

IDAHO DEPARTMENT OF HEALTH AND WELFARE
REGION 1

COMMUNITY RESOURCES FOR FAMILIES PROGRAM

Program Evaluation Report

2000-2001

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THE COMMUNITY RESOURCES FOR FAMILIES PROGRAM

Region 1 Program Effectiveness Evaluation, 2000-2001

Executive Summary

The Community Resources for Families Program is a collaborative, school-based program between the Idaho Department of Health and Welfare and individual school districts throughout the state of Idaho. The program was begun in 1993 as a way of supporting the physical and emotional safety needs of children in the Boise, Idaho school district. By 2000, it had expanded to include 90 school districts throughout the state.

The Community Resources for Families Program centers around Community Resource Workers (CRW's), social workers who are hired by school districts under a collaborative funding scheme sponsored by the Idaho Department of Health and Welfare. These CRW's are co-located in schools, where they work with school principals, counselors, and teachers to first identify and then connect with children who display evidence of physical or emotional needs arising outside of the school environment. The CRW's are licensed social workers who possess the ability to work closely with families to resolve issues that threaten the safety or learning readiness of children. A great deal of the CRW's time is spent working with families or helping families connect with community resources to support the needs of family members.

A unique aspect of the Community Resources for Families program is its ability to access Emergency Assistance funding to support families during the 90-day assistance period. Although the total amount of dollars spent on any one family is minimal - the average across the state has been about \$680 per family per year - the impact of the money is significant: Families are supported in choosing areas they need most immediately to improve, and then in learning how to continue those and other improvements on their own at the end of the 90-day service.

A program effectiveness evaluation was undertaken in Region 1 to assess the ability of this program to achieve its stated goals, namely:

1. Increase the safety and well-being of children
2. Increase the school readiness of children
3. Increase the self-reliance of families.

To accomplish the evaluation, 82 families were chosen from about 1250 Region-wide and were contacted by CRW's to obtain a signed consent to participate in the study. Data were subsequently collected from parent/guardian interviews; teacher, principal, or counselor interviews, case file analysis, and from CRW's evaluations of client progress. Data from this study support the following findings:

Finding 1. The families in the study sample were for the most part two-parent families with one or both of the parents working but still making less than \$16,000 per year. The families have on average 3 children who are experiencing difficulties being successful in school due to family living situations rather than learning difficulties. 73% of the families in this sample have not received financial assistance prior to being referred to the program, and their needs have accumulated to include basic living needs such as housing, food, and clothing, in addition to family support needs such as medicine, transportation, and counseling.

Finding 2. The overall picture of increases in child safety and well-being after referral to the program is one of an increased safety net for children. The families in this sample display an increased ability to help their children participate in school and community activities, as well as increased ability to meet the basic physical and emotional needs of children. In addition, the

families themselves became more connected to community agencies as a result of service, and continued this connection after the end of service. Thus, the physical and emotional needs of children could be met in ways that previously had not been available.

Finding 3. Data collected from CRW 's and principals, school counselors, and teachers indicate that the Community Resources for Families program strongly impacted school readiness. Students who were referred for specific school problems were judged by school personnel to have overcome those problems more than 87% of the time, with 91% of the students being judged by administrators/counselors as having an increased chance of being successful in the future. Additionally, principals/counselors estimated that 50% of the student referred would have become special education referrals had not the intervention occurred. Extrapolating this sample percentage to Region 1 as a whole indicates a savings of up to \$1.25 million.

Finding 4. Data from the sample used for this study indicate that sample families achieved positive outcomes in terms of increasing self-reliance around providing for the basic living and emotional needs of their children. 77% of those families referred for employment purposes increased their employment during or after service, and 94% of those families needing housing or housing improvements accomplished that goal. In addition, 94% of those families without health insurance applied for and received insurance either during or after service. In addition, the made showed significant difference pre-post in the social networks they could access.

These finding lead to the following **study conclusions**:

1. Child safety is actively promoted by the Community Resources for Families Program through its integration in the school setting, where school personnel make appropriate referrals for children who are under-performing in school due to environmental influences. Many of the referral reasons relate to getting the basic physical and emotional needs of children met, and data supports the conclusion that the program is successful in helping families learn to provide for these needs.

2. School Readiness is another program goal being met by this program. 87% of the students referred to the program for academic, behavior, or attendance issues were evaluated by school personnel as having made successful progress as a result of the program.

School personnel also highly rated the program in a) its general ability to support children in successful learning, and b) that children had a better chance of being successful this year in school as a result of the program. 50% of school personnel (n=37) declared that the referred child would have needed special education or special needs support in the future if this program had not helped their families improve living conditions. Extrapolation of this data from the sample to the population indicates a potential savings of \$1.25 million in special education costs.

3. The final goal of this program in to increase the self-reliance of families. A wide variety of evidence shows that families in this program learned to make community connections to support their own needs in areas of health, employment, housing and medical needs, along with others.

Self-reliance for this program, according to the data, is more than families learning to make community contacts to receive services. It is also about recognizing the need for different types of services to help children be healthy and safe. Data shows that parents contacted a variety of community agencies (average: more than 5 contacts per family after service in addition to 13 contacts during service) to support both the physical and emotional needs of children. In addition, families helped children participate in community or school activities in which they had not previously been involved. The data from this study suggests that this program model has a strong effect on increasing the self-reliance of families.

