Reducing Homelessness Among Youth with Child Welfare Involvement: Phase II Implementation Experiences in a Multi-Phase Grant

OPRE Report #: 2020-129

September 2020

This page has been left blank for double-sided copying.

Reducing Homelessness Among Youth with Child Welfare Involvement: Phase II Implementation Experiences in a Multi-Phase Grant

September 2020

Rosalind Keith, Nuzhat Islam, Rumin Sarwar, and M.C. Bradley

Submitted to:

Mary Mueggenborg, Project Officer
Office of Planning, Research, & Evaluation
Administration for Children and Families
U.S. Department of Health and Human Services
Contract Number: HHSP233201500035I/HHSP23337013T
OPRE Report 2020-129:

Submitted by:

Mathematica
P.O. Box 2393
Princeton, NJ 08543-2393
Project Director: M.C. Bradley

This report is in the public domain. Permission to reproduce is not necessary. Suggested citation: R. Keith, N. Islam, R. Sarwar, and M.C. Bradley. (2020). Reducing Homelessness Among Youth with Child Welfare Involvement: Phase II Implementation Experiences in a Multi-phase Grant, OPRE Report 2020-129, Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Disclaimer
The views expressed in this publication do not necessarily reflect the views or policies of the Office of Planning, Research and Evaluation, the Administration for Children and Families, or the U.S. Department of Health and Human Services.

This report and other reports sponsored by the Office of Planning, Research and Evaluation are available at https://www.acf.hhs.gov/opre.

Youth At-Risk of Homelessness

This page has been left blank for double-sided copying.

Contents

Executive Summary vii

A. Introduction vii

B. Research questions vii

C. Purpose viii

D. Key findings and highlights viii

E. Methods viii

I. Introduction 1

A. Phase I – YARH planning grant 1

B. Phase II – YARH implementation grant 2

C. Preparing for summative evaluation 2

D. Research questions that shaped the YARH-2 process study 4

E. Process study methods 4

II. YARH-2 Grantees, Their Partners, and Their Comprehensive Service Models 7

Key Takeaways 7

A. Who are the YARH-2 grantees? 7

B. Who did YARH-2 grantees partner with to implement the comprehensive service models? 8

C. What are the components of the grantees' comprehensive service models? 8

1. Screening and assessing youth's risk factors to identify eligible youth 9
2. Recruiting and enrolling eligible youth 9
3. Supporting youth's connection to model services 12
4. Regularly engaging youth one-on-one 12
5. Supporting youth to identify and achieve goals 12
6. Supporting youth to strengthen relationships with relatives, peers, or adults with whom the youth feel a connection 12
7. Helping youth connect with formal supports 13
8. Convening or participating in meetings to support youth in achieving their goals 13
9. Supporting youth in using community resources and services 13
10. Using assessment tools to gather information about youth 14

11. Connecting youth to housing 14
12. Providing therapy 14
13. Graduating youth 14

III. YARH-2 Grantees' Experiences Preparing to Implement Their Comprehensive Service Models 15

Key Takeaways 15

A. What did grantees do to prepare for and promote implementation of the comprehensive service models? 15

B. How did grantees benefit from engaging in the grant activities? 17

C. What challenges did grantees face completing the grant activities? 18

IV. YARH-2 Grantees' Experiences Implementing Their Comprehensive Service Models 19

Key Takeaways 19

A. What supported or hindered grantees' efforts to implement their comprehensive service model? 20

1. Screening and assessing youth's risk factors to identify eligible youth 20
2. Recruiting and enrolling eligible youth 20
3. Supporting youth's connection to model services 21
4. Regularly engaging youth one-on-one 22
5. Supporting youth to develop and achieve goals 23
6. Supporting youth to strengthen relationships with relatives, peers, or adults with whom the youth feel a connection 24
7. Helping youth connect with formal supports 24
8. Convening or participating in meetings to support the youth in achieving their goals 24
9. Supporting youth in using local resources and community services 25
10. Using assessment tools to gather information about youth 25
11. Connecting youth to housing 25
12. Providing therapy 26
13. Graduating youth 26

V. Perceived Benefits of the YARH-2 Comprehensive Service Models 27

Key Takeaways 27

A. How are youth benefiting from the comprehensive service models? 27

B. How are the comprehensive service models resulting in changes in how youth receive services within the child welfare system? 30

VI. Recommendations and Conclusions 31

A. Building from success: What worked and how to strengthen it 31

B. Challenges encountered and suggestions for addressing them.....33

C. Conclusion 33

References 35

Appendix A: Document Review Template A.1

Appendix B: Semi-Annual Report Template B.1

Appendix C: Interview Protocol For Site Visits C.1

Exhibits

I.1 YARH-2 grant activities 3

I.2 Data collection timing 5

I.3 YARH-2 conceptual framework 6

II.1 Location of the YARH grantees 8

II.2 Target population(s) and risk factors used to assess for eligibility 10

A.1 Program inputs A.3

A.2 Program design A.4

A.3 Grant activities A.4

A.4 Barriers and facilitators that emerged in each stage of implementation A.4

Executive Summary

A. Introduction

Youth who enter foster care have a range of experiences while in foster care and after leaving foster care. The National Youth in Transition Database (NYTD) survey found that at age 19, over half (56%) of youth who aged out of foster care had some employment-related experience. However, only 50% of youth who aged out of foster care had gainful employment at age 24 (Children's Bureau, 2017). While some youth transition from foster care successfully into adulthood, others face significant challenges in making this transition. They are at high risk for experiencing homelessness and unstable housing and many have a history of trauma, mental health issues, and substance abuse (Brandford and English 2004; Reilly 2003). Many youth aging out of foster care encounter barriers to economic independence because they lack the academic credentials, basic job skills, and social networks vital for finding and maintaining employment (Dworsky et al. 2012).

Evidence on approaches for improving social and economic outcomes for youth in foster care or young adults who were formerly in foster care is limited (Courtney et al. 2007). To build the evidence base of interventions to prevent homelessness among this population, the Children's Bureau (CB) developed the "Building Capacity to Evaluate Interventions for Youth/Young Adults with Child Welfare Involvement At-Risk of Homelessness (YARH)" grant program. YARH is a multiphase competitive grant program that aims to support the development and evaluation of comprehensive service models to meet the need of youth who have experienced foster care and are at risk of homelessness.

In the first phase of YARH (YARH-1), starting in September 2013, CB awarded planning grants to 18 entities to form partnerships with local child welfare entities and define a comprehensive service model (model). In the second phase of YARH (YARH-2), starting in September 2015, CB awarded implementation grants to six entities from YARH-1 to (1) implement and refine the model developed in YARH-1; (2) conduct rapid-cycle testing of critical model components; (3) conduct formative evaluation of the model to determine whether the model can achieve expected outcomes; and (4) prepare for full implementation and a summative evaluation of the model in a third phase (YARH-3).

B. Research questions

The focus of this report is a process study of YARH-2. In the report, we explore the following research questions:

1. Who are the YARH-2 grantees? Who did grantees partner with to implement the comprehensive service models? What are the components of the grantees' comprehensive service models?
2. What did grantees do to prepare for and promote implementation of the comprehensive service models? How did grantees benefit from engaging in the grant activities? What challenges did grantees face completing the grant activities? What supported and hindered grantees' efforts to implement their comprehensive service models?
3. How are youth benefiting from the comprehensive service models? How are the comprehensive service models resulting in changes in how youth receive services within the child welfare system?

C. Purpose

The information in this report is intended to inform future efforts to implement interventions designed to prevent homelessness among youth and young adults with child welfare involvement. We provide stakeholders interested in youth homelessness and child welfare issues with findings about the services and supports that grantees implemented as part of their models. We report findings on the challenges that the YARH-2 grantees and their partners faced in their efforts to implement their models. We provide findings about strategies the grantees used that supported implementation of their models, as well as other factors that facilitated implementation.

D. Key findings and highlights

The following factors helped or hindered grantees in meeting grant requirements and implementing their models:

- Leaders facilitated implementing the models by (1) having in-depth knowledge of the services and supports; (2) meeting with partners regularly to promote support for the model; and (3) engaging stakeholders at all levels, including leadership at state or county child welfare agencies, service providers, and referring entities.
- Grantees that established a committed coalition of partners during the YARH-1 planning phase began enrolling and delivering services to youth more quickly and consistently compared to grantees that had not successfully engaged partners prior to implementation.
- The grant activities were helpful for engaging partners and establishing a shared vision of the model, identifying and resolving implementation challenges, and facilitating communication during implementation.
- In all models, youth were assigned a youth practitioner who supported them until they graduated from the model. These youth practitioners used various methods to support youth to address past trauma, build life skills and confidence to self-advocate, engage natural and formal supports, and access community resources.
- Engaging youth was a significant challenge because youth's participation in services was voluntary. However, youth practitioners' personal attributes, such as patience, flexibility, and commitment, facilitated youth's engagement. Having access to resources to provide youth with meals and gift cards contributed to engaging them in new services.
- Perceived benefits of the models included (1) a focus on youth-centered approaches and establishing a trusting relationship between the youth practitioner and the youth, (2) youth feeling supported by their youth practitioner, and (3) stronger relationships among entities in child welfare systems.

E. Methods

To answer our research questions, we used data from all six grantees drawn from a review of grant-related documents, notes from evaluation technical assistance meetings, and transcripts from interviews conducted during process study site visits. The data were collected throughout the implementation grant period until we completed interviews with key stakeholders for each grantee in June 2019.

We drew from two implementation science frameworks to inform a conceptual framework that guided analysis. The National Implementation Research Network Active Implementation Frameworks defined the stages of implementation and the associated activities for each stage (Metz and Bartley 2012). The

Consolidated Framework for Implementation Research provided a comprehensive evidence base of hindering or facilitating factors that may emerge in the implementation context to influence implementation (Damschroder et al. 2009).

We used the conceptual framework to develop a codebook to organize data for analysis. We then analyzed data by construct to identify respondents' descriptions of the model, as well as barriers and facilitators to implementation. We assessed and reported themes that emerged within and across grantees.

This page has been left blank for double-sided copying.

I. Introduction

Youth who enter foster care have a range of experiences while in foster care and after leaving foster care. The National Youth in Transition Database (NYTD) survey found that at age 19, over half (56%) of youth who aged out of foster care had some employment-related experience. However, only 50% of youth who aged out of foster care had gainful employment at age 24 (Children's Bureau, 2017). NYTD found that 89% of youth who aged out of foster care had positive adult connections at age 19, but 19% of youth formerly in foster care experienced homelessness in the previous two years.

While some youth transition from foster care successfully into adulthood, others face significant challenges making this transition. They are at high risk for experiencing homelessness and unstable housing and many have a history of trauma, mental health issues, and substance abuse (Brandford and English 2004; Reilly 2003). These youth are more likely than youth in the general population to suffer from post-traumatic stress disorder (Salazar et al. 2013). Moreover, many youth aging out of foster care[1] encounter barriers to economic independence because they lack the academic credentials, basic job skills, and social networks vital for finding and maintaining employment (Dworsky et al. 2012).

In 2018, more than 17,000 youth aged out of foster care in their state or territory (U.S. DHHS 2019). Research published between 1990 and 2011 estimates that among youth who age out of foster care, between 11 and 36 percent experience homelessness upon exiting care (Dworsky et al. 2012). Up to 50 percent of youth who age out of foster care may experience other forms of housing instability, such as couch surfing or doubling up (Dion et al. 2014). Homelessness exacerbates youth's struggles to complete postsecondary education, enter the workforce, sustain healthy relationships, and achieve self-sufficiency (Dion et al. 2014).

