important that we document your experiences and attitudes regarding the programme. This questionnaire allows for your participation in the evaluation. Please read the following instructions carefully before completing the questionnaire.

### **Instructions for completing questionnaire**

1. Please allow approximately 1 hour to complete the questionnaire
2. To ensure the research is of value, please make an attempt to answer all questions to the best of your ability. It is extremely important that all questionnaires are fully completed. If you are unclear regarding any aspect of the questionnaire, please contact us for clarification. If you do not know the answer to some of the questions, write *don't know* clearly beside those questions.
3. The term *YAP* refers to the *Youth Advocate Programme*.
4. Questions 8 - 20 are in relation to the specific cases you have referred. For each question please consider each young person individually and answer to the best of your knowledge. If you have referred just one young person, please write relevant details under *Case 1*. If you have referred two or more young people to the programme, please write relevant details regarding the first young person under Case 1, the second young person under Case 2, the third under *Case 3* and so forth.
5. Some questions ask you to *rate* your experiences. For each, a numeric rating scale is provided. For each question requiring a rating, please circle the number most appropriate to your experience.
6. The aim of this part of the research is to understand your experience and opinion so please answer honestly and openly.
7. Please feel free to make use of the space at the end of the questionnaire to make known your comments regarding the programme.
8. Do not make any reference to your name or the names of others. All questionnaires are anonymous and will be treated as confidential.
9. On completion, please place questionnaire in the envelope provided and put in the post as soon as possible.

**Thank you for your cooperation**

**SECTION A: GENERAL QUESTIONS REGARDING REFERRAL TO YAP.**

1. What is your role? Please tick appropriate box.

Social Worker

Community Childcare Leader

N.Y.P. Project Leader

N.Y.P. Project Worker

Other (Please Specify)

2. How did you hear about YAP?

---

---

---

3. How many young people have you referred to YAP? \_\_\_\_\_

4. Did you have written information about YAP in advance of referring the young person(s)?

Yes

No

Unsure

Comment:

---

---

---

4a. If yes, did this written information clearly outline the objectives of the programme?

Yes

No

Unsure

Comment:

---

---

---

5. What were the main motivating factors in your decision to refer a young person to YAP?

---

---

---

6. Does your experience with YAP match your initial expectations of the programme?

Yes

No

Unsure

6a. Please outline the way your expectations have been met:

---

---

---



6b. Please outline the way your expectations have not been met:

---

---

---

7. What was the approximate length of time between the initial referral and the young person(s) initiating the programme?

- Less than 1 week       1 – 2 weeks       3 - 4 weeks       5 – 6 weeks   
7 – 8 weeks       9 – 10 weeks       11 – 12 weeks       More than 12 weeks

If more than 12 weeks please specify \_\_\_\_\_

7a. Were you happy with the timeliness of this response?

- Yes       No       Unsure

Comment:

---

---

---

---

---

**SECTION B: YOUNG PEOPLE AND THEIR FAMILIES.**

8. What are the key factors that distinguish the young person you referred from other young people you are working with? Please provide details of each case you referred.

Case 1	
Case 2	
Case 3	

9. What was the young person's response when it was proposed to them that they participate on the programme?  
Please provide details of each case you referred.

Case 1	
Case 2	
Case 3	

10. Has the young person been involved with other services? (W.H.B. & other, please specify)

**CASE 1**      Yes                       No                       Unsure

If yes, please provide information.

---

**CASE 2**      Yes                       No                       Unsure

If yes, please provide information.

---

---

**CASE 3**      Yes                       No                       Unsure   
If yes, please provide information.

---

---

11. Did you attend the wraparound meeting for the young person(s) you referred? (If yes, please answer 11a and 11b. If no, go to 12)

**CASE 1**              Yes                       No

**CASE 2**              Yes                       No

**CASE 3**              Yes                       No

Comment:

---

---

---

11a. Did the young person actively participate in the wraparound meeting?

**CASE 1**              Yes                       No                       Unsure

**CASE 2**              Yes                       No                       Unsure

**CASE 3**              Yes                       No                       Unsure

Comment:

---

---

---

11b. Did the young person's family actively participate in the wraparound meeting?

**CASE 1**              Yes                       No                       Unsure

**CASE 2**              Yes                       No                       Unsure

**CASE 3**              Yes                       No                       Unsure

Comment:

---

---

---

12. Please consider the following statements and indicate your level of agreement or disagreement on the five point scale where **1 = I strongly disagree** and **5 = I strongly agree**.

	CASE 1		Don't Know				
A.	I think the wraparound meeting is effective in motivating the young person to realise a change in his/her lifestyle is needed	1	2	3	4	5	
B.	I think the young person has been successful in adhering to the terms of the Individualised Service Plan	1	2	3	4	5	
C.	I think YAP has been successful in creating effective support structures for the young person	1	2	3	4	5	
D.	I think the young person has responded positively to support structures provided by YAP	1	2	3	4	5	

	CASE 2		Don't Know				
A.	I think the wraparound meeting is effective in motivating the young person to realise a change in his/her lifestyle is needed	1	2	3	4	5	
B.	I think the young person has been successful in adhering to the terms of the Individualised Service Plan	1	2	3	4	5	
C.	I think YAP has been successful in creating effective support structures for the young person	1	2	3	4	5	
D.	I think the young person has responded positively to support structures provided by YAP	1	2	3	4	5	