Idaho Department of Health and Welfare

Community Resources for Families Program

Region 1 2000-2001 Evaluation Report

INTRODUCTION

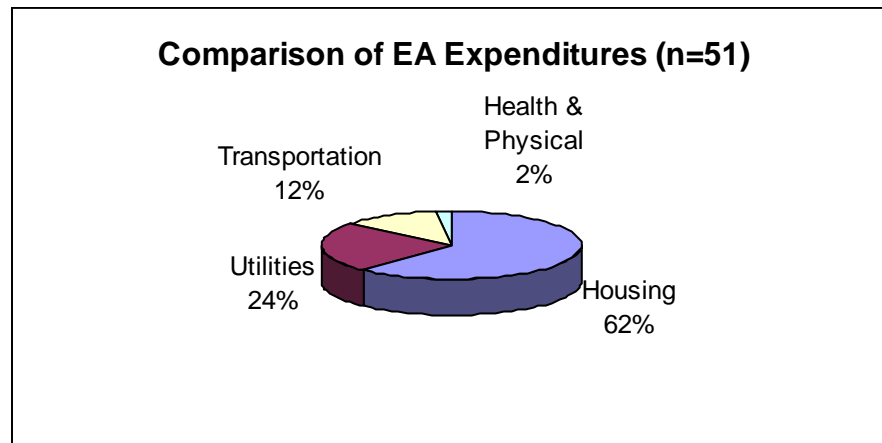
The Community Resources for Families Program was a collaborative, school-based program between the Idaho Department of Health and Welfare and individual school districts throughout the Region 1 in the state of Idaho. The program was begun in 1993 as a way of supporting the physical and emotional safety needs of children in the Boise, Idaho school district. It expanded to include 90 school districts throughout the state. From 1999-2001 the program served 12 school districts in Region 1 including 52 schools.

The Community Resources for Families Program centered on Community Resource Workers (CRW's), social workers who were hired by school districts under a collaborative funding scheme sponsored by the Idaho Department of Health and Welfare. Throughout the region, 16 CRW's and 4 Interns were co-located in schools, where they worked with school principals, counselors, and teachers to first identify and then connect with children who displayed evidence of physical or emotional needs arising outside of the school environment. The CRW's either held master's degrees in social work, psychology or counseling, or were licensed social workers in Idaho. They possessed the ability to work closely with families to resolve issues that threatened the safety or learning readiness of children.

Two types of intervention services were performed: a) Assessment and Referral Services (A & R services), and b) Emergency Assistance Services (EA services). Families were first referred for A & R services. This was a 30-day intervention designed to assess family needs, refer and assist in connecting the family with community and school resources. During A & R services a great deal of the CRW's time was spent helping families connect with community resources to support the needs of family members. In this ecologically intensive intervention program, the professionals helped families locate sources of support to fill their family needs on an individual basis. In Region 1 approximately 1250 families received A & R services.

As needed, EA services provided an additional 90-day intervention with the family. During this phase of service actual dollars were provided to assist the family with needs. This unique aspect of the Community Resources for Families program allowed CRW's the ability to access Emergency Assistance funding to support families during the 90-day period. Although the total amount of dollars spent on any one family was minimal - the average across Region 1 was \$716 per family per year - the impact of the money was significant. Families were supported in identifying areas they needed most immediately to improve, and then in learning how to continue those and other improvements on their own after the end of the 90-day service. In Region 1 approximately 55 families received EA services with 51 families actually receiving funding. The chart below depicts how families utilized the funding primarily for housing needs.

Chart 1. Comparison of Emergency Assistance Expenditures



A program effectiveness evaluation was undertaken to assess the ability of this program to achieve its stated goals, namely:

1. Increase the safety and well-being of children
2. Increase the school readiness of children
3. Increase the self-reliance of families.

To accomplish the evaluation, 82 families who received either A& R or A& R and EA services were chosen from Region 1 caseloads and were contacted by CRW's to obtain a signed consent to participate in the study. Data were subsequently collected from parent/guardian interviews, teacher, principal, or counselor interviews, case file analysis, and from CRW's evaluations of client progress. In addition, a family resource instrument named the Eco-Map Planning and Assessment Tool was developed and used to track a key family variable - support systems available to families before and after services. This tool, combined with parents' reports of contacts and their reports of comfort in making future contacts, provided a family-orientated approach to evaluating services.

This report will describe the data collected from this sample, and analyze that data to determine the extent to which the Community Resources for Families Program met the program goals. The report will proceed in Part I by describing the sample family characteristics. Part II presents evaluation findings by asking study questions around each of the program goals, and then in Part III by asking study questions of each of the three goal areas. Part III will present the findings from data analysis, and Part IV will describe the study conclusion resulting from data analysis.

PART 1: DESCRIPTION OF THE SAMPLE

The sample for this outcome study was composed of 82 individual family cases selected from the caseloads of CRW's across Region 1. The sample represents approximately 7% of total number of families receiving services in Region 1. 40% of the families in the sample received EA services as compared to 5% of families receiving EA services Region wide. Therefore, the evaluation findings for these families may not be accurate representations of the larger client population. However, the sample represents 60% of the population receiving EA services; therefore evaluation findings may be more representative of the EA population region wide than of the total population.

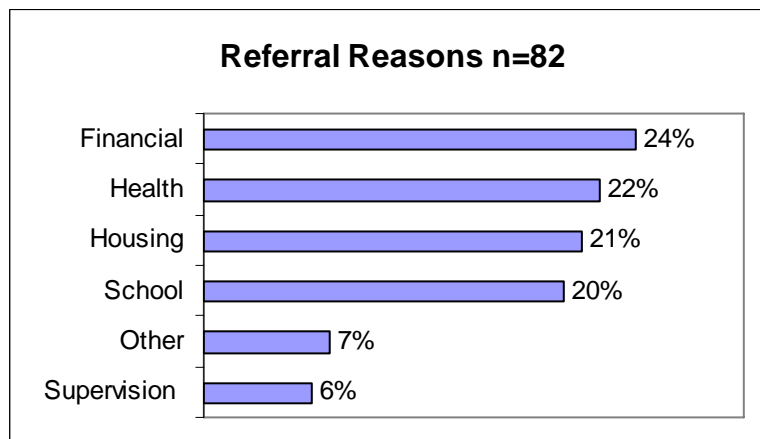
The following statements and charts describe the sample.

1. Family Characteristics:

- 53% of the families were two-parent families or families with two adults in the home.
- 41% the families were single parents.
- 68% of the families surveyed earned less than \$15,480 per year.
- 21% of the families earned less than \$5000 per year.
- Families averaged 2.5 children per family.
- 27% of the families had received Temporary Assistance for Needy Families (TANF) before being referred to the program.
- In spite of extremely low family incomes, 73% of the families in this study had not previously received financial support from state or federal funds prior to referral.
- 48% of the families had experienced a CPS referral prior to services.