Increasingly, federal, state, and local governments are making efforts to address the challenges youth in foster care face once they leave the foster care system. However, approaches for improving social and economic outcomes for these young people have not been tested as rigorously as possible. Therefore, evidence on "what works" for youth in foster care or young adults who were formerly in foster care is limited (Courtney et al. 2007). Moreover, not enough is known about the best ways to implement programs for youth transitioning out of foster care (Courtney et al. 2017). To build the evidence base of interventions to prevent homelessness among this population, the Children's Bureau (CB) developed the "Building Capacity to Evaluate Interventions for Youth/Young Adults with Child Welfare Involvement At-Risk of Homelessness (YARH)" grant program. YARH is a multiphase competitive grant program. It aims to support the development and evaluation of comprehensive service models to meet the needs of youth who have experienced foster care and are at risk of homelessness. The information in this report is intended to inform implementation of such comprehensive service models.

A. Phase I – YARH planning grant

In the first phase of YARH (YARH-1), CB awarded planning grants to 18 entities. The grants were intended to enable these entities to form partnerships in the local child welfare system and define a comprehensive service model (model).[2] Grantees worked to understand the unmet needs of the target

[1] This report uses "aging out of foster care" to indicate the youth reached the maximum age for being in foster care in their state or territory.

[2] This report uses "comprehensive service model" to represent the complete package of services being implemented by a grantee. Grantees may have developed different comprehensive service models for different populations, but the report uses the singular term to represent the full set of comprehensive service models developed.

populations and identify services that might meet those needs. YARH-1 began in September 2013, and CB provided grantees up to $360,000 per year for two years.

Grantees made varying amounts of progress toward defining a model during the YARH planning grant. Findings from the YARH-1 process study identified a few characteristics of grantees that contributed to their progress. These characteristics included (1) grantees that maintained consistent relationships with partners who were dedicated to achieving grant goals, (2) grantees that had access to data and support with data analysis for defining the target population and selecting services, and (3) grantees that had prior experience engaging youth and young adults to provide input during planning (Stagner et al. 2017).

B. Phase II – YARH implementation grant

In the second phase of YARH (YARH-2), CB invited the 18 entities that received planning grants in YARH-1 to apply for YARH-2 funding, which would support initial implementation and refining of the proposed model. Ultimately, CB awarded implementation grants to six entities from YARH-1 using criteria described in the funding opportunity announcement (FOA) to evaluate applications (Administration for Children and Families, 2015). This criteria included: (1) objectives and need for assistance; (2) approach (target population and geographic area(s), implementation plan for the models, and screening and assessment/referral and selection); (3) partnerships; (4) evaluation; (5) organizational capacity; and (6) budget and budget justification.[3] YARH-2 began in September 2015, and CB provided grantees up to $670,000 per year for four years.

During YARH-2, grantees were required to (1) prepare the local child welfare system and partner agencies for change, (2) begin initial implementation of the model developed in YARH-1, (3) conduct rapid-cycle testing of critical model components, such as enrollment, and modify them as needed (referred to as usability testing), (4) conduct formative evaluation of the model to determine whether the model can achieve expected outcomes, and (5) plan for full implementation.[4] The goal of YARH-2 was for grantees to demonstrate their ability to participate in a summative evaluation of the model.

C. Preparing for summative evaluation

From the beginning of the YARH multiphase grant initiative, CB advised grantees to consider how they could test the effectiveness of their model. In the YARH-2 FOA, CB described the importance of a rigorous summative evaluation and identified how the YARH-2 activities intended to help grantees implement their models to prepare for summative evaluation (YARH-3). CB provided additional details about these activities during YARH-2. In Exhibit I.1, we define the activities that CB recommended grantees complete during YARH-2 to demonstrate their readiness to move to full implementation and summative evaluation of their models in a third phase.

[3] The funding opportunity announcement includes the detailed description of these criteria.
[4] The term "component" refers to parts of the comprehensive service model such as programs, discrete interventions, and services.

Exhibit I.1. YARH-2 grant activities

Activity	Description	Connection to Summative Evaluation
Describe the theory of change	• Clearly identify the theory that guided the selection of proposed model components for desired outcomes. • Discuss why the theory of change is most appropriate to guide the work of the grant based on what the grantee learned during YARH-1. • Provide information on how the theory of change will be continuously re-evaluated during YARH-2.	• Guides future decisions related to designing and executing a rigorous evaluation.
Develop a logic model	• Display how the proposed model components are aligned to produce intended short-term outcomes, and how the short-term outcomes are related to the long-term outcomes specified in the United States Interagency Council for Homelessness framework.[a]	• Ensures data collection efforts – whether fidelity or outcome data – are capturing critical elements of the program or critical outcomes.
Conduct usability tests of the model components	• Test selected model components, such as key processes and data collection activities, to identify needed refinements prior to formative evaluation. • Demonstrate how attention to the quality of implementation will aid in achieving positive, short-term outcomes with the delivery of the model.	• Offers the opportunity to strengthen new or key processes before starting a summative evaluation.
Conduct a formative evaluation of the comprehensive service model	• Document and assess key aspects of implementation identified in the logic model, and contextual factors that may influence implementation. • Describe the plan for evaluating the short-term outcomes that is consistent with the program's logic model. • Demonstrate that short-term outcomes are trending in the right directions, and the model is not harming youth or producing negative results.	• Provides initial evidence on the outcome changes that may be seen. • Offers opportunity for additional enhancements before starting a summative evaluation.
Conduct continuous quality improvement	• Provide a plan for using data for continuous quality improvement. • Discuss how the data collected will be used to support service delivery and inform refinements to the comprehensive service model. • Provide information about how the evaluation will support continued refinement of the target population for referral to the intervention.	• Develops system to ensure programming is offered as intended. • Provides data to identify problems with programming to inform corrections to programming.

Source: YARH-2 Funding Opportunity Announcement, which can be found at https://ami.grantsolutions.gov/files/HHS-2015-ACF-ACYF-CA-0961_0.pdf.

[a] Information about the United States Interagency Council for Homelessness framework can be found at https://www.usich.gov/tools-for-action/framework-for-ending-youth-homelessness/.

The Office of Planning, Research & Evaluation (OPRE) awarded a contract to Mathematica, which ran parallel to YARH-2 grant funding, to support grantees' completion of the grant activities and preparation for summative evaluation of their models. The contract funded evaluation technical assistance (TA), mainly focusing on completing the grant activities. The evaluation TA helped grantees simultaneously think about the development of the model and its evaluation. The intention of this TA approach was to ensure that the model could be evaluated, and the findings would add to the evidence base about effective programs for youth who have been in foster care and are at risk of homelessness. Mathematica delivered evaluation TA in a group format to all grantees using webinars, supporting memoranda and documents, and in-person learning collaboratives. Mathematica provided individualized evaluation TA to each grantee during annual site visits and monthly conference calls. While the intention was for the TA to be focused on preparing for a summative evaluation, it often included conversations and activities to help grantees think through programmatic issues. Given YARH-2 focused on initial implementation, and included many developmental activities including usability tests and a formative evaluation, the mixture of programmatic and evaluation TA provided was appropriate and necessary. This report is focused on grantees and does not report on the evaluation TA in detail. Some aspects of evaluation TA are mentioned as they relate to grantees completing grant activities.

D. Research questions that shaped the YARH-2 process study

The process study focused on several research questions, listed below. In this report, we explore these questions to discuss (1) grantees' experiences implementing their models, and (2) how the multiphase grant program supported grantees in implementing and preparing for summative evaluation of their models. In the end, this report summarizes key findings and presents recommendations for future initiatives that aim to support grantees to implement and prepare for summative evaluation. It presents recommendations for stakeholders working to address youth homelessness and child welfare issues, including policymakers and practitioners, and the TA providers who support those efforts.

The research questions, and the chapter that focuses on them, are as follows:

1. Who are the YARH-2 grantees? Who did grantees partner with to implement the comprehensive service models? What are the components of the grantees' comprehensive service models? (Chapter II)
2. What did grantees do to prepare for and promote implementation of the comprehensive service models? How did grantees benefit from engaging in the grant activities? What challenges did grantees face completing the grant activities? (Chapter III) What supported and hindered grantees' efforts to implement their comprehensive service models? (Chapter IV)
3. How are youth benefiting from the comprehensive service models? How are the comprehensive service models resulting in changes in how youth receive services within the child welfare system? (Chapter V)

E. Process study methods

To answer the research questions, we used data from the six grantees, collected in various ways throughout the YARH-2 grant period. Data collection ended with stakeholder interviews for each grantee in June 2019. Process study data included grant applications and semi-annual reports (SARs) that grantees submitted to CB, notes from evaluation TA meetings, and transcripts from stakeholder interviews

conducted for the process study. Exhibit I.2 provides an overview of the timing of each data collection activity.[5]

Exhibit I.2. Data collection timing

	Sep 2015–Dec 2015	Jan 2016–Jun 2016	Jul 2016–Dec 2016	Jan 2017–Jun 2017	Jul 2017–Dec 2017	Jan 2018–Jun 2018	Jul 2018–Dec 2018	Jan 2019–Jun 2019
Grant applications and profiles	X							
Semi-annual reports		X	X	X	X	X	X	
Evaluation technical assistance site visit write-ups			X		X		X	
Interviews with key stakeholders								X

Mathematica conducted interviews with grantees and partners during multiday site visits to each grantee between April and June 2019. The interviews generated in-depth information from key stakeholders on their experiences and perceptions with developing and implementing a model. Information collected during the interviews focused on (1) components of the models; (2) challenges and facilitators to implementing each component; (3) implementation processes, including experiences with the grant activities; and (4) perceived benefits of the models. Interview respondents were selected based on their involvement with implementation and service delivery. Among the key stakeholders interviewed were members of the implementation team, including the project director, project manager, and other key staff; local evaluators; state and local child welfare agency staff and representatives; community and other service providers; and participating young adults over the age of 18. The interviews were semistructured so the conversation could be free flowing and focus on topics relevant to the individual respondents.

A potential challenge for the process study was to synthesize the data in a way that minimized subjectivity and increased validity of our findings. To ensure transparent interpretation and systematic analysis of the data, the implementation science literature recommends using a conceptual framework that provides standard definitions of facilitators and challenges likely to influence implementation (Alexander and Hearld 2012). We drew from two implementation science frameworks to inform a conceptual framework for the process study.