	CASE 3		Don't Know				
A.	I think the wraparound meeting is effective in motivating the young person to realise a change in his/her lifestyle is needed	1	2	3	4	5	
B.	I think the young person has been successful in adhering to the terms of the Individualised Service Plan.	1	2	3	4	5	
C.	I think YAP has been successful in creating effective support structures for the young person	1	2	3	4	5	
D.	I think the young person has responded positively to support structures provided by YAP	1	2	3	4	5	

13. Please rate the level of the young person's participation with YAP.

**1 = Minimum amount of participation & 5 = Maximum amount of participation**

<b>CASE 1</b>	1	2	3	4	5
<b>CASE 2</b>	1	2	3	4	5
<b>CASE 3</b>	1	2	3	4	5

14. Please rate the level of family participation with YAP.

**1 = Minimum amount of participation and 5 = Maximum amount of participation**

<b>CASE 1</b>	1	2	3	4	5
<b>CASE 2</b>	1	2	3	4	5
<b>CASE 3</b>	1	2	3	4	5

15. Has the relationship with the advocate had a positive effect on the young person?

**CASE 1**      Yes                       No                       Unsure

**CASE 2**      Yes                       No                       Unsure

**CASE 3**      Yes                       No                       Unsure

Comment

---

---

---

16. Do you think the young person values the relationship with the advocate?

**CASE 1**      Yes                       No                       Unsure

**CASE 2**      Yes                       No                       Unsure

**CASE 3**      Yes                       No                       Unsure

Comment

---

---

---

17. In general, do you think the programme encourages the young person to become overly-dependent on the advocate?

<b>CASE 1</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 2</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 3</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>

Comment:

---

---

---

18. Has the programme benefited the young person you referred?

<b>CASE 1</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 2</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 3</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>

If yes, please list the ways the programme benefited the young person?

---

---

---

19. Has the programme benefited the young person's family?

<b>CASE 1</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 2</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 3</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>

If yes, please list the ways the programme benefited the young person's family?

---

---

---

---

20. Are there any negative consequences experienced by the young person as a result of being on the programme?

<b>CASE 1</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 2</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>
<b>CASE 3</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unsure <input type="checkbox"/>

If yes, please list the negative consequences.

---

---

---

**SECTION C: YAP STAFF.**

21. In your opinion, are YAP advocates adequately skilled for the role they fill?

Yes  No  Unsure

Comment:

---

---

---

22. Do you feel that it is appropriate for people without relevant qualifications to be working with young people and their families?

Yes  No  Unsure  Comment:

---

---

---

23. Is there any training you feel would be useful for advocates to undertake?

---

---

---

24. Have YAP staff kept you up to date with the case(s) you referred?

Yes  No  Unsure

Comment:

---

---

---

25. Has the level of contact agreed between yourself and YAP staff regarding the young person(s) been upheld?

Yes  No  Unsure

Comment:

---

---

---



26. Please indicate on the numeric scale, how satisfied you are with the relationship you have with YAP staff.

**1 = Very Dissatisfied – 5 = Very Satisfied**

1                      2                      3                      4                      5

Comment:

---

---

---

**SECTION D: YOUR OPINION REGARDING YAP.**

27. Are there any changes that could be made to improve the wraparound meeting?

Yes                       No                       Unsure

Comment:

---

---

---

---

28. Are there any changes that could be made to improve the implementation of individualised service plans?

Yes                       No                       Unsure

Comment:

---

---

---

---

29. What do you think are the key strengths and weaknesses of the programme?

Strengths:

---

---

---

---

---

Weaknesses:

---

---

---

---

---

30. Do you think an intervention such as YAP is necessary?

Yes                       No                       Unsure

Comment:

---

---

---

---

31. Do you feel the service provided by YAP differs from other services currently available for this group of young people?

Yes

No

Unsure

Comment:

---

---

---

32. Do you think the service provided by YAP could be made available by other existing services?

Yes

No

Unsure

Comment:

---

---

---

33. What elements of the programme would you change (if any) to create a more effective service?

---

---

---

34. On the whole are you in favour of the Yap model?

Yes

No

Unsure

Comment:

---

---

---

35. Have you encountered any problems while working with YAP?

Yes

No

Unsure

Comment:

---

---

---

36. Overall, how valuable is YAP in meeting the needs of the young people you referred?

**1 = Of no value & 5 = Extremely valuable**

1

2

3

4

5

Comment:

---

---



## ***QUESTIONNAIRE FOR YOUTH ADVOCATE PROGRAMME SERVICE PROVIDERS***

This questionnaire forms a part of the Western Health Board/ National University Of Ireland, Galway, Child & Family Research & Policy Unit evaluation of the Youth Advocate Programme. As someone who supplies a service to YAP clients, it is important that we document your experiences and attitudes regarding the programme. This questionnaire allows for your participation in the evaluation. Please read the following instructions carefully before completing the questionnaire.