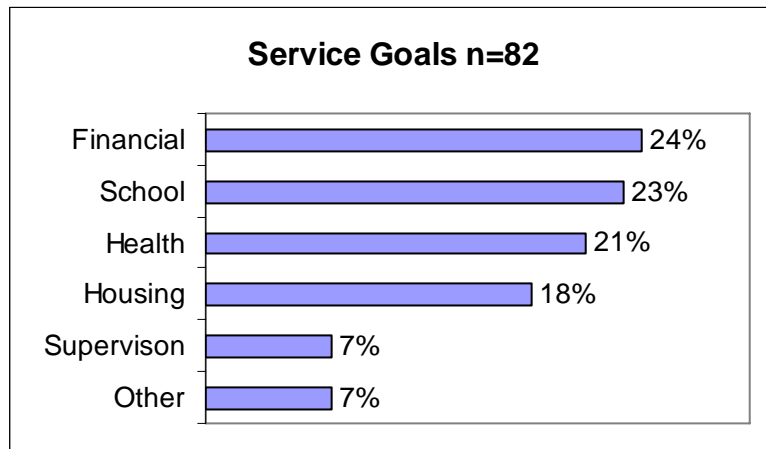
2. Referral Reasons for Sample Families: Referrals to the Community Resources program were categorized into eight major areas. The results show that the number one referral reason was financial, which included money management and budgeting, utilities, household items, employment and transportation. Health and physical concerns, including clothing, hygiene, medical/not covered by Medicaid, lice, food, counseling, suicide, depression and substance use/abuse, was the second highest referral reason. Housing needs, including rent, deposit and homelessness, followed in third place. For the sample study, three school referral reasons (behavior, attendance and academic performance) were aggregated into one category. The aggregated school reasons represented 20% of the referral reasons. Supervision and care issues included parenting, daycare, safety, domestic violence and custody issues.

Chart 2. Referral Reasons. (n=82)



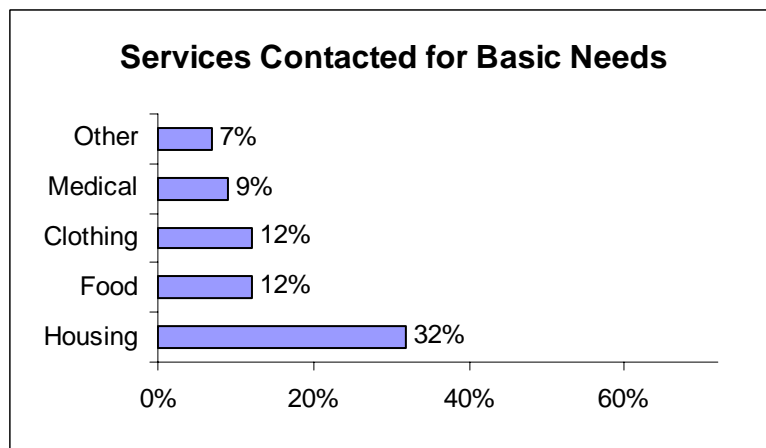
3. Service Goals Set for Sample Families: Service goals were set for each of the families as they entered the program. The following chart illustrates the most common goals set for the families in this sample. In this chart, school performance as a category includes attendance concerns, behavior concerns, and low grades.

Chart 3. Service Goals. (n=82)



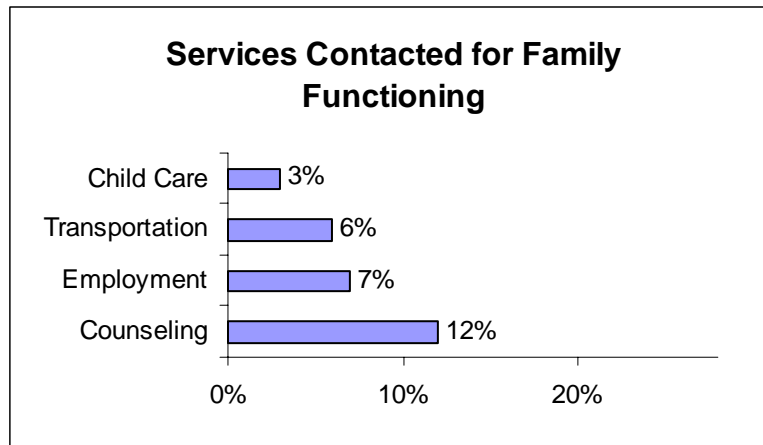
4. Types of Services or Agencies Contacted: One final way of illustrating the families served in this sample is by showing the types of services or agencies that families contacted as a result of working with the CRW's during the service period. These services were tightly aligned with needs identified by the CRW's as they began working with the families around the goals that had been set. The types of services are grouped into two categories. 1.) Services contacted for basic needs, and 2.) Services contacted to help the family function as a unit. 72% of families contacted services or agencies to assist with basic needs such as food, housing, clothing and medical. The chart below shows the percentage of sample families who connected with agencies for basic needs.

Chart 4. Types of Basic Need Services Contacted by Sample Families. (n=82)



The second category of services needed by the sample families represents services that help a family function as a family unit, such as employment, counseling for family members, childcare and transportation to and from work or medical services. 28% of total family needs involved contacting services or agencies to assist with family functioning. The percent of sample families contacting such services is shown below.

Chart 5. Types of Services for Family Functioning Contacted by Sample Families. (n=82)



Summary Profile of Families in the Study Sample

The data above indicate that the families in the study sample were for the most part:

- **Two-parent families or with two adults in the home**
- **Making less than \$16,000 per year**
- **Averaging 2.5 children who were experiencing difficulties being successful in school due to family living situations rather than learning difficulties**
- **In need of basic support include basic living needs such as housing, food, and clothing, in addition to family support needs such as medicine, transportation, and counseling.**
- **Families with a previous CPS referral (48%).**
- **Families who had not received TANF before being referred to the program (73%).**

PART 2: EVALUATION FINDINGS

This study evaluated the effectiveness of the Community Resources for Families Program by looking at outcomes achieved by a sample of families served during the 2000-2001 program year. Below, the findings of the investigation are described in light of the questions posed around the program goals.