The National Implementation Research Network Active Implementation Frameworks define four overlapping stages of implementation and associated activities (Metz and Bartley 2012):

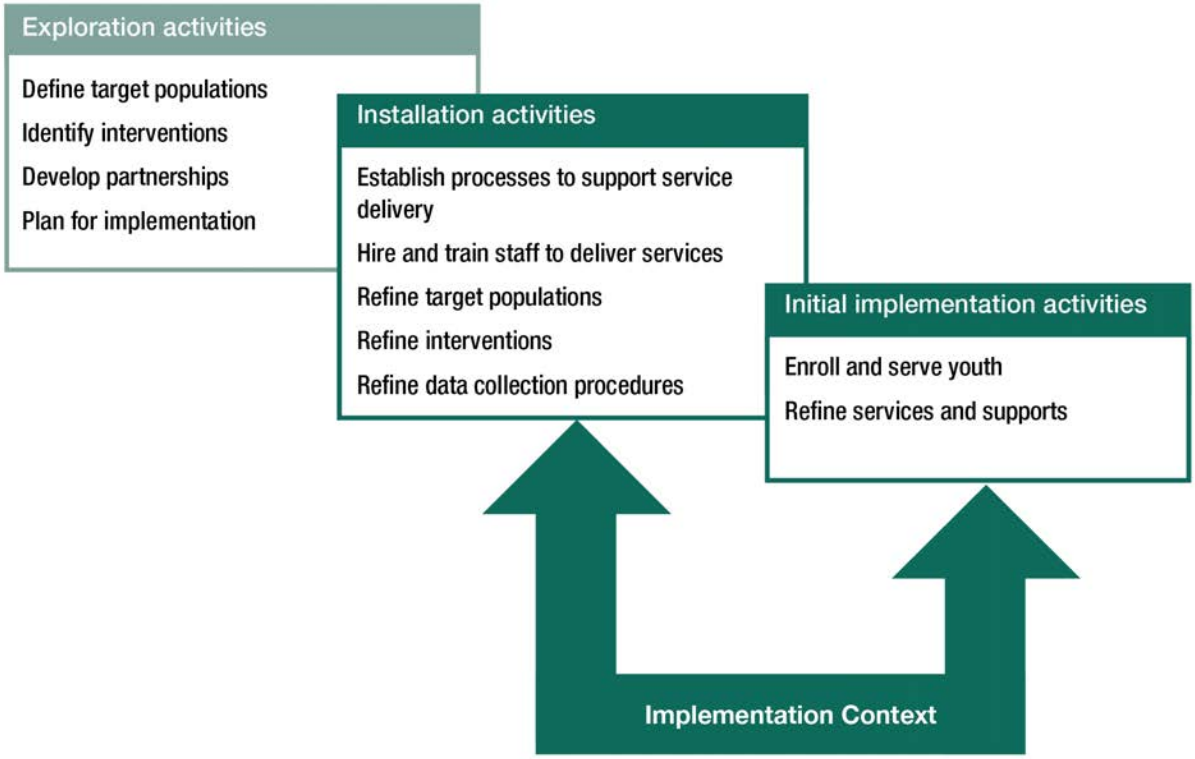
[5] The appendix provides data collection instruments. Appendix A includes the document review template used to extract data from grant applications and SARs. Appendix B includes the outline of the SAR template that grantees completed and submitted to CB. Appendix C is the site visit interview protocol.

1. **Exploration**, during which stakeholders assess needs of the target population and the capacity of the proposed intervention to meet those needs and examine potential implementation barriers.
2. **Installation**, during which stakeholders establish process to support service delivery, hire and train staff to deliver services, and refine the target population and intervention.
3. **Initial Implementation**, during which stakeholders start to deliver and refine services.
4. **Full Implementation**, during which service delivery stabilizes.

During YARH-1, grantees focused on Exploration activities, including defining their target populations, assessing gaps in services, and identifying potential interventions to fill the gaps. During YARH-2, grantees built on the work they did in YARH-1 and focused on Installation and Initial Implementation activities. The Installation activities included developing a plan for implementing the model, using continuous quality improvement (CQI) to support implementation, and hiring and training staff. Initial Implementation activities included starting to enroll and serve youth and refining services and supports.

The Consolidated Framework for Implementation Research provides a comprehensive evidence base of hindering and facilitating factors that may emerge in implementation contexts (Damschroder et al. 2009). The conceptual framework (Exhibit I.3) shows how YARH-2 activities may have been shaped by factors in the implementation context, represented by the arrows at the bottom of the figure.

Exhibit I.3. YARH-2 conceptual framework



II. YARH-2 Grantees, Their Partners, and Their Comprehensive Service Models

In this chapter, we provide background on the six YARH-2 grantees and describe the partnerships they established to support implementation of the comprehensive service models (model). We then describe the individual components that made up grantees' models. We assessed the common interventions, services, and supports across the six grantees' models and delineated and defined 13 individual components that make up the models. We address the following research questions:

- Who are the YARH-2 grantees?
- Who did grantees partner with to implement the comprehensive service models?
- What are the components of the grantees' comprehensive service models?

Key Takeaways

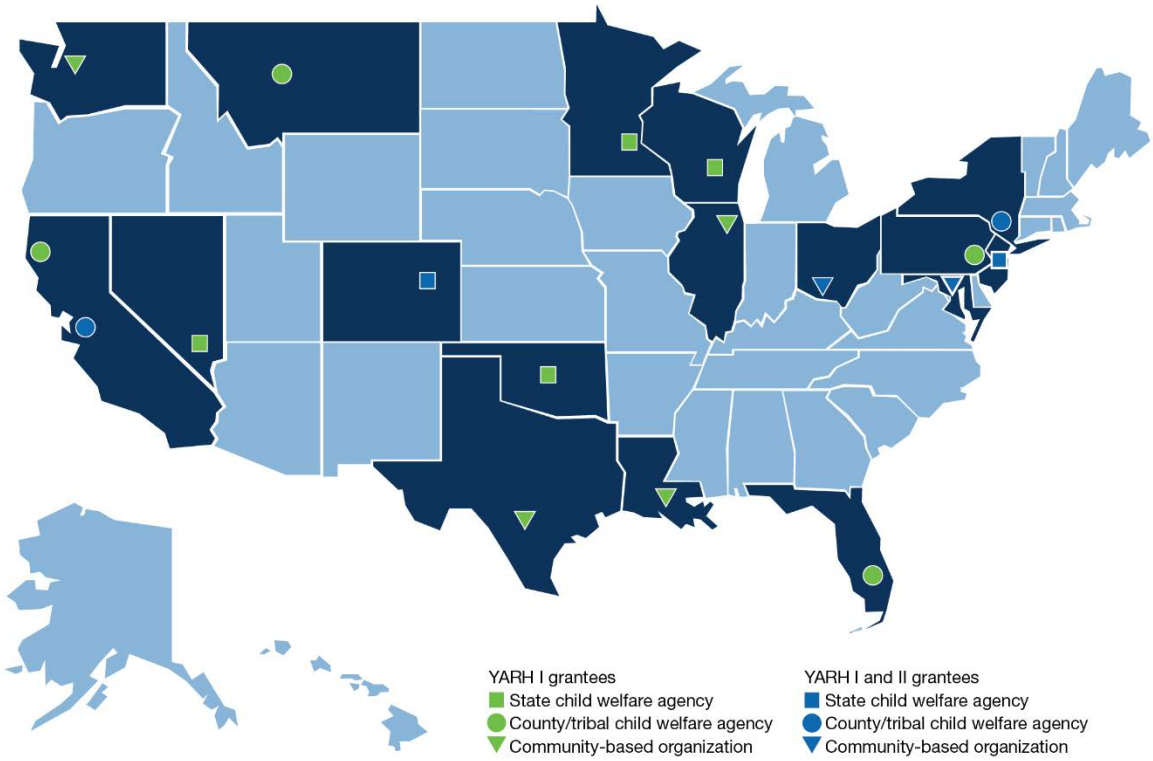
- The entities that led the YARH-2 grants included state and county child welfare agencies and community-based organizations.
- The six YARH-2 grantees varied regarding their location, the number and types of partnerships they engaged to support implementation of their model, and their previous experience providing similar services to the target population.
- Grantees' target populations were youth between 14 and 24 years old. They screened for youth who were currently in foster care or had a history of foster care. To screen youth, grantees used administrative data, results from risk screening tools, and/or referrals from community resources.
- In all models, youth were assigned a youth practitioner who supported them until graduation, generally through individual meetings. Youth practitioners used various methods to support youth to address past trauma, build life skills and confidence to self-advocate, engage natural and formal supports, and access community resources.
- Two grantees provided services targeted to specific youth needs. One of these grantees supported youth in applying for a state housing voucher and, if the voucher was awarded, maintaining the home. The other delivered a specific therapeutic model to build emotion regulation skills in youth.
- Grantees were at various stages of finalizing the process and timeframe for graduating youth from model services.

A. Who are the YARH-2 grantees?

The six YARH-2 grantees represent diverse geographic areas and organizational structures. They are located in six states across the country (Exhibit II.1). The YARH-2 grants were led by different types of organizational entities, including state child welfare agencies (n = 2), county/tribal child welfare agencies (n = 2), and community-based organizations (n = 2). Among the six grantees, two implemented the model in a rural setting with limited resources, and two implemented the model in service-rich communities.

All grantees had experience working with youth and young adults who were either homeless or transitioning out of foster care. Half of the grantees engaged youth in implementation processes, for example, by developing a youth advisory committee.

Exhibit II.1. Location of the YARH grantees



B. Who did YARH-2 grantees partner with to implement the comprehensive service models?

Across grantees, partnerships varied with respect to number, type, and history of the partnership. The total number of partners engaged by a grantee ranged from one to seven and averaged five. Four of the grantees contracted with providers to deliver services to youth. Partners included referral entities that served as the entry point for enrolling youth, housing voucher providers, and advisory councils. Other partners that were instrumental in implementing the models included local businesses that participated in job fairs and provided employment opportunities to youth, local evaluators, and intervention training consultants who provided training to the implementation teams.

C. What are the components of the grantees' comprehensive service models?

The report discusses the same thirteen components in this chapter and chapter four, first describing the component (this chapter) and then the supports and barriers to implementing each component (chapter four). The two chapters use numbers to facilitate connecting the information about a component across the chapters.

1. Screening and assessing youth's risk factors to identify eligible youth

To assess youth's eligibility for model services, grantees primarily accessed administrative data through an information management system or used results from a risk screening tool completed by a child welfare worker. Grantees screened for youth from 14 to 24 years old who had a history of or were currently in foster care. About half of the grantees prioritized services for youth with predetermined risk factors. Exhibit II.1 summarizes the populations each grantee served and their identified risk factors for screening youth, if applicable.

In some models, the youth's child welfare worker manually administered the screening tool or conducted a qualitative assessment of needs. The child welfare worker shared results with program staff to determine eligibility. Other grantees had dedicated program staff review administrative data maintained in an information management system.

Depending on how grantees defined their target population, they used other processes or entities to identify eligible youth. Half of the grantees employed alternate methods of identifying eligible youth. One grantee received referrals from county aftercare services for youth seeking housing assistance, and another conducted outreach to transitional housing programs. A third grantee accepted referrals from youth advocates in the community, such as schools.

2. Recruiting and enrolling eligible youth

All grantees assigned a youth practitioner to serve as the primary contact for youth. Frequently, youth practitioners engaged youth during recruitment and enrollment, and then served as their main contact for the intervention services. To describe the services and discuss whether eligible youth were interested in enrolling, the youth practitioner usually attended an in-person meeting with the youth and their child welfare worker. After this meeting, the youth practitioner followed up with the youth to continue discussing their interest in enrolling. After obtaining consent and completing necessary enrollment paperwork, the youth practitioner scheduled a meeting with the youth to begin services.