### **Instructions for completing questionnaire**

10. Please allow approximately 20 minutes to complete the questionnaire
11. To ensure the research is of value, please make an attempt to answer all questions to the best of your ability. It is extremely important that all questionnaires are fully completed. If you are unclear regarding any aspect of the questionnaire, please contact me for clarification. If you do not know the answer to some of the questions, write *don't know* clearly beside those questions.
12. The term *YAP* refers to the *Youth Advocate Programme* throughout the questionnaire.
13. Questions 6, 6a & 8 are in relation to the specific YAP cases you have worked with. For each question please consider each young person individually and answer to the best of your knowledge. If you have worked with just one young person, please write relevant details under *Case 1*. If you have worked with two or more young people, please write relevant details regarding the first young person under *Case 1*, the second young person under *Case 2*, the third under *Case 3* and so forth.
14. Some questions ask you to *rate* your experiences. For each, a numeric rating scale is provided. For each question requiring a rating, please circle the number most appropriate to your experience.
15. The aim of this part of the research is to understand your experience and opinion so please answer honestly and openly.
16. Please feel free to make use of the space at the end of the questionnaire to make known your comments regarding the programme.
17. Do not make any reference to your name or the names of others. All questionnaires are anonymous and will be treated as confidential.
18. On completion, please place questionnaire in the envelope provided and put in the post as soon as possible.

Thank you for your cooperation

1. What organisation do you work for? Please tick the appropriate box.

Drugs development service	<input type="checkbox"/>	Travellers Centre	<input type="checkbox"/>
Rape crisis centre	<input type="checkbox"/>	Probation service	<input type="checkbox"/>
Teen Pregnancy centre	<input type="checkbox"/>	Gardai	<input type="checkbox"/>
School	<input type="checkbox"/>	NYP	<input type="checkbox"/>
Youth Training Centre	<input type="checkbox"/>	Other (please give details)	<input type="checkbox"/>

2. Please outline your role within the organisation.

---



---



---

3. How did you come into contact with YAP?

---



---



---

4. What do you understand YAP to be about?

---



---



---

5. How many young people from the programme have been linked to your service?

---



---

6. Did the young person have contact with your service prior to their participation with the Youth Advocate Programme?

	Yes	No	Unsure
Case 1			
Case 2			
Case 3			
Case 4			

Please provide details

---



---



---



---

6a. For those who had prior involvement with your service, has there been any difference in their participation subsequent to becoming involved with YAP?

	Yes	No	Unsure
Case 1			
Case 2			
Case 3			
Case 4			

Please provide details

---



---



---

7. What do you understand the role of the advocate to be?

---



---



---

8. Consider the following statements specific to each YAP case you are involved with. Some of the statements are positive and some are negative. Please consider carefully and indicate your level of agreement or disagreement on a five point scale where 1 = I Strongly Disagree and 5 = I Strongly Agree.

	<i>CASE 1</i>						Don't Know
A.	The advocate didn't directly support the young person's attendance of my service	1	2	3	4	5	
B.	I have a good working relationship with YAP staff	1	2	3	4	5	
C.	I have regular face-to-face and phone contact with the YAP advocate	1	2	3	4	5	
D.	YAP hasn't contributed to the young person's engagement with my service	1	2	3	4	5	

	<i>CASE 2</i>						Don't Know
A.	The advocate didn't directly support the young person's attendance of my service	1	2	3	4	5	
B.	I have a good working relationship with YAP staff	1	2	3	4	5	
C.	I have regular face-to-face and phone contact with the advocate regarding the client	1	2	3	4	5	
D.	YAP hasn't contributed to the young person's engagement with my service	1	2	3	4	5	

	<i>CASE 3</i>						Don't Know
A.	The advocate didn't directly support the young person's attendance of my service	1	2	3	4	5	
B.	I have a good working relationship with YAP staff	1	2	3	4	5	
C.	I have regular face-to-face and phone contact with the YAP advocate	1	2	3	4	5	
D.	YAP hasn't contributed to the young person's engagement with my service	1	2	3	4	5	



**APPENDIX 2:** Interview questions and focus group discussion points



## INTERVIEW QUESTIONS FOR YOUNG PEOPLE

1. How did it happen that you became involved with YAP? Who was involved with linking you to the service?
2. Was YAP explained to you before you began the programme?
  - a. If yes, what did you expect from YAP?
  - b. If yes, did you want to be on the programme once it had been explained to you?

### Questions about the advocate

3. What was the relationship like between you and the advocate?
4. How regularly did you see the advocate when you were on the programme?
5. What kind of activities did you do with the advocate?
6. Did you like spending time with the advocate? Why?
7. Do you feel the advocate has helped you to have your voice heard about matters concerning you?
8. Do you feel the advocate has taught you anything?
9. Did you miss seeing the advocate once the programme ended?
10. Did the advocate support you in attending the other services you were asked to attend as part of the individualised service plan?
11. Was the advocate always available to you when you needed them?
12. Did you feel the advocate intruded on your private life?

### Questions about the wraparound meeting & service plan

13. Do you remember the wraparound meeting? What was it about? What did you think of the wraparound meeting?
14. Did you find it easy for you to speak out about matters concerning you at the wraparound meeting?
15. After the wraparound meeting, did you follow the plan that was designed for you?
  - A If yes, was it hard to stick to it?
  - B If yes, has the service plan changed the way you live in any way?
  - C If yes, now that you have finished the programme, do you continue to follow the service plan?
16. Did your family attend the wraparound meeting?
  - A If yes, did your family help in making the individualised service plan?

### General questions

17. Think about the reasons you started with YAP. What are those reasons? Do you think you have changed in anyway since participating on the programme?
18. In general, do you think YAP has helped you and your family? How has it helped you and your family?
19. Have you been involved with other services before YAP? If yes, how does YAP compare to other services with which you have been involved?
20. What do you think is the best thing about YAP?
21. What do you think is the worst thing about YAP?
22. Have your initial expectations of the programme been met?
23. Would you recommend YAP to other young people in a similar position to yourself?
24. What is happening in your life now? What are you doing now? How does it compare to when you started the programme?