Evaluation Question #1: To what degree has the program been successful in helping sample families gain, sustain, or increase a climate of safety for their children?

To answer this question, the study looked at six measures related to child safety and well-being.

- How the CRW's had rated the family at the end of service in terms of child safety outcomes.
- How many of the sample families had received a CPS referral since service.
- The family's access to medical insurance.
- The extent to which children became connected to activities in school
- The extent to which children became connected to activities in the community.
- The parent's perception of their comfort in contacting agencies and services aligned with child safety.

A. Outcome Measures as Rated by CRW Case Worker

Individual CRW's were asked to rate the level of outcome achievement of families they worked with on three indicators: Child Safety; Family Self-Reliance, and School Readiness. The following table indicates that CRW's across Region 1 rated increases in child safety as being high for all families involved in the sample (average 2.75 out of 3). Families who were referred for an additional 90 days of services were rated somewhat higher (2.86) at the end of services. Families for whom there was a previous or subsequent CPS referral were rated somewhat lower (2.61) than other families, reflecting the ability of the CRW's to discriminate in the measure used for the rating.

Table 1. Measurement of Child Safety.

Category of Family Rating	Outcome Mean Rating (3=high)	Standard Deviation
Total Sample (n=64)	2.75	0.59
Families Receiving EA Services (n=29)	2.86	0.35
Families with previous or subsequent CPS referral (n=32)	2.61	0.55

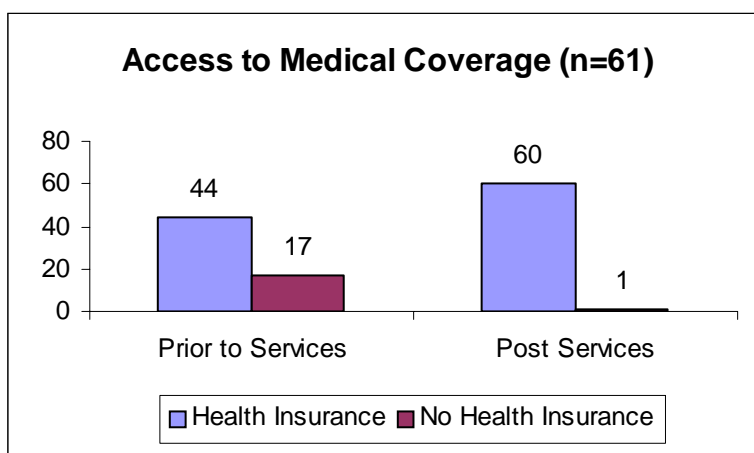
B. Number of Families Receiving Previous or Subsequent CPS Referrals

Out of a sample of 81 families who had received either A&R or A&R and EA services, 39 of the families, or 48%, had received a previous referral to CPS. Between the end of service and Sept. 1, 2001, CPS referrals in the sample had dropped to 19%. For this sample, the end of service was variable; some families continued to receive services up to June 01, while others received their last services in Dec. 00.

C. Family Access to Medical Services

Another measurement of child well-being used in this study was the access children had to medical treatment as part of their family experience. Out of a sample of 61 families, 72% had access to health insurance at the beginning of services. By the end of service, 98% of the families in the sample had access to health insurance. The chart below depicts the number of families in the sample who gained access to medical treatment as a result of services.

Chart 6. Comparison of Family Access to Medical Care



D. Family Connections to Community Agencies

Another measure of child safety and well-being comes from the types of connections families were able to make with community agencies to get family needs met. For this study, data was collected from parents as to the types of community connections made as a result of services. In terms of community contacts, sample families made almost 5 community contacts each during the time they received services or between the end of service and the end of the school year. By aggregating childcare, counseling and medical connections, 24% of the connections made by families as a result of services related to child safety and well-being.

E. Connections to Community/School Activities

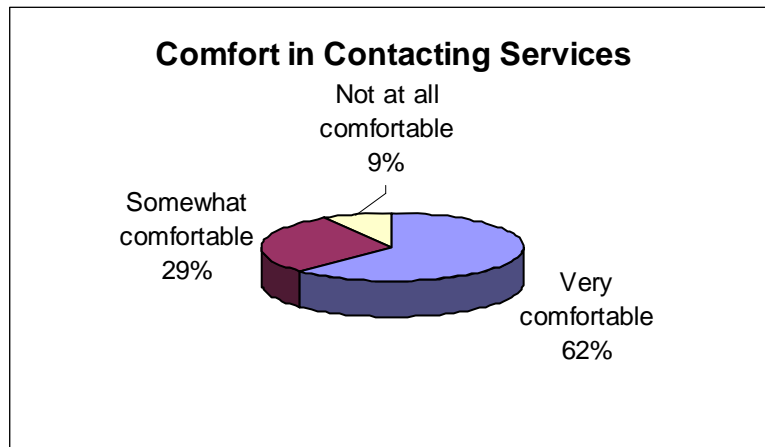
Children referred to the CRW program typically have few connections to school or community activities as a part of their routine life activities. A measure of child safety and well-being for this study was the extent to which referred children became involved in activities outside of the school day that they had previously not been involved in. 38% of the parents and guardians indicated that as a result of working with the CRW's their children participated in an activity at school or in the community that they hadn't participated in before. Activities included roller-skating, breakfast club, violin lessons, volunteering, Exploring, school sports and fund raising activities, counseling, mentoring program, church concert, holiday parties, and Little League.

F. Parent Perception of Comfort in Contacting Community Agencies

Family experiences and perceptions were seen as important factors that mediate future responses and outcomes to crisis. Parents were asked how comfortable they would feel in contacting again those services and agencies which impact child safety and well-being. The chart below depicts the sample families' responses. 91% of the families reported that they would feel somewhat to

very comfortable in contacting again those services that are aligned with child safety and well-being.