Exhibit II.2. Target population(s) and risk factors used to assess for eligibility

Population(s) served	Risk factors
Age 14–21 • Entered foster care at any age • Live in county with program jurisdiction • Case not actively in emergency response program or open for non-relative legal guardianship services only • Have at least two risk factors	**1.** Entered foster care at age 14 or older **2.** Experienced 5 placements or 3 or more runaway episodes **3.** Takes medication for psychiatric or mental health concern, has a documented behavioral health need, or changed placement due to mental/behavioral health reason (based on a federal class action lawsuit filed on behalf of youth in foster care and children at risk of out-of-home placement in the state) **4.** Currently placed in a group home **5.** Currently identified as receiving an "infant care supplement" associated with the payment for their foster care placement **6.** In foster care for more than 18 months
Age 14–17 • Entered foster care after age 13 • Currently in foster care • Have at least one risk factor **Age 17–21** • Entered foster care at any age • Currently in foster care • History of being in out-of-home care for at least six months • Have at least one risk factor **Age 17–23** • Transitioning out of foster care or no longer in care but may have access to county child welfare services • History of being in out-of-home care for at least six months • Had an open removal in the state's automated child welfare information system before age 18. • May be experiencing homelessness • Have at least one risk factor **Under age 23** • Currently experiencing homelessness • History of child welfare involvement before age 18 • Must not be eligible for System of Care services or receiving high-fidelity wraparound services from another provider • Have at least one risk factor	**1.** Parental incarceration and involvement in the foster care system **2.** Marijuana use prior to age 12 **3.** Running from placement due to conflict or abuse **4.** Pregnancy **5.** Incarceration/detention prior to age 18 **6.** Experiencing sex or labor trafficking

Population(s) served	Risk factors
Age 18–24 • History of foster care • Resident of a youth shelter or in contact with the county's aftercare program	Not applicable; single criterion for youth with a history of foster care
Age 14–21 • In foster care located in the intervention counties	Not applicable; all age-eligible youth in foster care receive services
Age 18–20 • History of foster care or currently in county custody (minimum of one day in out of home placement) • Homeless or at risk-of homelessness • Minimum Early Warning System score of 3 • Have at least one risk factor	**1.** Substance abuse **2.** Mental health condition **3.** Pregnant and/or parenting **4.** History of criminal/juvenile justice involvement
Age 14–17 • Currently in foster care • Have at least three risk factors **Age 18–21** • Currently in foster care • Have at least three risk factors **Age 14–21** • History of foster care • Not homeless • Have at least three risk factors **Age 14–21** • History of foster care • Currently experiencing homelessness • Have at least three risk factors	**1.** Has "couch surfed" for a place to stay **2.** Has been homeless **3.** Has run away or been kicked out of home **4.** Has experienced violence in their home, residential placement, etc., between those they are living/residing with **5.** Has conflict around values with primary caregiver (or adults in their life), for example over religious beliefs, food, or practices **6.** Does not have adequate housing **7.** Does not have adequate food and clothing **8.** Has been pregnant, gotten someone pregnant, or fathered a child **9.** Has abused alcohol or other substances **10.** Has been involved in gang activity **11.** Has been involved in the juvenile justice system **12.** Does not have an adult in their life who they can trust **13.** Does not have peers who they can trust **14.** Has had more than two moves in the foster care system

Source: Semi-annual report, interviews, and emails with key stakeholders.

3. Supporting youth's connection to model services

The youth practitioner acted as a caring and supportive adult who, in most cases, was hired and trained for this role. Common responsibilities for youth practitioners were to (1) help youth develop and achieve goals and (2) support youth in crisis situations. Other responsibilities for youth practitioners varied across models. These responsibilities included: modeling behaviors or teaching life-skills to empower youth to handle real-life situations, delivering a therapeutic model, coordinating child welfare services to meet youth's needs, and helping youth strengthen relationships with both formal and informal supports (discussed below).

Three grantees made efforts to hire youth practitioners who were young adults with experience as youth in foster care (referred to as "lived experience") and could to relate to youth through their own experiences. Youth practitioners with lived experience were the primary youth practitioner for one grantee and served as a resource for two other grantees.

4. Regularly engaging youth one-on-one

Each grantee's model included regular one-on-one meetings intended to promote a trusting relationship between the youth and the youth practitioner. In most models, these meetings were required to occur every week or every other week, at least during the first few months of services when the youth and youth practitioner were getting to know each other. In some cases, youth and the youth practitioner met more frequently depending on the youth's needs. For example, more frequent meetings might occur if the youth practitioner was helping the youth get into a shelter or find housing. One grantee did not require youth to meet with the youth practitioner.

5. Supporting youth to identify and achieve goals

Each model included a component that involved helping youth work toward goals. Youth worked with their youth practitioner to identify goals or youth had previously established goals in their transitional plan. Youth practitioners discussed goals with youth during the one-on-one meetings. In some models, youth practitioners discussed goals during meetings attended by the youth and other supports in the youth's life.

6. Supporting youth to strengthen relationships with relatives, peers, or adults with whom the youth feel a connection

All models focused on connecting youth with immediate and extended family, peers and friends, or adults with whom youth feel a connection (referred to as "natural supports"). To connect youth to natural supports, youth practitioners discussed with youth potential natural supports. During these discussions, youth practitioners helped youth understand why natural supports are important, and youth helped youth practitioners understand why they might feel uncomfortable or resist connecting with these supports. Youth practitioners then helped youth to build a relationship with a natural support, which could involve the youth practitioner discussing and modeling healthy relationships with youth or coaching youth through interactions with natural supports.

7. Helping youth connect with formal supports

In all models, youth practitioners helped youth understand formal supports available in the child welfare system (such as child welfare worker, therapists, law guardians, and court appointed special advocates [CASA] volunteers). Youth practitioners generally spoke with youth and their child welfare worker, to identify formal supports. Youth practitioners tried to increase youth's engagement with formal supports by explaining their roles, the services or resources each could provide, and how the youth should contact and communicate with them.

Helping youth connect with formal supports commonly occurred during in-person meetings with youth. These meetings (discussed below) could be a model requirement, or to meet the federal requirement for transition planning.

8. Convening or participating in meetings to support youth in achieving their goals

Youth practitioners supported youth in meetings in two ways: (1) leading model-specific meetings or (2) participating in required non-model-specific meetings. Youth practitioners prepared youth to self-advocate and interact with meeting participants in an appropriate manner. The role of the youth practitioner in setting the agenda or inviting participants differed by meeting type.

9. Supporting youth in using community resources and services

Half of the models relied on youth practitioners connecting youth with local resources and community services to help meet youth's basic needs or help youth achieve their goals. Youth practitioners helped youth make these connections as appropriate and in coordination with the child welfare worker, if the youth was in custody.

Local resources and community services youth workers supported youth in using:

- Food banks and pantries
- The Supplemental Nutrition Assistance Program
- The Special Supplemental Nutrition Program for Women Infants and Children
- The Temporary Assistance for Needy Families program
- Counseling services
- Substance abuse services
- Medical services
- Disability services
- Employment services
- Education programs
- Transportation services
- The Department of Motor Vehicles
- Health and fitness clubs

10. Using assessment tools to gather information about youth

Generally, models included formal or informal assessments of youth to inform the work of the youth practitioner and youth. Most models included specific assessments or assessment activities, however, the use of assessment tools varied within and across models. Grantees varied in the extent to which youth practitioners completed assessments with youth and used information from assessments to inform their work with youth. For example, in two models youth practitioners noted that they used different assessment tools, based on which tools they had experience with and thought would help them support the youth.

11. Connecting youth to housing

One grantee supported all enrolled youth in applying for a state housing voucher. If youth received the voucher, the youth practitioner helped them develop independent living skills, become good tenants, and maintain their home. The other grantees supported enrolled youth in obtaining housing as it related to youth's goals but did not have access to a voucher for all youth.

12. Providing therapy

One grantee trained the youth practitioners to deliver a specific therapeutic model to youth through weekly group meetings and one-on-one telephone coaching as needed. Respondents from another grantee described using a trauma-informed approach to provide youth with insight into their potential trauma triggers.

13. Graduating youth

Grantees were at various stages of finalizing the process and timeframe for graduating youth from the model services. One grantee based graduation on youths' completion of the curriculum guiding services, however, respondents from this grantee said that even after completing the curriculum and graduating, youth continue to meet with their youth practitioner.

III. YARH-2 Grantees' Experiences Preparing to Implement Their Comprehensive Service Models

In this chapter, we describe the grantees' experiences with preparing to implement their comprehensive service models. The aim of installation activities is to ensure that stakeholders, particularly frontline staff, are prepared to deliver services and that structural supports are in place to facilitate successful implementation (Metz and Bartley 2012). We address the following research questions:

- What did grantees do to prepare for implementation of the comprehensive service models?
- How did grantees benefit from engaging in the grant activities?
- What challenges did grantees face completing the grant activities?

Key Takeaways

- Strong leadership, committed partners, and regular meetings helped to increase stakeholder engagement at all levels of implementation and facilitated communication to overcome early challenges to enrollment and service delivery.
- Grantees initially faced challenges determining qualifications for staff members or service providers known as youth practitioners. Grantees provided ongoing support to youth practitioners to meet their training needs and provide emotional support.
- Grant activities helped grantees and their partners to establish a shared vision of the comprehensive service models and their goals and facilitated agreement on individual model components.
- A shared vision for individual model components and CQI processes helped grantees and partners identify and overcome challenges during initial enrollment and service delivery.
- Although grantees and partners found grant activities helpful and appreciated support from the evaluation TA liaisons, they perceived a lack of clear guidance for documenting completion of these activities.

A. What did grantees do to prepare for and promote implementation of the comprehensive service models?

Grantees took various steps that facilitated implementation of the models. For example, having committed leaders and established partnerships helped support implementation, as did holding meetings to discuss the model, developing effective hiring strategies, and providing training and support to youth practitioners. Below we discuss some of these approaches in more detail.

"I think [the project's leaders] are doing a great job, in my mind, on supporting all of us [youth practitioners] and wanting the youth to be successful and just leading the program in general. I think they're doing phenomenal."

—Youth practitioner

Respondents described the importance of committed leaders who facilitate implementation by engaging stakeholders at all levels and identifying solutions for emerging problems. One grantee found it helpful that the project director was highly collaborative and took initiative to identify and

engage stakeholders at all levels who were critical to implementation. Some grantees reported that their project leaders directly supported the youth practitioners, which enabled these leaders to understand challenges and identify strategies to address them. Youth practitioners in particular noted the importance of the support they received from project leadership.

Grantees with established partnerships could start implementing their models more quickly because partners were already engaged and committed to the success of the model. These grantees had already done the work of engaging partners, obtaining their buy-in, and developing strong communication processes during YARH-1, and could focus on enrollment and service delivery in YARH-2. In contrast, one grantee perceived challenges in providing services in the first year of YARH-2 because although they had established a contract, they felt they did not have an established partnership with a necessary service provider. Additionally, poor communication with the service provider's technical assistance team further complicated provision of the service.

> **"[All stakeholders] really care about the program and we all want to see it succeed."**
>
> ***—Local evaluator***

To engage partners in implementing the model, grantees most commonly held regular meetings to discuss the model. All six grantees started holding regular meetings during YARH-1 and continued them in YARH-2. Some grantees reduced the frequency of meetings from once a week to once a month, as they moved from installation activities to service delivery. Grantees spent time during meetings sharing stories about how the services benefitted youth, which they reported helped to engage county child welfare workers. One grantee engaged key partners, such as child welfare workers and homeless shelter staff, by having them shadow youth practitioners during service delivery to better understand the model services and youth's experiences.