## INTERVIEW QUESTIONS FOR PARENTS

1. How did it happen that your family became involved with YAP?
2. Was YAP explained to you before your son/daughter started the programme?
  - a. If yes, what did you expect from the programme?
  - b. Were you keen for your son/daughter to participate on the programme?
  - c. Did your son/daughter want to participate on the programme?

### Questions about the advocate

3. What was the relationship like between your son/daughter and the advocate?
4. What was your relationship like with the advocate?
5. Do you feel the relationship with the advocate has had a positive effect on your son/daughter? Please give examples.
6. Do you feel the advocate helped your family in any way?
7. Do you think the advocate has helped your son/daughter to have their voice heard about matters concerning them?
8. Was the advocate always available to your family when you needed them?

### Questions about the wraparound meeting & service plan

9. Did you attend the wraparound meeting for your son/daughter?
  - A. If yes, what did you think about the wraparound meeting?
10. What did you think of the individualised service plan made for your son/daughter? Were you involved in the design of the individualised service plan?
11. Did your son/daughter stick to the terms of the plan?
  - A. Did the advocate support your son/daughter in sticking to the terms of the ISP?
12. Do you think the individualised service plan has changed the way your son/daughter lives his/her life?

### General questions

13. Do you think your family has changed since participating on the programme? Explain.
  14. Do you think your son/daughter was in need of an intervention such as YAP? Why?
  15. In general, what has the programme done for your family?
  16. Has your family been involved with other services? How does YAP compare to other services with which you have been involved?
  17. Do you think that YAP offers a service that other services do not provide?
  18. What are the positive aspects of the programme?
  19. What are the negative aspects of the programme?
  20. Have your expectations of the programme been met?
- In general, are you in favour of YAP?

## QUESTIONS FOR PROGRAMME MANAGER

1. How did you first hear about YAP?
2. When did you begin work as programme Manager?
3. What kind of work did you do before you came to the programme?
4. What were the main motivating factors in your decision to work for YAP?
5. Does your experience of the role as YAP Programme Manager match your initial expectations?
6. What dimensions of the role do you enjoy most?
7. What dimensions of the role do you enjoy least?
8. Do you feel the programme model fits into the Irish context?
  
9. Do you feel the programme has accessed the intended target group?
10. Do you feel that the young people on the programme are the most difficult group?
11. In your opinion, to what extent to the specifics of certain young people/families dictate the possibility of success of the model?
12. How do you think the young people/service users view the service offered by YAP?
  
13. Do you feel it is appropriate for advocates without formal qualifications to be working with young people of this nature?
14. Do you think advocates will remain in their role for the medium to long-term?
  
15. How has YAP made itself known to other related services?
16. Do you feel that other services understand what YAP is about?
17. How successful is your relationship with other agencies with whom service users have been linked?
18. Do you think these relationships could be improved in any way?
  
19. In practice, how effective is the wraparound meeting? Do you think it motivates young people to change? Do you think it delivers what is promised?
20. In general, do young people and families actively participate in the wraparound meetings?
21. In general, has the individualised service plan been implemented and adhered to by service users?
22. Has YAP been successful in creating effective support structures for service users?
  
23. Please identify any positive changes you have seen in service users behaviour since participating on the programme.
24. Please identify other benefits the programme has brought the young person?
25. Do you think over-dependency might be a negative consequence of the programme? Have you encountered any cases of this?
26. How has YAP helped the families of the service users involved?
27. In general, how effective is YAP in meeting the needs of its service users?

## INTERVIEW QUESTIONS FOR CHILDREN ACT SERVICES MANAGERS

1. Who introduced you to YAP initially?
2. What are the reasons YAP was brought into the Western Health Board region?
3. What were your initial expectations regarding the programme?
4. What is the nature of the young people you have referred to the programme?
5. Why did you feel that YAP would suit them over other forms of intervention?
6. Do you think the programme didn't suit any of the young people you referred?
7. Are there other young people with significant problems that have not been referred to YAP? What is their nature? How do they differ?
8. How does the waiting list operate?
9. How many people are on the waiting list?
10. Do you control access of adults with learning disabilities to the programme? How effective has the programme been for adults with learning disabilities?
11. How often do the Children's Act Services Managers meet together?
12. What is the role of the implementation group? How often do you meet?
13. Do you think existing services could provide the YAP service?
14. Has met with your expectations?
15. Has the programme delivered as it promised to deliver?
16. Are there any changes you feel would improve the programme?
17. In general, has the programme benefited the individuals you referred?

## **RESIDENTIAL CENTRE MANAGERS INTERVIEW QUESTIONS**

1. What is your role here at Arkle House/ Aras Geal/ Barr Aille?
2. How did you come into contact with YAP?
3. What expectations did you have about the programme?
4. How many young people from Arkle House/ Aras Geal/ Barr Aille has YAP worked with?
5. What do you understand the role of the advocate to be
6. In general, what was the relationship like between the young people and the advocates
7. Do you think it is appropriate for people without relevant qualifications to be working with this group
8. In general how did the young people respond to the programme
9. What was your relationship like with YAP staff
10. Did you have regular contact with the advocates regarding progress of each case
11. In the case of each young person, have you noticed any difference in their participation /behaviour subsequent to becoming involved with YAP
12. Has the programme met with your expectations?
13. How beneficial is YAP in meeting the needs of the young people in residential homes?
14. Do you have any other points you would like to raise with regard to your experience with YAP.