Chart 7. Comfort in Contacting Services Related to Child Safety and Well-Being (n=53)



Summary of Child Safety and Well-Being Measures

The overall picture of increases in child safety and well-being as a result of referral to and services from the CRW program is one of an increased safety net for children. The families in this sample displayed:

- an increased ability to help their children participate in school and community activities.
- an increased ability to meet the basic physical and emotional needs of children.
- an increased connectedness to community agencies.
- continued connection to community agencies after the end of service.

Study Question #2: To what extent did the Community Resources for Families program increase school readiness among children served by the program?

To answer this question, the study looked at five measures related to promoting school readiness.

- CRW rating of the family at the end of service in terms of child school readiness outcomes.
- Ratings obtained from interviewing school teachers, principals, and counselors on the progress made by children in the areas of academics, attendance and behavior, improved contact with parent or guardian.
- Ratings obtained from interviewing school teachers, principals, and counselors on the overall effectiveness of the program in supporting children toward school success.
- Ratings obtained from interviewing parents on their increased connection with school personnel.
- Increased social networking between students, parents, school and community as reported by CRW's.

A. Outcome Measures as Rated by CRW Case Workers

Individual CRW's were asked to rate the level of outcome achievement of families they worked with on three indicators: Child Safety; Family Self-Reliance, and School Readiness. An analysis of the CRW case files indicates that increases in school readiness was an outcome achieved by a majority of families in the sample. The table below shows that CRW's rated achievement of school readiness outcomes as around 2.6 or higher out of a possible 3, with the exception of families who had a previous or subsequent CPS referral. Families with previous or subsequent CPS referrals included families who received either A&R or A&R and EA services. Families who received EA services of an additional 90 days were rated somewhat higher (2.79) at the end of services.

Table 2. Measurement of School Readiness.

Rating Categories	Outcome Mean Rating (3=high)	Standard Deviation
Total Sample Families (n=64)	2.63	.52
Families Receiving EA Services (n=29)	2.79	.41
Sample Families who received a subsequent CPS referral (n=32)	2.56	.50

B. Interviews with School Personnel

School personnel were interviewed to collect data about the progress made by individual client children, and to collect perceptions about the overall ability of the program to impact children. The first measure relates to children who had been referred to the program for specific reasons such as grades, attendance, school behavior and lack of parent/guardian contact with the school. The second measure relates to the teachers' perception of general student performance as influenced by their participation in the AR and EA services. The table below shows the questions and results for students referred to the program for Low Grades, and indicates that 1/3rd of children referred for low grades were doing acceptable work at the time of the rating.

Table 3. Students Referred for Low Grades.

Data Category: Low Grades (n=63)	Percent of Cases
Were low grades a referral issue or did they become an issue during service?	Yes = 29%
If yes, was there an improvement after service?	Yes = 39%
If low grades were a concern, is this student achieving at an acceptable level at this time?	Yes = 33%

The next table shows the disposition of children referred to the program for attendance reasons. The program appears to have had a positive impact on attendance, in that 61% of children referred to the program for attendance reasons made improvement after service, and 66% of those students maintained their improvements through the end of the school year, when the ratings were done.

Table 4. Students Referred for Attendance Problems.

Data Category: Attendance (n=65)	Percent of Cases
Was attendance a referral reason or did it become an issue during service?	Yes = 28%
If yes, was there an improvement after services were provided?	Yes = 61%
If attendance was a concern, is this student's attendance acceptable at this time?	Yes = 66%

Students were also rated on their improvements in school behavior as a result of service. The table below indicates that 82% of children referred for behavior made improvements, and that those improvements continued for 36% of those children.

Table 5. Students Referred for Behavior Problems.

Data Category: School Behavior (n=64)	Percent of Cases
Was poor behavior a referral reason or did it become an issue during service?	Yes=34%
If yes, was there an improvement in behavior after services were provided?	Yes=82%
If behavior was a concern, is this student's behavior acceptable at this time?	Yes=36%

Teachers rated parents/guardians on their improved contact with the school during services. The table below indicates that 40% of the children referred for lack of appropriate parent/guardian contact with school personnel made improvements in that area, and that those improvements continued for 33% of those parents.

Table 6. Students Referred for Lack of Parent/Guardian Contact with School.

Data Category: Lack of Parent/Guardian Contact (n=40)	Percent of Cases
Was lack of contact with parent/guardian a referral reason or did it become an issue during service?	Yes=38%
If yes, was there an improvement in parent/guardian contact after services were provided?	Yes=40%
If lack of parent/guardian contact was a concern, is the parent contact acceptable at this time?	Yes=33%

School personnel (principals, teachers, counselors) were also asked to rate the overall program effectiveness in supporting client children toward school success. The table below indicates that school personnel rated the program at 3.73 out of a possible 5 in terms of supporting children. In 87% of the cases, school personnel agreed to strongly agreed that the intervention had successfully supported the child in improving or maintaining school performance. In 91% of the cases, school personnel agreed to strongly agreed that as a result of the intervention, the particular student had an improved chance of being successful in school this year.

Table 7. Effectiveness of Intervention on Improving/Maintaining School Performance.