Service providers faced challenges hiring youth practitioners who were qualified to deliver intervention services. A couple of grantees reported that initially youth practitioners did not have adequate training, and it took time to assess training needs and develop the training accordingly. For example, one grantee reported that youth practitioners did not initially provide adequate support to youth, and it took the entire first year for the grantee to identify the problem and provide training accordingly. Another grantee faced challenges hiring youth practitioners with experience in the child welfare system (referred to as "lived experience"). Hiring youth practitioners with lived experience resulted in unexpected challenges, because some of these staff were struggling with the same issues as the youth, such as unstable housing or mental health conditions, and could become emotionally "triggered" by their clients' behaviors or problems. Many did not have experience working with youth or with professional employment in general. The grantee ultimately refined its hiring strategy to find candidates who had more qualifications to do the job, while still preferring candidates with lived experience.

Grantees emphasized the importance of providing ongoing training and support to youth practitioners. Over time, youth practitioners' needs for training and support changed as gaps in their skills or knowledge came to light, or they felt emotionally burdened by the work. Some grantees held regular (for example, quarterly) workshops focused on skill building around a specific concept, in addition to regular meetings where youth practitioners presented challenging situations they were facing and discussed with their peers how to handle those situations. Grantees noted the importance of providing emotional support to youth practitioners, because their work could be stressful or trigger their own past trauma, especially for staff with lived experience in foster care. Topics covered in training sessions included introduction to the model, how to identify youth's needs and strengths, skill building, role

playing around challenging situations, how to practice restraint in emotional situations, de-escalation, problem management, coping with trauma, introduction to county/DSS services, and acronyms. Youth practitioners typically received training when they were hired, as well as regular, ongoing training.

B. How did grantees benefit from engaging in the grant activities?

Grantees found the grant activities helped them in various ways to reflect on and refine the model, identify areas that were working well or needed improvement, and use CQI to adjust services and supports as needed. The grant activities are listed in Exhibit I.1.

According to respondents, the grant activities facilitated communication among grantees and their partners, helping them to achieve a shared vision of the model. Respondents said that completing grant activities gave stakeholders something tangible to discuss during meetings and facilitated a common language to discuss the model, including services and supports that were working well or needed improvement. For example, two respondents said grant activities helped them realize that they needed to provide more training on risk assessments and progress notes. Respondents said the grant activities forced them to ask important questions about their models that they had not considered, such as what supports and services were unclear, or whether the theory of change as initially developed reflected the realities of working with the target population. A few grantees noted that the grant activities helped them distinguish their intervention from other services youth can access in the community. One grantee found other tools that helped facilitate communication as well, such as the tools developed for other grant efforts that were made available to YARH-2 grantees.

> **"Having these [grant activities] in general to walk through and say, this is what we're focusing on, we need to better define this, or we need more detail here, or this doesn't quite work, and we need to go back and revise this. Having that framework to work from within the [grant activities] was helpful, just in general."**
>
> ***—Local evaluator***

Respondents reported that CQI supported implementation by facilitating quick changes to services and supports, ensuring the model was reaching its goals, and supporting grantees' efforts to engage partners. At one grantee, youth practitioners entered youth information directly into a database in real time, which enabled the grantee to closely monitor implementation and quickly identify and resolve issues. Grantees noted that they reviewed CQI measures and benchmarks (like those related to enrollment and youth outcomes) with partners to demonstrate the benefits of the comprehensive services model and facilitate conversations about changes needed to keep the model progressing toward its goals. One grantee built on previous CQI experiences to quickly develop tools and processes to use CQI to support model implementation. This grantee reported that they had used evidence-based CQI strategies, such as Plan, Do, Study Act cycles before they started YARH-1, so they had the resources, organizational culture, and processes in place to use CQI.

> **"I think [CQI has] really generated some really great [conversations], we've just had this continuing dialogue about what's happening with the program and how do we make it better."**
>
> ***—Local evaluator***

C. What challenges did grantees face completing the grant activities?

The main challenge that grantees experienced with the grant activities was a lack of clear guidelines for documenting the completion of the activities. Respondents said it would have been helpful to receive clear guidelines about how to document the completion of grant activities, including the long-term vision of how the information would inform the formative evaluation, the expected level of effort needed to complete the documentation, and the anticipated due date for each activity. Respondents felt that they did not receive complete information or enough advance notice for completing the grant activities. Grantees struggled with multiple rounds of feedback on a single document, which sometimes seemed contradictory.

IV. YARH-2 Grantees' Experiences Implementing Their Comprehensive Service Models

In this chapter, we describe grantees' initial experiences with enrolling youth and delivering services. During this initial implementation stage, grantees and their partners put into place new services and supports and made improvements as needed to deliver services with fidelity to the comprehensive service models (model). During interviews, we asked respondents to reflect on their experiences with facilitators of and barriers to implementing each model component. In this chapter, for each model component described in Chapter II, we address one research question:

- What supported and hindered grantees' efforts to implement the components of their comprehensive service models?

Key Takeaways

- Across grantees, supportive and engaged partners facilitated all aspects of the service models, including identifying eligible youth, recruiting and enrolling eligible youth, engaging youth in services, and supporting youth to achieve their goals. When partners were not engaged in model services, this challenged implementation, especially for grantees that relied on partners to refer and encourage youth to enroll.
- Overall, grantees faced significant challenges engaging youth in services. Youth withdrew for various reasons, including (1) feeling overwhelmed during enrollment, (2) getting discouraged when services were not responsive to needs, and (3) being hesitant to trust youth practitioners, particularly if youth had system-connected trauma.
- Youth engagement was facilitated by youth practitioners who were consistent and patient, were flexible with supporting youths' immediate needs and long-term goals, were invested in building trusting relationships with youth, and acted as role models to youth. In some cases, youth practitioners with lived experience were able to develop faster and deeper bonds with youth than those without lived experience.
- Incentives such as meals and gift cards were key to engaging youth in services. The support youth practitioners provided to youth when they were in a crisis helped them establish trusting relationships with the youth.
- Supporting youth to strengthen relationships with natural supports and connect with formal supports was challenging because it was difficult to identify natural supports and formal supports did not always prioritize youth's needs due to competing priorities.

The report discusses the same 13 components in this chapter and Chapter II. Chapter II describes each component and this chapter discusses the supports and barriers to implementing each component. The two chapters use numbers to facilitate connecting the information about a component across the chapters.

A. What supported or hindered grantees' efforts to implement their comprehensive service model?

1. Screening and assessing youth's risk factors to identify eligible youth

Grantees that were child welfare agencies said they needed to engage partners, such as homeless shelters and child welfare workers, to help identify, recruit, and engage youth. These grantees reported that youth's engagement in services depended on their partners' involvement. Therefore, it was important that partners understood and supported the services and communicated the benefits of model services to youth.

Respondents noted that using automated reports from an information management system to assess youth's risk factors and identify eligible youth offered efficiencies. They found this more efficient than relying on referrals from child welfare workers or manually reviewing data to identify eligible youth. During a transition period between two information management systems, one grantee experienced slow screening and reduced enrollment because program staff had to manually review administrative data to identify youth with a history of foster care.

2. Recruiting and enrolling eligible youth

Respondents noted that using a simple enrollment process allowed youth practitioners to immediately focus on developing a relationship with the youth, compared to using a more complex process. Examples of simplifying the enrollment process included hiring an enrollment coordinator to conduct all screening and enrollment tasks and establishing clear timeframes for enrollment activities. Respondents from about half of the grantees said they solicited youth feedback and revised their processes to make them more receptive to youth's needs. One grantee included a conversation about each potentially eligible youth identified in an automated screening process to ensure fit between youth and the model.

Similar to engaging partners to help identify eligible youth, respondents noted that engaging partners was critical for successfully recruiting and enrolling youth. Respondents described their efforts to improve coordination with partners and other referring entities during enrollment as important for the recruitment and enrollment process to work well. A key part of this was educating partners about model services. This education helped to gain buy-in from key partners and improve understanding of model objectives, which directly led to an increase in enrollment for one grantee. Respondents valued the opportunity their partnerships afforded to collectively address challenges encountered in recruiting and enrolling youth.

Across grantees, the first step of recruiting and enrolling eligible youth often involved a "warm handoff" between the youth's child welfare worker and program staff. The youth's child welfare worker would describe the services to the youth and then the youth and the child welfare worker would meet with the youth practitioner to further discuss the services and confirm the youth's interest. Respondents noted that, while the youth practitioner talked to the youth about the services, it was beneficial to include the youth's child welfare worker in the discussion. This helped convey a good first impression of how the services intended to support the youth and helped establish the new relationship between youth and the youth practitioner. The youth practitioners had various responsibilities in recruiting and enrolling youth, including administering screening tools, gathering youth's history, and laying the foundation for building a supportive relationship with the youth. Respondents noted that it was

important for youth practitioners to have a solid understanding of the screening tools and assessments, along with buy-in to services and supports for conveying an initial positive impression to youth.

Respondents across grantees indicated the initial information provided to the youth about model services could be overwhelming. Respondents described how youth had reservations about being involved with another service provider and establishing another relationship with a new adult. They noted that it could be difficult for youth to discuss their personal history with yet another stranger. To help youth understand model goals and services, as well as gather personal information from youth, some grantees opted for a series of meetings between the youth and the youth practitioner to help youth feel comfortable, assist them with completing enrollment paperwork, and support their understanding of the model. This required extending the enrollment period.

Respondents described encountering challenges during enrollment due to unstable partnerships and turnover and resistance among staff at referring entities. These challenges required grantees to continuously re-educate partners about model services, including gaining their buy-in to model goals and explaining the importance of their role in recruiting and enrolling youth. Some respondents noted that child welfare workers were initially hesitant to refer youth. Child welfare workers may have perceived that model services were similar to what they provided, failed to appreciate the value of the services, or considered the model "just another program" in the child welfare system. Some grantees said that they reversed this perception over time through collaborative efforts between youth practitioners and child welfare workers to jointly help youth, and as child welfare workers understood the value of the model services, they increased referrals of their youth.

Respondents from half of the grantees described challenges with the consent process that allowed them to provide services to youth. These challenges included obtaining consent from eligible youth's family or child welfare worker because of difficulties locating the family or staff turnover at the child welfare agency. Intermittent delays associated with a specific component was another path into a holding pattern for youth, similar to challenges with gaining consent for their involvement in the program.

Respondents across grantees described struggles with staying informed about the location of eligible youth and maintaining contact with them. Respondents identified three factors that contributed to losing connection with youth. First, models that were not based in a child welfare agency reported challenges with lack of direct access to eligible youth. For example, youth temporarily residing in shelters could leave before youth practitioners made contact or youth could cease contact with the youth practitioner for a period. Second, grantees faced challenges maintaining contact with youth who did not own or have access to a phone. Third, challenges arose when youth moved out of the grantee's geographic jurisdiction due to unaffordable housing costs. Challenges working with youth experiencing housing instability were not unexpected by the grantees.

3. Supporting youth's connection to model services

Respondents said that youths' general wariness of child welfare services and focus on their immediate needs created challenges to building a trusting relationship with their youth practitioner. Respondents noted that youth with a history of foster care can be suspicious of supports that come in and out of their lives and many have system-connected trauma. Youth may be accustomed to being deserted and may expect their youth practitioner to desert them. In addition, youth practitioners said that, as is common for all youth and young adults, youth tend to focus on their immediate needs and get distracted from their youth practitioner by their friends.