## **Interview questions for advocates working with adults with learning disabilities**

1. How did it come about that YAP became involved with [name of client]?
2. What is the nature of the disability affecting the client?
3. What was the client's situation (employment/ educational/ living/ criminal) prior to YAP intervention?
4. What do you think YAP endeavours/endeavoured to do in this case?
5. Did you have experience of working with adults with learning disabilities prior to working with this case?
6. Was the YAP training you received adequate in dealing with issues you have encountered while working with this case?
7. How did the client respond to you on initial meeting?
8. Was the programme explained to the client? If yes, do you think the client understood/ understands what the programme endeavours to do?
9. How effective was the wraparound meeting in this case?
10. Was the individualised plan followed by the client?
11. Did the client willingly participate with programme activities?
12. Did the client's family willingly participate with the programme?
13. In general, what was the level of participation like on the part of the client?
14. In general, what was the level of participation like on the part of the family?
15. Please identify any positive changes you have seen in the client since participating with the programme?
16. Do you think there were/ are any negative consequences experienced by the client as a result of being on the programme?
17. Have you noticed any positive changes in the family since participating with the programme?
18. Do you feel that your relationship with the client has had a positive effect on the client?
19. In comparison with other services with which they have been involved, how does the client view YAP in your opinion?
20. What aspects of YAP are beneficial in meeting the needs of this client group?
21. Are there any weaknesses associated with the programme that may affect this client in a negative manner?
22. In your opinion, how valuable was/ is YAP in meeting the needs of this client?

## **Interview Questions for Referrers of Adults with Learning Disabilities**

1. What organisation do you work for?
2. What is your role?
3. How did you hear about YAP?
4. What were the motivating factors in your decision to refer [the client's name] to the programme?
5. What is the nature of the client's disability?
6. What other services had the client been involved with prior to their involvement with YAP?
7. What did you expect the programme to deliver to the client?
8. Did you attend the wraparound meeting for the client? If yes, what were your thoughts regarding the wraparound?
9. Was the client successful in sticking to the terms of the plan designed at the wraparound?
10. In your opinion, was YAP successful in creating effective support structures for the client?
11. Did the client actively participate with programme activities?
12. Did the client's family actively participate with the programme?
13. Has the relationship with the advocate had a positive effect on the client?
14. Do you think the programme encourages the client to be overly dependent on the advocate?
15. In your opinion, has YAP benefited the client and his family?
16. Do you think there are any negative consequences experienced by the client as a result of participating with the programme?
17. Are you satisfied with the relationship you have with YAP staff?
18. What are the key strengths of the programme?
19. Are there any weaknesses associated with the programme?
20. Have you encountered any problems while working with YAP?
21. How valuable is YAP in meeting the needs of the client you referred?
22. Have your expectations of the programme been met?

## **FOCUS GROUP POINTS OF DISCUSSION WITH ADVOCATES & DEPUTY MANAGERS**

The focus group will facilitate discussion amongst advocates regarding their role with an aim to providing further information surrounding issues that have arisen from the questionnaires. The facilitator will make reference to the following points with the group and ask advocates for further comments regarding each point.

Advocates will be asked to comment on:

- Working conditions, specifically pay and job insecurity – long-term career possibilities – fear of losing advocates.
- YAP training they received – not satisfactory for some – what are the issues?
- Quality of relationship with other related services with whom they work – can this be improved?
- Level of participation of the young person and family with the programme
- Wraparound meeting – issues around coordinating meetings early in case, what are the problems? Is the meeting effective? How?
- Individualised Service Plan – issues around available support structures and young person following the plan?
- Support structures – creation and maintenance issues/ do they last long term when client has finished with the programme?
- Ownership – have service users taken responsibility/control or is YAP taken advantage of? Babysitting service?
- Benefits to the young people – Is change evident? Long term/short term
- Negative consequences – over dependency, lack of support on programme completion, sense of abandonment by another service?
- Suggestions for improvements to the programme
- Any other issues regarding the programme/ model
- Value of programme in meeting the clients' needs.



**APPENDIX 3:**

**Children's Act Services Managers  
Info. regarding cases referred to YAP**

For each case you referred please, provide the following details

Case No.	Reason for Referral to YAP	Have you seen a positive change? Y or N		Current situation	Are you happy with the outcome in this case?
1					
2					
3					
4					
5					

### YOUTH PROFILE FROM YAP FILES

No	Age on entry	Sex	Living arrangements	At School	Alcohol Abuse	Drug Abuse	Criminal Activity	Court Appearance	Absent/Deceased Mother	Absent/Deceased Father	Learning Disability	Psychiatric Disorder	Physical Abuse	Sexual Abuse	No. of siblings	Ethnicity	Referred By
01																	
02																	
03																	
04																	
05																	
06																	
07																	
08																	
09																	
10																	
11																	
12																	
13																	
14																	
15																	
16																	
17																	
18																	
19																	
20																	
21																	
22																	
23																	
24																	
25																	
26																	
27																	
28																	
29																	
30																	

## RISK BEHAVIOUR QUESTIONNAIRE<sup>32</sup>

Have **YOU DONE** any of the following in the **LAST 12 MONTHS?**

**1. Not paid for the correct fare on a bus or train? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- |                  |                          |
|------------------|--------------------------|
| 1 to 2 times     | <input type="checkbox"/> |
| 3 to 5 times     | <input type="checkbox"/> |
| 6 to 9 times     | <input type="checkbox"/> |
| 10 or more times | <input type="checkbox"/> |