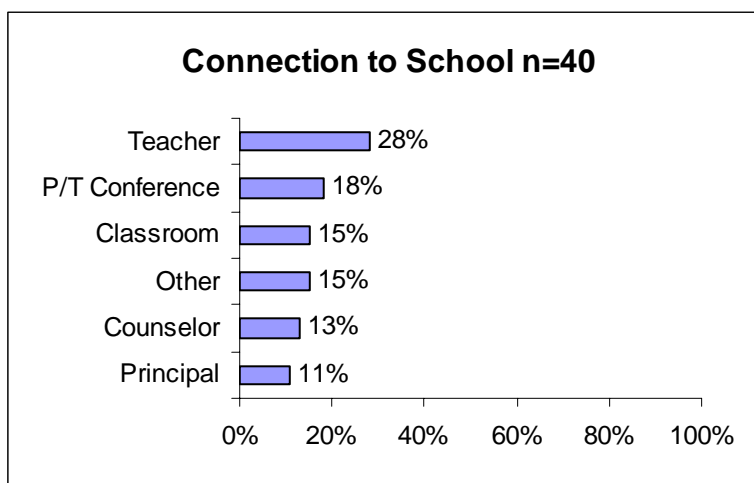
Interview Statement	Mean level of Response (5=strongly agree)	Standard Deviation
The 90-day intervention successfully supported this child in improving or maintaining school performance. (n=64)	3.73	1.32
As a result of the intervention, this student has an improved chance of being successful in school this year. (n=64)	3.78	1.29

An interview question asked school personnel the likelihood that individual children would have required special education services or special needs funding in the future if the program had not been able to serve these children. Complete data for this question was available for 37 cases. On 50% of the cases, school personnel indicated that they agreed to strongly agreed that special education or special needs funds would have been required to support the student if the intervention had not occurred.

C. Increased Connection Between Parents and School Personnel

Parents were interviewed as to any increase in their connection to their child's school as a result of working with the CRW. In addition, they were asked to list what connections were made. 92% of the sample families indicated that as a result working with the CRW they had contacted their child's school and met with teachers, counselors, principals, or school secretaries. In addition they had visited their children's classrooms and attended parent/teacher conferences. The chart below depicts those connections.

Chart 8. Self-reported Connections to School (n=40).



Summary of School Readiness Measures:

Data indicates that the Community Resources Program strongly impacted school readiness. School personnel indicated that:

- **In 87% of the cases, the intervention had successfully supported the child in improving or maintaining school performance.**
- **In 91% of the cases, the student had an improved chance of being successful in school this year.**
- **In 50% of the cases, if the intervention had not occurred, special education or special funds would have become necessary to support the student.**
- **They agreed with the CRW's evaluation of increased school readiness of client children.**
- **The program was highly effective in supporting children for specific concerns.**
- **The program had the ability to improve the chances of school success for referred children.**

Study Question #3: To what extent did the Community Resources for Families program increase the self-reliance of families who are referred to the program and who received support from the CRW's?

To answer this question, the study looked at four measures related to increasing self-reliance.

- CRW ratings of the family at the end of service in terms of increasing self-reliance.
- Increases in i.) employment, ii.) increases and/or upgrading of housing facilities, and iii.) increases in health insurance among client families as reported by parents.
- The number of community agencies contacted by clients during and after services as reported by parents.
- Parent perception of comfort in contacting those services again for assistance.

A. Outcome Measures as Rated by CRW Case Workers

Individual CRW's were asked to rate the level of outcome achievement of families they worked with on three indicators: Child Safety; Family Self-Reliance, and School Readiness. An analysis of the CRW case files indicates that increases in self-reliance was an outcome achieved by a majority of families in the sample. The table below shows that CRW's rated achievement of school readiness outcomes as around 2.70 or higher out of a possible 3, with the exception of families who had a previous or subsequent CPS referral. Families who received an additional 90 days of service under EA were rated somewhat higher (2.79) at the end of services.

Table 10. Measurement of Self-Reliance.

Category of Family Rating	Outcome Mean Rating (3=high)	Standard Deviation
Total Sample Families (n=64)	2.70	.46
Families Receiving EA Services (n=29)	2.79	.41
Sample Families who received a subsequent CPS referral (n=32)	2.44	.58

B. Increases in Employment, Housing and Access to Health Insurance in Sample Families

Families included in the sample study were interviewed by the CRW's to collect information pertaining to employment, housing and health insurance access prior to and after services. Data from the sample used for this study indicate that sample families achieved positive outcomes in terms of increasing self-reliance around providing for the basic living needs of their children. The table below reflects increased employment, obtaining and/or upgrading of housing, and increased access to health insurance across the sample.

Table 11. Increased Employment, Housing Conditions and Access to Health Support.

Basic Need	Percentage of Families with Need (n=62)	Percentage of Families Reporting Services Eliminated Need	Percentage of Families Reporting Services Decreased Need
Employment	39%	77%	30%
Housing	54%	94%	29%
Health Insurance	28%	94%	N/A

C. Number of Community Agencies and Services Contacted by Clients

Another measure of self-reliance comes from the number of connections families were able to make with community agencies to get basic family needs met. In terms of community contacts, sample families made almost 5 community contacts each during the time they received services or between the end of service and the end of the school year. 76% of the aggregated contacts made by families as a result of services related to self-reliance.

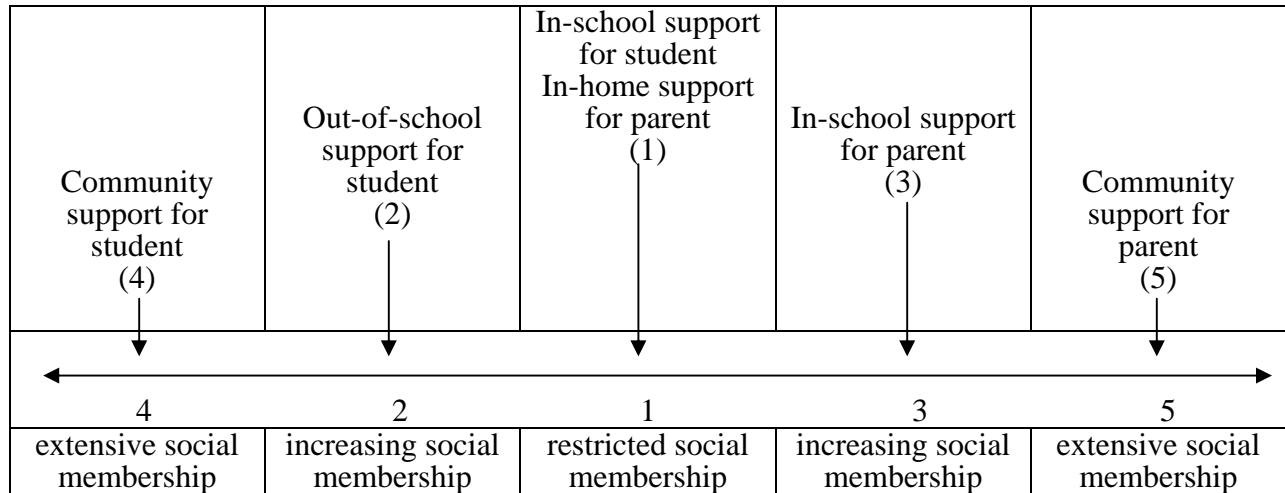
D. Increased Social Networking between Students, Parents, School and Community