Respondents noted that the youth practitioner's personality was key to building trusting relationships with youth. They talked about the importance of youth practitioners being patient and flexible with youth, sensitive to experiences in the youth's life that may be influencing current behaviors, and focused on being a role model to youth. Respondents described youth practitioners with lived experience as having characteristics that facilitated building trusting relationships.

Respondents described benefits and challenges youth practitioners with lived experience faced engaging youth. They were able to engage with the youth earlier and in some cases on a deeper level, compared to youth practitioners who did not have lived experience. Youth practitioners with lived experience often shared their stories with youth to help the youth understand that they had been through similar experiences and had overcome similar challenges. Some respondents perceived that this increased a youth practitioner's ability to relate to youth. One youth respondent thought the model would be improved if youth who graduated from the model were hired as youth practitioners. He felt he could support youth because he understood the need for continued engagement, especially for youth who had lived in multiple group homes. In addition, he felt he could use his experience to build a bond with the youth. On the other hand, some youth practitioners with lived experience found it challenging to share their stories, because this involved reliving their own trauma. When they could relate to a traumatizing situation the youth were experiencing, it was difficult for them to not fall back into old patterns of behavior.

> **"He's engaging with our youth on another level because he's just younger and he's been in foster care and he speaks the language, once they actually start talking about stories, it's like wow, what do you do? …He's like a role model for them."**
>
> ***—Youth practitioner supervisor***

Respondents noted that a consistent connection with the same youth practitioner was important for keeping youth engaged; however, respondents across all grantees noted challenges with youth practitioner turnover. Turnover caused remaining youth practitioners to take on larger caseloads. In one model, youth respondents noted that youth practitioners who were new to the model or who were temporary substitutes for youth practitioners had not established a trusting relationship with youth and were generally ill-equipped for supporting the youth.

4. Regularly engaging youth one-on-one

Youth practitioners from a few grantees emphasized the importance of having access to resources they could use to help motivate youth to participate in model services. They generally used these resources to purchase things such as meals, coffee, snacks, and gift cards. The youth practitioners noted that meeting with youth over coffee or a meal was better than a formal meeting in an office. Youth respondents from one grantee confirmed that, when they first enrolled and before they understood model services, they only attended meetings with the youth practitioner and participated in activities because they received meals and gift cards. They said they would often come to the meetings hungry after school or work and appreciated being fed during the meetings. In models in which youth practitioners had access to funds to support youth in achieving their goals,

> **"We're dealing with youth who, initially, most of the time don't have any concept of why they're [in a] program. So they discover that along the way. Until they get to the place where their positive reinforcement comes from the dampening of their symptoms, prior to that point, it needs to look a lot like "we go and get Boba or Starbucks. When we meet, you get a treat."**
>
> ***—Youth practitioner***

respondents perceived this put youth at ease, because youth knew they could get help with covering their expenses, such as rent, groceries, or gas. One youth practitioner used model funds to split the cost of a prom dress with a youth, because one of the youth's goals was related to education and going to the prom was part of normalizing her education experience. The youth practitioner said they went shopping for a prom dress which was an excellent opportunity to engage the youth.

Respondents across grantees reported that engaging youth in services was a significant challenge, because youth's participation in services was voluntary. Youth were not required to interact with the youth practitioner and the grantees often did not have resources to motivate youth to participate. Respondents said that they depended largely on the youth's intrinsic motivation to engage with the youth practitioner and model services. Youth practitioners described trying to leverage the support they provided to youth when a crisis arose in the youth's life to build a trusting relationship with the youth.

5. Supporting youth to develop and achieve goals

Youth practitioners described needing to be flexible with youth when helping them to identify strategies for achieving their goals. Flexibility was particularly important when youth practitioners encountered challenges conveying to youth a realistic sense of what their goals should be. Youth practitioners from a couple of grantees said they did not judge youth's goals or discourage youth when their goals were not realistic. For example, one youth had a goal to get a tattoo. Because this goal was meaningful to the youth, the youth practitioner helped the youth develop a plan to achieve this goal, and in the process helped the youth develop self-advocacy skills which the youth applied to achieving other goals. Youth practitioners in another model said that if youth identified an unrealistic goal, they tried to discuss the best-case and worst-case scenarios to help the youth understand the realities of their goals.

Across grantees, youth practitioners observed that youth reacted differently to identifying goals depending on how they viewed their future. Youth practitioners perceived that youth who were eager to move forward in their life tended to engage in identifying goals. Whereas, they perceived that youth who had experienced significant trauma might not believe they would be able to achieve their goals or that the youth practitioner would help them achieve their goals, making it difficult for the youth practitioner to engage them in setting goals. To overcome this challenge, youth practitioners said they focused on building a trusting relationship with the youth.

Most respondents described a tension between meeting youth's immediate needs, which were often crisis-related, and focusing on long-term goals. By design, youth were eligible for the model services because they had risk factors that reflected a level of instability, such as being homeless or having mental health issues. Youth practitioners found it challenging to focus on both crisis-related needs and long-term goals, particularly in the first year, when youth were frequently in crisis. In addition, respondents noted that it was difficult to identify and maintain a focus on concrete goals, because youth's circumstances were constantly changing.

In most models, youth practitioners reported that they would reassure youth who got frustrated when they were not achieving their goals, telling them it would be okay if they did not achieve those goals. The youth practitioners said that if the youth were frustrated about an unattainable goal, the youth practitioner would use that as an opportunity to revise the youth's goals. Youth respondents said that they appreciated that the youth practitioners were supportive of them when they were not achieving their goals and did not judge them or make them feel bad. However, youth respondents in one model said that they felt pressure from their youth practitioner to achieve their goals.

6. Supporting youth to strengthen relationships with relatives, peers, or adults with whom the youth feel a connection

Respondents from each grantee emphasized the importance of youth strengthening relationships with natural supports to help them achieve long-term stability. As one youth practitioner explained, natural supports are more permanent than formal supports, and can provide a safety net to prevent youth from being in crisis. For example, natural supports may prevent homelessness that some youth experience when transitioning between housing by allowing the youth to temporarily stay in their home. Moreover, natural supports are always available, unlike formal supports whose availability can quickly change based on funding or youth's eligibility.

> **"One of the lessons that was so important: in the child welfare world, we're all used to finding legal permanency, whether it's adoption or subsidized kinship or return home. But [the grantee taught us that] we also need relational permanency, regardless of the legal permanency. The [natural support] connections... determine the quality of your life as an adult."**
>
> ***—Partner***

All grantees described their struggles to identify natural supports for youth and facilitate connection. The most common challenge youth practitioners faced in strengthening youth's relationships with natural supports was identifying appropriate relatives and friends. Youth practitioners noted that youth with a history of foster care often are separated from family and friends or experience turnover of people in their lives, and therefore they have very few, if any, reliable natural supports. One respondent explained that the most common candidate for youth's natural support is their intimate partner; however, this support ends if the relationship ends and may not be reliable long term. Respondents found that youth may not be accustomed to or comfortable with relying on their natural supports and were resistant to building these relationships.

7. Helping youth connect with formal supports

Despite youth practitioners' efforts to help youth engage with formal supports in the child welfare system, respondents found that formal supports were not always able to prioritize youth's needs. Program staff perceived that the professionals in the child welfare system who were youth's formal supports were overly busy, resulting in unresponsiveness or delays. Youth practitioners explained that this fueled youth's resistance to collaborating with formal supports, since youth were predisposed to distrusting formal supports based on previous negative experiences. Youth practitioners tried different approaches to overcome this resistance. These approaches included modeling ways to handle frustrating situations, sharing strategies for effective interactions, helping youth understand the role and perspective of the formal supports, and giving youth time to warm up to the formal supports.

8. Convening or participating in meetings to support the youth in achieving their goals

Youth practitioners attempted to focus these meetings on the youth's needs, whether they were required as part of model services or part of state or federal transition planning. Respondents described various strategies youth practitioners used to keep the meetings youth centered. These strategies included preparing the youth to effectively communicate and advocate for their needs, understanding the youth's perspective before the meeting, and supporting the youth's voice during the meeting.

Youth practitioners described many challenges getting youth's various formal and natural supports to attend meetings, despite youth practitioners' efforts to engage supports. These efforts included communicating to supports that they were expected to attend meetings, scheduling meetings at times when supports were available, and sending supports reminders in advance of meetings. Youth practitioners said that supports were often not able to make the meetings a priority. One youth practitioner perceived that the supports were resistant when they did not agree with the youth's goals. One youth practitioner commented that this was a good opportunity to model how to be persistent with formal supports for the youth.

9. Supporting youth in using local resources and community services

Youth practitioners from a few grantees noted that youth were easily discouraged from pursuing community services, because these services were not responsive to youth's needs. For example, employment services are generally designed for adults and not for youth or young adults. Respondents from one grantee noted that the youth practitioners were well connected with community services, and often went with youth to help them access the services.

10. Using assessment tools to gather information about youth

Youth practitioners expressed different perceptions of the utility of the assessment tools, which influenced the extent to which they used the tools to inform their work with youth. In a few models, youth practitioners said they found the assessment tools helpful, because they provided a framework to guide conversations with youth and highlighted where they needed support such as strengthening relationships with natural supports and where youth had made improvements. In a few other models, youth practitioners viewed the assessment tools as a model requirement and did not use the information from the tools. They said it was challenging to engage youth in completing the assessments because they included questions that made the youth uncomfortable, for example, questions about mental health or drug use. A few youth respondents stated that the questions on the initial assessment made them uncomfortable because, at the time of completing the initial assessment, they did not know their youth practitioner very well.

> **"I think they do the assessment too soon in the relationship between [youth practitioner] and client … because I just recently did my exit assessment because I'm about to be out of here soon. I realized I lied a whole lot more on the first one than my last one because I was more comfortable with telling her and we've already been talking about it for a year."**
>
> ***—Youth***

11. Connecting youth to housing

The grantee that supported all enrolled youth to apply for and maintain housing said many youth moved into apartments without having had opportunities to develop skills to maintain a home. Respondents from this grantee reported that they were delivering services focused on keeping youth from being evicted from the homes they obtained with the voucher. They described various examples of youth's needs that threatened their ability to maintain their homes and how the youth practitioners tried to address those needs.

Examples of needs that threatened youth's ability to maintain their homes and youth practitioners' efforts to meet those needs (as reported by youth practitioners)

- Youth struggled to build positive relationships with landlords. Youth practitioners coached youth on being proactive, negotiating with landlords, and understanding the landlord's perspective.
- Youth were unaccustomed to being self-reliant. Youth practitioners needed to give youth time and support to become less reliant on the systems that had been a part of their lives for so long.
- Youth struggled with living independently – including paying rent and keeping their home clean. Youth workers helped youth understand expectations to decrease the chance of eviction.

12. Providing therapy

Respondents from the grantee that was providing the therapeutic approach said training the youth practitioners to deliver the therapy was a challenge. The youth practitioners received training from the organization that developed the therapeutic approach and they received regular coaching from a consultant trained in the therapeutic approach. The youth practitioners reported that they felt the most prepared to lead a weekly session when they had observed another youth practitioner lead the session. They said this helped them engage the group and keep it from getting out of control.

The youth practitioners from the grantee providing the therapy suggested that the curriculum could be more culturally responsive to diverse settings. They said they were working with low income Black and Latino youth and the videos supporting the curriculum have middle-age white people explaining how to communicate during a crisis in a way that did not resonate with their youth.