**2. Taken something from a shop or a store without paying for it? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- |                  |                          |
|------------------|--------------------------|
| 1 to 2 times     | <input type="checkbox"/> |
| 3 to 5 times     | <input type="checkbox"/> |
| 6 to 9 times     | <input type="checkbox"/> |
| 10 or more times | <input type="checkbox"/> |

**3. Behaved badly in a public place so that people complained or you got into trouble? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- |                  |                          |
|------------------|--------------------------|
| 1 to 2 times     | <input type="checkbox"/> |
| 3 to 5 times     | <input type="checkbox"/> |
| 6 to 9 times     | <input type="checkbox"/> |
| 10 or more times | <input type="checkbox"/> |

**4. Stolen or ridden in a stolen car or a van or on a stolen motorbike? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- |                  |                          |
|------------------|--------------------------|
| 1 to 2 times     | <input type="checkbox"/> |
| 3 to 5 times     | <input type="checkbox"/> |
| 6 to 9 times     | <input type="checkbox"/> |
| 10 or more times | <input type="checkbox"/> |

**5. Taken money or something else that did not belong to you from school? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- |                  |                          |
|------------------|--------------------------|
| 1 to 2 times     | <input type="checkbox"/> |
| 3 to 5 times     | <input type="checkbox"/> |
| 6 to 9 times     | <input type="checkbox"/> |
| 10 or more times | <input type="checkbox"/> |

---

<sup>32</sup> Based of questions from *Young People in Northern Ireland 2003* Questionnaire, by Andrew Percy

**6. Carried a knife or a weapon with you for protection or in case it was needed in a fight? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

**7. Deliberately damaged or destroyed property that did not belong to you (for example, windows, cars or streetlights)? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

**8. Broken into a house or building to steal something? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

**9. Written things or sprayed paint on property that did not belong to you (for example a phone box, car, building or bus shelter)? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

**10. Used force, threats or a weapon to get money or something else from somebody? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

**11. Taken money or something else that did not belong to you from your home without permission? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

**12. Deliberately set fire or tried to set fire to someone's property or a building (for example, a school)? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

**13. Hit, kicked or punched someone on purpose to hurt or injure them? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

**14. Broken into a car or van to steal something out of it? Y or N**

If Yes, how many times have you done this in the last year? (tick only one box)

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

**15. Have you smoked a cigarette in the last 12 months? Y or N**

A. If Yes, where do you usually get your cigarettes from? (tick as many boxes as you need)

- Older friends
- Younger friends
- Friends about my own age
- A brother or sister
- Your parents
- Buy them from a shop
- Got it from the house
- From somewhere else
- Please write in .....

**16. Have you tried alcohol in the last 12 months, even if it was just a sip ? (tick only one box)**

- Yes
- No
- Not Sure

**A. If Yes, do your parents allow you to drink alcohol? (tick as many boxes as you need)**

- Yes
- Yes – but only when I am with them
- No

**B. Where do you usually get your alcohol from? (tick as many boxes as you need)**

- Older friends
- Younger friends
- Friends about my own age
- A brother or sister
- Your parents
- Other relatives
- Buy it myself from a shop
- Get it from the house
- From somewhere else
- (Please write in).....

**17. Have you ever tried drugs? Y or N**

**A. If yes, which drugs have you tried?**

- a. Solvents
- b. Cannabis
- c. Magic mushrooms
- d. Ecstasy
- e. Speed
- f. Acid
- g. Cocaine
- h. Heroin
- i. Poppers
- j. Other drugs

**18. Have you ever had unprotected sex? Y or N**

**A. If yes, how many times have you had unprotected sex?**

- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

## BIBLIOGRAPHY

- Andrews, David W. & Dishion, Thomas J. (1995) 'Preventing Escalation in Problem Behaviours with High Risk Young Adolescents: Immediate 1 year outcomes' *Journal of Consulting & Clinical Psychology*, vol. 63, no. 4, 538-548.
- Aos, Steve, Phipps, Polly, Barnoski, Robert and Lieb, Roxanne, 2001. The Comparative Costs and Benefits of Programs to Reduce Crime, Washington: Washington Institute for Public Policy.
- Beinart, Sarah, Anderson, Barry, Lee, Stephanie and Utting David, 2002, 'A national survey of problem behaviour and associated risk and protective factors among young people', Findings Series, Joseph Rowntree Foundation.
- Best Health For Children (2000) 'Get Connected – Developing an Adolescent Friendly Health Service, National Conjoint Child Health Committee May 2001.
- Birleson P (1980) "Adolescent Well-being Scale", The validity of Depressive Disorder in Childhood and the Development of a Self-Rating Scale; a Research Report. *Journal of Child Psychology and Psychiatry*. 22: 73–88.
- Bowden, Matt and Higgins, Louise, 2000, 'The Impact and Effectiveness Of the Garda Special Projects', The Children's Research Centre, Trinity College, Dublin.
- Brown, Monica, 2003, 'Helping Children Feel They Belong; A Guide to Good Practice in Community-based Prevention & Support Work with Children and Young People at Risk of Educational Disadvantage', Children's Research Centre, Trinity College Dublin.
- Cameron, Gary and Karabanow, Jeff (2003) 'The Nature and Effectiveness of Program Models for Adolescents at Risk of Entering the Formal Child Protection System' *Child Welfare League of America*, Vol LXXXI1 (4) July/August 2003, pp 443- 469.
- Canavan, John, 1992, 'Western Health Board Neighbourhood Youth Project Interim Evaluation Report 18-12-92'.
- Canavan, John, 1998 'The North Mayo Schools Project: A Blueprint For Supporting Young People in School', Foroige, National Youth Development Organisation.
- Canavan, John, Dolan, Pat and Pinkerton, John (eds.) 2000, Family Support: Direction from Diversity, Jessica Kingsley Publishers, London.
- Children First: National Guidelines for the Protection and Welfare of Children, Dublin, The Stationary Office.
- Commission On the Family, 1999. Strengthening Families for Life, Final report, Dublin Stationary Office.
- Cutrona, C.E. and Russell, D, 1987, "Social Network Questionnaire", The provisions of social relationships and adaptation to stress. In W.H. Jones & D. Perlman (Eds.), Advances in personal relationships (Vol. 1, pp. 37-67). Greenwich, Conn.: JAI Pres
- Cutrona, C.E. and Russell, D, 1987; Dolan P. in paper, "Social Provisions Scale", Family Support for Reflective Practitioner, Jessica Kingsley Publishers, UK.
- Dahlberg, Linda L, Potter, Lloyd B, 2001, 'Youth Violence; Developmental Pathways and Prevention Challenges', *American Journal of Preventative Medicine*, Volume 20, No. 1s.