Using an eco-map assessment tool, CRW's scored families on the extent of their social networks prior to services and after services had been completed. This mapping helped CRW's determine the range of connections families had made during service, which represented the extent to which children and families had increased their social memberships. The social contacts were assigned values (1-5 as shown below) depending on the degree to which the connection involved multiple persons outside of the home. The continuum below illustrates the scoring

system, and the chart below that illustrates the quantitative changes in the sample assessed using this instrument.

Social Network Continuum: All available community and agency services were placed on a continuum indicating the extent to which they were inclusive of the wider community. Individual connections between client families and social services/community services were then placed in appropriate columns according to the services they had connected to. This scoring of community connections was done pre-post to record changes in community membership (connectedness). The weight of the assigned numbers was determined by CRW's in a focus group and indicates the difficulty of making the different types of connections, both for CRW's and for families.

Flow Chart 1: Eco-Mapping of Community Connections by Families



The tables below depict the average scores prior to services, which ranged from 0 to 123 and the scores post service of a) the total sample and b) families receiving the additional 90 days of EA service. Post service, the average social network score had increased by 48% across the entire sample and 38% across EA cases, representing a significant increase in the families' connection to the community and school.

Table 8. Comparison of Social Networking Scores Total Sample.

Measure Taken (n=73)	Mean Score	Mode Score	Median Score	Standard Deviation
Pre-service	33.5	0	31	26.7
Post-service	64.9	20	66	30.1

Table 9. Comparison of Social Networking Scores Families Receiving EA Services.

Measure Taken (n=30)	Mean Score	Mode Score	Median Score	Standard Deviation
Pre-service	41.4	24	40	29.1
Post-service	66.9	108	70	32.2

The figures below indicate the extent to which the social membership scale represents a mass movement on the part of clients from a distribution representing a grouping to the lower side of the mean (Figure 1), to a distribution representing a grouping on the higher side of the mean (Figure 2). This shift in the mass of the distribution indicates that clients of this program made wholesale movements toward social inclusiveness or community membership rather than individual gains on a selected basis.

Figure 1. Histogram: Pre-service Social Networking Scores of Families Receiving EA Services.

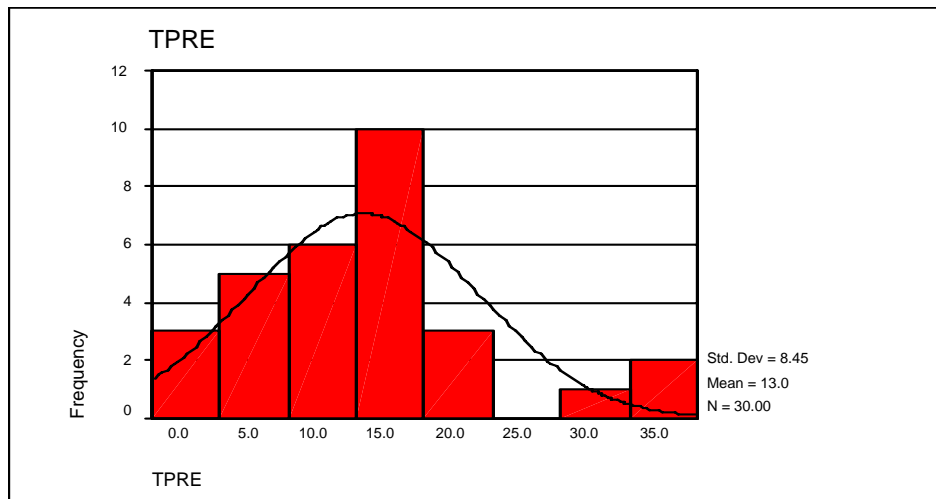
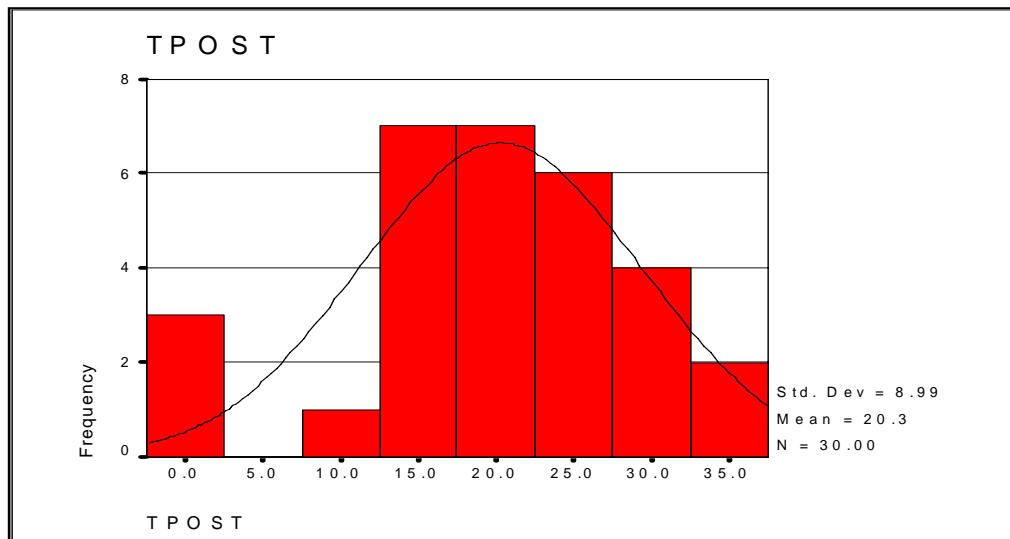