13. Graduating youth

Across grantees, respondents noted the challenge of reducing youth's dependence on the youth practitioner for support after achieving their goals and graduating from the model. They highlighted the importance of helping youth build relationships with natural supports, relatives, peers, or adults with whom they have a connection, to facilitate the youth's transition out of the model

V. Perceived Benefits of the YARH-2 Comprehensive Service Models

In this chapter, we describe youth's experiences with the comprehensive service models (model) and how the implementation of these models may have influenced changes in the child welfare system. We address the following research questions:

- How are youth benefiting from the comprehensive service models?
- How are the comprehensive service models resulting in changes in how youth receive services within the child welfare system?

Key Takeaways

- The service models prioritized using youth-centered approaches and establishing a trusting relationship between the youth practitioner and the youth.
- Youth felt their youth practitioner supported them, was focused on their needs and invested in their goals, and helped them advocate for themselves.
- The therapeutic interventions helped youth understand their emotions and potential trauma triggers.
- The service models were resulting in stronger relationships in child welfare systems and were increasingly recognized as an extension of existing child welfare services.

A. How are youth benefiting from the comprehensive service models?

The models benefited youth by providing opportunities for youth practitioners to establish trusting, personal relationships with them and act as role models. These trusting relationships with youth practitioners supported youth in many aspects of their lives, including making good decisions, expressing their needs, and working toward their goals.

Youth practitioners reported that they could give youth more time and attention and they were learning youth-centered approaches to encourage youth to believe in themselves, advocate for themselves, and create their own solutions to challenges in their lives. Youth practitioners perceived value in their previous experiences, because those experiences helped them appreciate that, under the models, they were better able to provide youth with steady, consistent, one-on-one support. Respondents noted using different communication approaches compared to their previous work with youth, so they could better relate to youth. For example, rather than employing prescriptive approaches to engaging youth and putting strict expectations on youth, youth practitioners encouraged youth to actively participate in planning and setting expectations for achieving their goals. Respondents

> **"This is the kind of work I think we all thought we were getting into when we started child welfare, that you were going to get to spend all this time with people and really help them navigate life and move through it and accomplish things and not bogged down by a lot of systems issues…You don't have the rest of the family system to have to work with. It really is all focused on this young person. And that's not something most of our caseworkers ever do because they have that larger family focus in mind."**
> ***—Program director***

noted that youth appreciated the flexibility offered by their youth practitioner and in some cases, met with their youth practitioner more frequently than required. In another example, if youth engaged in criminal behavior, the youth practitioner focused on the experiences in the youth's life that led to the behavior, rather than focusing on the youth's criminal behavior, which one respondent noted reinforced the youth's perceived lack of self-potential.

> **"I'm really there sitting beside [the youth], and I think that they much prefer that approach than somebody telling you what to do or talking at you or, you know, like so many people I think have done in their lives."**
> ***—Youth practitioner***

Across grantees, respondents described how youth practitioners prioritized establishing a trusting relationship with the youth. Youth respondents said that they valued their relationship with youth practitioners, who motivated ongoing engagement by supporting them to achieve their goals. Respondents noted that youth with a history of foster care often do not develop relationship-building skills. These respondents perceived benefits of youth developing trusting relationships with their youth practitioner, which they suggested, could increase the youth's ability to develop relationships with natural and formal supports.

Youth respondents' perceptions of how the youth practitioner supported and validated their needs

- Youth connected with their youth practitioner on a personal level.
- Youth viewed their youth practitioner as a role model who encouraged them to make good decisions.
- Youth felt supported by their youth practitioner during interactions with their child welfare worker. "[Youth practitioner] helped me [with] what to say, because I get in panic mode when I'm around people. It was really helpful."
- Youth felt their youth practitioner provided a support system in all aspects of their life.
- Youth learned from their youth practitioner's coaching how to be professional on the phone when scheduling a training for a new job.

Youth respondents reported that they liked being in touch with their youth practitioner on a regular basis because the youth practitioner supported them and was invested in helping them achieve their goals. One youth said she appreciated the youth practitioner's flexibility in finding a time and place to meet, especially when the youth was busy with school and a job. She appreciated that the youth practitioner celebrated her successes. Another youth said that she met with her youth practitioner regularly and her youth practitioner was frequently in touch with her via text message, which the youth found helpful for working toward her goals. However, youth in one model expressed a desire to spend more time with the youth practitioner without focusing on program-related paperwork.

Across grantees, respondents perceived that the models supported youth in expressing their needs and requesting services according to their preferences, needs, and goals. They suggested that youth's voices may have been limited in the past because youth were generally required to engage in services that had been selected for them. Youth respondents echoed this. They felt that their youth practitioner really listened to them, cared about what they wanted, and gave them individualized support in achieving their goals, including those related to housing and education.

> **"…it's the first time I felt like I was [being listened to], or that this was my meeting."**
>
> ***—Youth practitioner, quoting a youth participant***

Youth practitioners and youth respondents described how model services helped youth better advocate for themselves in their interactions with formal supports. Youth practitioners coached youth on how to effectively communicate with formal supports to make sure their needs were being met. Both youth practitioners and youth respondents described how this resulted in some formal supports making their approaches more youth centered. For example, one youth reported that, after her youth practitioner began coming to her child welfare planning meetings, the youth felt that other attendees were more likely to take her perspective and opinion into account. Another youth described how observing the youth practitioner communicate with her formal supports helped her communicate more effectively with these individuals.

Respondents perceived that convening meetings with the different supports in the youth's life helped align supports behind the youth's goals. Primarily, this occurred by holding the supports accountable for their role in helping the youth achieve their goals. Respondents described how these meetings provided a platform to facilitate conversation for collaboratively identifying and coordinating services that would help the youth achieve their goals, for example, tutoring services, educational programs, or employment training. Respondents said that youth practitioners used these meetings to keep supports accountable to the youth, by following up on whether the support completed the tasks agreed upon during the previous meeting.

Youth practitioners from the grantee providing the therapeutic model perceived that youth liked the model's services because they helped youth understand and effectively communicate their emotions. Youth from this grantee gave examples of how the youth practitioners helped them calm down when they were frustrated. However, the youth said they wished that sometimes they could vent their frustrations instead of immediately talking about how they could better communicate their emotions.

Respondents using the trauma-informed approach to deliver model services found this approach helped them support youth by addressing trauma-related obstacles that were holding them back in their lives. In addition, youth practitioners said that understanding youth's past trauma gave them insight into the youth's potential trauma triggers and helps youth address trauma-related obstacles to achieving their goals.

Respondents perceived that, over time, the model services were empowering youth and increasing youth's self-advocacy skills. Respondents, including youth, described how youth practitioners supported youth in expressing their needs and articulating their goals during program-specific or transition-planning meetings and in court. Respondents said they observed that youth were learning to hold people accountable, including their child welfare worker, which they felt increased youth's confidence and engagement in the services. However, youth respondents in one model expressed the desire to have

greater control of their meetings because they did not perceive the meetings were youth-driven or served their interests.

B. How are the comprehensive service models resulting in changes in how youth receive services within the child welfare system?

Respondents described how the implementation of the models was resulting in stronger relationships and learning among local child welfare entities. Respondents in most models described cultivating relationships that were changing conversations within the child welfare system. Entities involved in those conversations included public housing departments, community service providers, local businesses, and runaway and homeless youth providers. Developing stronger relationships facilitated sharing information about challenges experienced by youth, the model's services and goals, resources available to youth, and best practices among local child welfare entities. This information sharing benefited youth who were not participating in model services.

Respondents noted that model services provided by the youth practitioners were increasingly appreciated and recognized as an extension of existing child welfare services. The models, and their youth practitioners, helped address challenges child welfare workers faced related to large youth caseloads and insufficient resources. Respondents suggested the large caseloads and limited resources limited child welfare agency's ability to deliver individualized, youth-centered services comparable to services delivered under the new models. Respondents perceived these agencies increasingly recognized the value of the models' focus on building relationships between youth and youth practitioners and the youth practitioners' ability to provide youth with immediate, consistent, and individualized support.

VI. Recommendations and Conclusions

In previous chapters, we described how grantees promoted implementation of their comprehensive service models (model). We described a range of stakeholders' experiences with implementing the individual model components and the perceived benefits of the models to youth and child welfare systems. In this chapter, we present recommendations for implementing models intended to reduce homelessness among youth with child welfare involvement, based on a synthesis of the findings discussed in the previous chapters.

A. Building from success: What worked and how to strengthen it

This process study found various factors that promoted implementation and initial service delivery of the models. Below we describe strategies that stakeholders interested in youth homelessness and child welfare issues who are preparing to implement such a model could consider to enhance implementation.

Informed and involved leadership **Engaged stakeholders**

- Ensure leaders have current information about the comprehensive service model and its implementation.
- Protect leaders' time for regular meetings with all program stakeholders.
- Ensure that leaders engage with stakeholders at all levels of implementation.

Prepare leaders for success. Implementing the models required leadership oversight and coordination of a range of activities, including documenting an implementation blueprint, hiring and preparing staff, establishing processes to support service delivery, and refining service delivery as challenges emerged. Respondents described how leaders facilitated implementing the new services by (1) having in-depth knowledge of the services and supports; (2) meeting with partners regularly to promote support for the model; and (3) engaging stakeholders at all levels, including leadership at state or county child welfare agencies, service providers, and referring entities.

Engaged stakeholders **Faster start-up, focus on CQI**

- Establish a coalition of stakeholders during the planning phase, well before implementation.
- Rely on the coalition of stakeholders to be involved in CQI activities during implementation.

Engage stakeholders in planning. Grantees that established a committed coalition of program staff and partners during the YARH-1 planning phase began enrolling and delivering services to youth more quickly and consistently than grantees that had not successfully engaged these stakeholders before implementation. For example, grantees that had an established coalition of partners committed to the model could focus on improving enrollment workflows, rather than educating referring entities or obtaining buy-in from service providers.

Documented implementation blueprint | **Shared vision among stakeholders** | **Clear communication among stakeholders**

- Develop a formal implementation blueprint that includes a logic model and theory of change.
- Involve all stakeholders in developing the implementation blueprint.

Document an implementation blueprint. Under YARH-2, CB recommended that grantees complete activities, such as developing a logic model and conducting usability tests, intended to help grantees implement their models and prepare for summative evaluation. Grantees found the grant activities helpful for establishing agreement on intended model outcomes, identifying target populations, clearly defining the distinct model components, and assessing the scope of model-related changes. Respondents noted that documenting these activities helped grantees and their partners achieve a shared vision of the model, program goals, and implementation strategies, and facilitated communication during implementation.

Established continuous quality improvement | **Resolve implementation challenges** | **Engaged stakeholders**

- Collect and summarize implementation data and share with stakeholders to monitor implementation.
- Establish implementation milestones or benchmarks to identify successes and challenges.

Establish continuous quality improvement (CQI) processes. Grantees described using CQI to quickly identify and resolve challenges that emerged during implementation. Grantees also described using CQI measures and benchmarks to engage partners by demonstrating the program benefits and facilitating discussions about challenges and potential solutions.

Hire staff committed to engaging youth | **Trusting relationships between youth and youth practitioners**

- Emphasize the important of being patient and flexible with youth.
- Encourage youth practitioners to be sensitive to the youth's past experiences and not focused on their failures.
- Ask youth practitioners to agree to commit to providing consistent support to the youth until they graduate from the program.