- Dillane, Jennifer, Hill, Malcolm, Bannister, Jon & Scott, Suzie, 'Evaluation Of Dundee Families Project', Centre for the Child & Society & Department of Urban Studies, University of Glasgow, 2001.
- Dolan, Pat, 1998, 'Delinquency in Adolescence; Accessing Real Solutions' in *Preventing Offending; A Stake in Civic Society*, Irish Association for the Study of Delinquency Conference report, 6-7 November, 1998.
- Dolan, Pat, & Holt, Stephanie, 2002, 'What Families Want in Family Support' in *Childcare in Practice, Vol. 8, No.4. 2002*.
- Durlak, Joseph A. 1995, School-Based Prevention Programs for Children and Adolescents, Sage Publications, California.
- Farrington, David, 1996, 'Understanding and Preventing Youth Crime', *Findings*, Social Policy Research 93, April 1996.
- Farrington, DP and Welsh, BC, 2003. 'Family-based prevention of offending: A meta-analysis', *Australian and New Zealand Journal of Criminology*, Vol.36, No.2, pp.127-151.
- Fleisher, Geoff, 2002, YAP Presentation.
- France, Alan, 2000, 'Youth Researching Youth: The Triumph and Success Peer Research Project', Youth Work Press and Joseph Rowntree Foundation, Leicester.
- Gatti, Uberto, Tremblay, Richard E. and Larocque, Denis (2003) 'Civic Community and Juvenile Delinquency. A Study of the Regions of Italy', *The British Journal of Criminology*, 43 (1) PP 22-40.
- Goodman, R, 1997, "The Strengths and Difficulties Questionnaire: A Research Note", *Journal of Child Psychology and Psychiatry*, Volume 38, No. 5, pp 581-586.
- Ireland (2001), *The Children Act 2001*, Dublin Stationary Office.
- Ireland (1991), *The Child Care Act 1991*, Dublin Stationary Office.
- Ireland (1998), *The Data Protection Act, 1998*, Dublin Stationary Office.
- Ireland (1998), *The Education Act, 1998*, Dublin Stationary Office.
- Ireland (2000), *The Education (Welfare) Act, 2000*, Dublin Stationary Office.
- Ireland (1988), *The Freedom of Information Act, 1988*, Dublin Stationary Office.
- Ireland (2001), *The Health Strategy, 2001*, Dublin Stationary Office.
- Ireland (2001) *Irish Prisons Annual Report, 2002*, Dublin Stationary Office.
- Ireland (2001), *The Youth Work Act 2001*, Dublin Stationary Office.
- Jenkins, Patricia H. & Welsh, Wayne N (2003) 'Neighbourhood –Based Prevention/Intervention: A Process Evaluation of a Risk-Focused Approach', *Children and Youth Service Review*, Vol. 25, No.4, pp. 327 - 351.
- Kamradht, B (2000) 'Wraparound Milwaukee: Aiding Youth with Mental Needs', *Juvenile Justice*, 7 (1), 14 – 23.

Laxton, Mike, 1998, 'A Report on the Requirement and Necessity for Special Care and High Support Residential Child Care Provision in Ireland'.

Little, Michael & Mount, Kevin, 1999, Prevention and Early Intervention With Children in Need, Ashgate Publishing Limited, England.

Marshall, T.F. (1999) 'Restorative Justice: An Overview', London, [www.homeoffice.gov.uk/rds/pdfs/occ-resjus.pdf](http://www.homeoffice.gov.uk/rds/pdfs/occ-resjus.pdf).

McKeown, Kieran, 2001 a, *Springboard; Promoting Family Well-Being through Family Support services*, Social and Economic Research Consultants, Drumcondra.

McKeown, Kieran, 2001 b, *Family Well-being and Family Policy; A Review of research on Benefits and Cost, Social & Economic Research consultants*, Drumcondra.

MacKinnon–Lewis, Carol, Kaufman, Martha C and Fraubutt, James M (2002) 'Juvenile Justice and Mental Health: Youth and Families in the Middle', *Aggression and Violent Behaviour*, 7, pp 353 – 363.