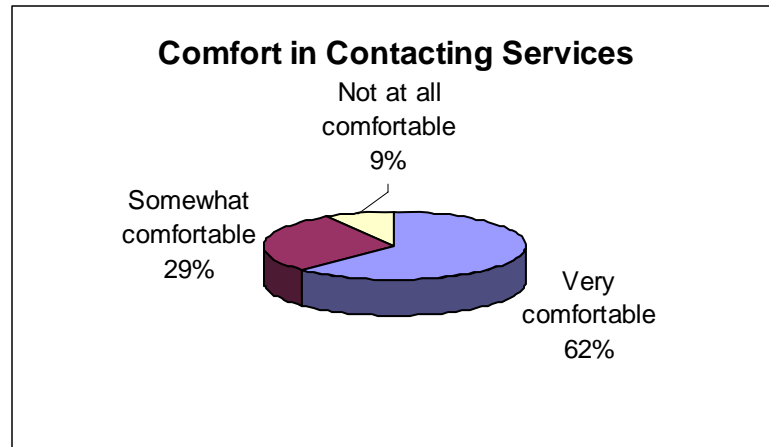
Figure 2. Histogram: Post-service Social Networking Scores of Families Receiving EA Services



E. Parent Perception of Comfort in Contacting Services

Family experiences and perceptions were seen as important factors that mediate future responses and outcomes to crisis. Parents were asked how comfortable they would feel in contacting again those services which impact self-reliance. The chart below depicts the sample families responses.

Chart 5. Comfort Level in Contacting Again Services Related to Self-Reliance.



Summary of Self-Reliance Measures:

Data around providing for the basic living and emotional needs of children used for this study indicates that sample families achieved strong outcomes in terms of promoting self-reliance. Data reflects that:

- **77% of those families referred for employment purposes found new employment.**
- **30% increased their employment situation as a result of services.**
- **94% of those families needing housing accomplished that goal.**
- **29% of the families needing housing, reported that their housing situation was upgraded as a result of services.**
- **94% of the families without health insurance applied for and received insurance either during or after service.**

Another area of strong outcomes in self-reliance by families was the number and types of community contacts made by families between the end of services and the end of the school year 2001. Families contacted on an average 5 or more community agencies during that time period. A substantial number of the contacts made were around fulfilling basic living needs such as food, clothing, housing, and utilities, the same types of services they had learned to access while working with the CRW's. More importantly, they reported that they felt somewhat to very comfortable 97% of the time in reconnecting with those agencies and services.

PART 3: EVALUATION CONCLUSIONS

This study has looked at data from a sample of 82 families served during 2000-2001 by the Community Resources for Families program in Region 1. The data was used to examine the effectiveness of the program in meeting its goals of:

1. Increased child safety and well-being for Idaho youth
2. Increased school readiness
3. Increased self-reliance for families referred to the program.

The following conclusions can be drawn from the data displayed above:

1. Child safety and well-being was actively promoted by the Community Resources for Families program. The integration of the program into the school setting allowed school personnel to make appropriate referrals for children who were under-performing in school due to environmental influences. Many of the referral reasons were related to getting the basic physical and emotional needs of children met, and data support the conclusion that the program was successful in helping families learn to provide for these needs.

Data also show that the sample parents themselves were active agents in meeting these needs. Families made multiple contacts with community agencies as a result of working with the program. These contacts included health, counseling and child care services in addition to more basic food, clothing and housing services.

Data support a conclusion that the program was effective in providing for the need of safety and well-being of vulnerable referred children. One of the goals of the programs was to prevent entry or re-entry into the Child Protection System. In this sample 48% of the families had experienced a CPS referral prior to receiving either A&R or A&R and EA services. 81% of those families did not re-enter the Child Protection System. This represents an overall picture of an increased safety net for children.

2. School Readiness was another program goal that was met by this program. 78% of students were referred to the program because of grades, school attendance, school behavior, or lack of parental participation. Of those students, 39% were rated by teachers as having made improvements in grades, 61% in attendance, and 82% in behavior. In addition, 40% of cases referred for lack of contact with parents were rated by teachers as having improved during service.

School personnel also highly rated the program in a) its general ability to support children in successful learning, and b) its ability to increase student success in school. School personnel estimated that 18 of the referred children may have needed special education or special needs support in the future, if this program had not helped their families improve living conditions. These 18 children reflect 22% of the sample population. Extrapolating to the approximately 1250 children served in Region 1 during the program year 2000-2001, it is possible that services may have prevented 275 children from needing special education or special needs support in the future. At a cost of approximately \$4500 per student assigned to special education programs, it can be estimated that the programs saved 1.25 million dollars in educational support funding.

The results of this study indicate that the school readiness of referred children is effectively enhanced by the Community Resources for Families program.

3. The goal of increasing the self-reliance of referred families was met by this program. A wide variety of data was collected to address this goal, and the evidence shows that families in

this program learned to make community connections to support their own needs in areas of health, employment, housing and medical needs, along with others. CRW's guided families in making connections with their communities to assist with a wide variety of family needs. CRW's kept track of the number of agencies they contacted during services. In the 82 cases, 1092 separate contacts were made for an average of 13.3 agencies contacted per family.

Self-reliance for this program, according to the data, is more than families learning to make community contacts to receive services. It is also about recognizing the need for different types of services to help children be healthy and safe. Data show that parents contacted a variety of community agencies to support both the physical and emotional needs of children. In addition, 38% of the sample families indicated that their children had an increased participation in community or school activities as a result of the intervention. Finally, 95% of parents felt comfortable in making the contacts again to assist their families with new difficulties.

This study's data related to the goal of increasing the self-reliance of families suggest that this program model has a strong effect on this important element of family functioning.

Summary

This evaluation has looked at the data of 82 families chosen out of a caseload of over 1250 families served by the Community Resources for Families Program in 2000-2001 in Region 1. Data show that the program effectively met its goals, and delivered services that aligned closely with the needs of families and with the learning readiness and safety needs of the children referred to the program.