McGill, Dagmar, 1997 *Blueprints For Violence Prevention; Book 2 Big Brothers Big Sisters Of America*, C & M Press, Denver, Colorado, Institute of Behavioural Science, Regents of the University of Colorado.

McSkeane, Liz 2000, 'Report on the Youth Work Component of the Second Level Support Project in Presentation Convent Tuam, Vocational School Tuam, September 1999/June 2000', Standard Printing, Ballybrit, Galway.

Moore, David & Forsythe, Lubica & O'Connell, Terry, 1995, 'A New Approach to Juvenile Justice: An Evaluation of Family Conferencing in Wagga Wagga', Criminology Research Council, [www.aic.gov.au/crc/reports/moore/](http://www.aic.gov.au/crc/reports/moore/).

National Children's Strategy, 2000, Report of the Public Consultation, September, Dublin, Department of Health and Children.

O'Connor, Michael, E, 1998, 'What Works With Juvenile Offenders?', Children, Young People & Crime in Ireland: From Exclusion to Inclusion, [www.scotland.gov.uk/cru/kdol/crime\\_16.htm](http://www.scotland.gov.uk/cru/kdol/crime_16.htm).

O'Dwyer, Kieran 2001, 'Restorative Justice Initiatives In the Garda Siochana; Evaluation of the Pilot Programme', Garda Research Unit, 2001.

O'Mahony, Paul (ed) 2002 Criminal Justice in Ireland, Dublin, IPA.

O'Mahony, Paul, 1998, 'A Brief Overview of Juvenile Justice in Ireland', *Children, Young People and Crime in Britain and Ireland*, Scottish Executive, <http://www.scotland.gov.uk/cru/kd01/crime-26.htm>.

Patrick, Steven, Marsh, Robert, Bundy, Wade, Mimura, Susan and Perkins, Tina (2003) 'Control Group Study of Juvenile Diversion Programmes: An Experiment in Juvenile Diversion – the Comparison of Three Methods and a Control Group', *The Social Science Journal*, Volume 41, Issue 1, pp 129 – 135.

Percy, Andrew, 2003, "Young People in Northern Ireland Questionnaire", Centre for Childcare Research, Queens University, Belfast.

Powell, Fred, 1995, 'Deconstructing Juvenile Justice: A Postmodern Policy Dilemma', *Administration*, Vol. 43, no. 1 (Spring 1995) 36-56.

Redding, Richard, 2000, 'Characteristics Of Effective Treatments and Interventions For Juvenile Offenders', [www.ilppp.virginia.edu/juvenile\\_forensic\\_fact\\_sheet/chareffreat.html](http://www.ilppp.virginia.edu/juvenile_forensic_fact_sheet/chareffreat.html).

Rutter, M, Giller, H & Hagell, A (1998) Antisocial Behaviour By Young People. Cambridge: Cambridge University Press.

Schiff, Maria F. 1998, 'Restorative Justice Interventions for Juvenile Offenders: A Research Agenda for the Next Decade', Western Criminology Review, <http://wcr.sonoma.edu/v1n1/schiff.html>.

Scottish Executive, 2002, 'Growing Support; A Review of Services for Vulnerable Families with Very Young Children', Crown Copyright.

Social Information Systems, 2003, 'Definition and Usage of High Support in Ireland; Report to the Special Residential Services Board, April 2003.

Statham, June & Eisenstadt, 2001, 'The Sure Start Programme in the United Kingdom', Family Matters No.59 Winter, Australian Institute of Family Studies.

Tyler, Jerry, Darville, Ray and Stalnaker, Kathi (2001) 'Juvenile Boot Camps: A Descriptive Analysis of Program Diversity and Effectiveness', *The Social Science Journal*, 38(2001) 445 – 460.

Utting, David, 2000, 'Component Parts For Effective Interventions', *Breaking Through; An All-Ireland Network to Promote Effective Interventions with Young People at Risk*, The Journal, Vol. 2.

U.N. Convention on the Rights of a Child, 1990

Vermeiren, Robert, 2003 'Psychopathology and Delinquency in Adolescents: A Descriptive and Developmental Perspective', *Clinical Psychology Review* 23 (2003) 277-318.

Warren, Audrey, 2001, *Study of Participants in Garda Special Projects*, Social and Educational Research DIT, Department Justice, Equality and Law Reform, 2001

Wasserman, Gail A., Keenan, Kate, Tremblay, Richard E., Coie, John D., Herrenkohl, Todd I., Loeber, Rolf and Petechuk, David, 2003. 'Risk and Protective Factors of Child Delinquency', *Child Delinquency Bulletin Series* April 2003, United States Office of Juvenile Justice and Delinquency Prevention.

Western Health Board, 2001a, Review of Adequacy of Child Care and Family Support Services.

Western Health Board 2001b, 'Child & Family Care Five Year Strategy 2001-2005'.

Wright, John Paul, Cullen, Francis T, Miller, Jeremy T, 2001, 'Family Social Capital and Delinquent Involvement', *Journal of Criminal Justice*, 29 (2001) 1-9.

[www.garda.ie/angarda/juveniles.html](http://www.garda.ie/angarda/juveniles.html)

[www.foroige.ie/services\\_garda.html](http://www.foroige.ie/services_garda.html)

[www.oasis.gov.ie/justice/prison.com](http://www.oasis.gov.ie/justice/prison.com)

[www.youthreach.ie/aatopmenu/Library/YR2K](http://www.youthreach.ie/aatopmenu/Library/YR2K)

Youth Advocacy Programme and Western Health Board Service Agreement, 2002.