Hire youth practitioners who are committed to engaging youth. In all models, youth were assigned to a youth practitioner who supported them until they graduated from services. Across models, youth practitioners used various methods to support youth to address past trauma, build life skills and confidence to self-advocate, engage natural and formal supports, and access community resources. Respondents described an array of youth practitioner characteristics they found to be important for building trusting relationships with youth. These characteristics included being patient, flexible, sensitive to the youth's past experiences rather than focused on their failures, and committed to providing consistent support to the youth until they graduate from the model. Respondents described lived experience as an important youth practitioner characteristic.

Resources provided to youth **Encourage youth engagement**

- Provide meals and gift cards to encourage youth participation in services.

Access funding to encourage youth to participate. Youth practitioners described the importance of having access to resources to motivate youth to participate in services, specifically meals and gift cards. This was particularly important during the initial stages of engagement when youth were still getting a sense of how and whether the program would be helpful.

B. Challenges encountered and suggestions for addressing them

Below we describe implementation challenges that stakeholders interested in youth homelessness and child welfare issues who are preparing to implement such a model should anticipate and suggestions for addressing them. For example, those who are implementing programs should prioritize hiring youth practitioners who are committed to engaging youth in services, engaging partners in implementation, and encouraging youth to participate from enrollment through graduation from services.

To minimize the effect of staff turnover, educate partners often. Respondents described challenges related to staff turnover in referring entities, which negatively impacted referrals. Grantees continuously re-educated these entities and promoted buy-in to model services and the potential benefits to youth.

To encourage initial youth engagement in services, focus on the youth's individual and immediate needs and support them in developing long-term planning skills. By design, youth were eligible for the models because they were in crisis or facing challenges in their lives. Respondents described challenges engaging youth in most model services, starting with enrollment. For example, youth would agree to participate in model services and then become discouraged when services were not responsive to their needs. In addition, respondents suggested that when youth enrolled, they often had reservations about being involved with another adult. Therefore, they were hesitant to trust youth practitioners, particularly if they had system-connected trauma.

To encourage ongoing youth engagement in services, anticipate challenges to youth's engagement and validate their frustrations. Respondents described how youth who seemed to be engaged in services would become disengaged because of other things going on in their lives. For example, challenges such as being distracted by friends, balancing a job and school, housing instability, and the natural struggles of transitioning to adulthood would make it difficult for youth to remain engaged. Respondents noted that youth could become discouraged when they were not achieving their goals or when formal supports and services were unresponsive to their needs. Respondents described how reassuring youth that it was okay that they were not achieving their goals—and coaching youth through interactions with formal supports—were effective for setting youth's expectations and validating their frustrating experiences.

C. Conclusion

The findings from the YARH-2 process study demonstrate that youth engagement with services is a key challenge and an important factor in successfully implementing the models. Future research should explore effective strategies for engaging youth in services, such as those provided under the YARH-2 grants. Evidence is needed about the concrete actions that can reinforce youth's positive impressions and experiences and overcome challenges related to discouraging impressions and experiences.

The CB and OPRE funded YARH-3 to be a summative evaluation of at least one of the YARH-2 comprehensive service models. The YARH-3 summative evaluation will include both an impact and an implementation study. These studies may help the field learn even more about what works to prevent homelessness among youth and young adults with child welfare involvement and what is required to implement those programs well.

References

Administration for Children and Families. "Implementation Grants to Develop a Model Intervention for Youth/Young Adults with Child Welfare Involvement At-Risk of Homelessness." HHS-2015-ACF-ACYF-CA-0961. Washington, DC: U.S. Department of Health and Human Services, 2015.

Alexander, J.A., and L.R. Hearld. "Methods and Metrics Challenges of Delivery System Research." *Implementation Science,* vol. 7, no. 15, 2012.

Brandford, C., and D. English. "Foster Youth Transition to Independence Study: Final Report," Seattle: Washington State Department of Social and Health Services, Office of Children's Administration Research, 2004.

Children's Bureau. "Comparing Outcomes Reported by Young People at Ages 17 and 19 in NYTD Cohort 2." Data Brief #6. Washington, D.C: Children's Bureau, Administration for Children and Families, 2017. Available at https://www.acf.hhs.gov/sites/default/files/cb/nytd_data_brief_6.pdf, Accessed June 4, 2020.

Courtney, M.E., A. Dworsky, G. Ruth, J. Havlicek, A. Perez, and T. Keller. "Midwest Evaluation of the Adult Functioning of Former Foster Youth: Outcomes at Age 21." Chicago: Chapin Hall Center for Children, 2007.

Courtney, M., M. Pergamit, M. McDaniel, E. McDonald, L. Giesen, N. Okpych, and A. Zinn. "Planning a Next-Generation Evaluation Agenda for the John H. Chafee Foster Care Independence Program." OPRE report 2017-96. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, 2017.

Damschroder, L.J., D.C. Aron, R.E. Keith, S.R. Kirsh, J.A. Alexander, and J.C. Lowery. "Fostering Implementation of Health Services Research Findings into Practice: A Consolidated Framework for Advancing Implementation Science." *Implementation Science,* vol. 4, no. 50, 2009.

Dion, R., A. Dworsky, J. Kauff, and R. Kleinman. "Housing for Youth Aging Out of Foster Care." Washington, DC: Mathematica Policy Research, 2014.

Dworsky, A., K.N. Dillman, R.M. Dion, B. Coffee-Borden, and M. Rosenau. "Housing for Youth Aging Out of Foster Care: A Review of the Literature and Program Typology." Washington, DC: U.S. Department of Housing and Urban Development, Office of Policy Development and Research, 2012.

Metz, A., and L. Bartley. "Active Implementation Frameworks for Program Success: How to Use Implementation Science to Improve Outcomes for Children." *Zero to Three Journal*, vol. 32, no. 4, 2012, pp. 11–18.

Reilly, T. "Transition from Care: Status and Outcomes of Youth Who Age Out of Foster Care." Child Welfare, vol. 82, no. 6, 2003, pp. 727–745.

Salazar, A.M., T.E. Keller, L. K. Gowen, and M. E. Courtney. "Trauma Exposure and PTSD Among Older Adolescents in Foster Care." *Social Psychiatry and Psychiatric Epidemiology,* vol. 48, no. 4, April 2013, pp. 545–551.

Stagner, M., M.C. Bradley, L. Klein Vogel, A. D'Angelo, E. Knas, A. Gothro, N. Fung, C. Powers, and J. Worthington. "Reducing Homelessness Among Youth with Child Welfare Involvement: An Analysis of Phase I Planning Processes in a Multi-Phase Grant." OPRE report 2017-51. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation, 2017.

U.S. Department of Health and Human Services (U.S. DHHS). AFCARS Report #26. Washington, DC: U.S. DHHS, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, 2019.

APPENDIX A
Document Review Template

This page has been left blank for double sided copying.

The purpose of this template is to standardize the criteria used to evaluate the implementation of each grantee's comprehensive service model (model). We used the document review template to systematically extract data from grantee applications, grantee profiles, semi-annual reports (SARs) completed and submitted by YARH-2 grantees, and notes from evaluation technical assistance (TA) site visits.

Program inputs (context, resources, and implementation supports). In Exhibit A.1, list descriptive information about the grantee and the context in which the grant is implementing the model. This information includes (1) the context in which the program is being implemented; (2) partners; and (3) resources needed to implement the program, including staffing. Data sources are listed under each input and include: the grantee application, grantee profile, or SAR.

Exhibit A.1. Program inputs

Program inputs Data source	Description
Program title Grantee application	
Grant date Grantee profile	
Grantee organization Grantee application	
Geographic area Grantee application	
Program partners Grantee profile	
Leadership structure Grantee profile	
Key staff (roles funded under the program) Grantee application	
Target populations Grantee profile	

Program design. Program design encompasses the components of the model, including discrete interventions, services, and supports designed to achieve the intended program outcomes. In Exhibit A.2. summarize each intervention activity being implemented, by component, under the auspices of the program. These activities reflect specific changes to infrastructure and service delivery that are designed to support the achievement of desired program outcomes and intended to become part of routine service delivery. In this table, summarize information on the strategies used to identify and enroll youth and young adults into the program. Do not include information about implementation processes, barriers, and facilitators; instead include in Exhibit A.4. Exhibit A.2 data sources are evaluation TA meeting notes, the grantee application, and the SAR.

Exhibit A.2 Program design

Components of the comprehensive service model	Description
Summary of overall model SAR, evaluation TA meeting notes	
Screening and assessing youth SAR, evaluation TA meeting notes	
Pre-service outreach, engagement, and enrollment activities SAR, evaluation TA site visit notes	
Direct service provision (intervention) SAR, evaluation TA meeting notes	

Grant activities. Grant activities are intended to support implementation of the models. In Exhibit A.3, include details about the progress the grantee is making on each grant activity. Exhibit A.3's data source is the SAR.

Exhibit A.3. Grant activities

Grant activity	Description
Describe the theory of change	
Develop a logic model	
Conduct usability tests of the model components	
Conduct a formative evaluation of the model	
Conduct continuous quality improvement	

Implementation experience (barriers and facilitators). In Exhibit A.4, summarize barriers and facilitators that emerged during each stage of implementation, by implementation activity. Exhibit A.4's data source is the SAR.

Exhibit A.4. Barriers and facilitators that emerged in each stage of implementation

Implementation stage	Description
Exploration **SAR** **1.** Define target population **2.** Define appropriate intervention **3.** Define desired outcomes **4.** Strengthen/establish partnerships and promote buy-in among local service providers **5.** Plan for implementation	

Implementation stage	Description
Installation: Plan implementation **SAR** **1.** Select necessary structural supports and functional changes to support implementation **2.** Plan processes and procedures to support implementation, including technical assistance **3.** Hire and train program staff, including directors and youth practitioners	
Initial implementation (description, barriers, and facilitators) **SAR** **1.** Risk assessment/Screening and assessing youth **2.** Youth enrollment **3.** Model services **4.** Youth engagement/ attendance **5.** Graduation	

This page has been left blank for double sided copying.

APPENDIX B
Semi-Annual Report Template

This page has been left blank for double sided copying.

A. Instructions

All grantees need to complete and submit the Administration for Children and Families (ACF) Performance Progress Report (or Semi-Annual Report [SAR]) at least six times in the course of Youth At-Risk of Homelessness implementation grants (YARH-2).

B. Major activities and accomplishments during the current six-month period

C. Problems

D. Significant findings and events

E. Dissemination activities

F. Activities planned for next reporting period

This page has been left blank for double sided copying.

APPENDIX C
Interview Protocol For Site Visits

This page has been left blank for double sided copying.

Introductory Script

Thank you for your time and agreeing to participate in this interview. I'm _____ and I work for Mathematica, an independent social policy research company.

We are conducting a study for the Office of Planning, Research, and Evaluation in the Administration for Children and Families at the U.S. Department of Health and Human Services. The goal of this study is to understand how the YARH-2 grant supported the work of developing and implementing a comprehensive service model to serve youth and young adults at risk of homelessness.

We have analyzed documents submitted as part of the grant—such as SARs—and we will analyze transcripts from these interviews to understand (1) the programs being implemented, including target populations, the critical program components, program outcomes, how grantees organized program implementation, and the facilitators and challenges of program implementation, and (2) the Phase II activities that grantees planned and completed, including defining PICO elements, usability testing, and formative evaluation, and (3) what grantees perceived as the major benefits and challenges of the implementation activities.

We would like to talk with you about your experiences and perceptions of the YARH-2 grant process and activities. Your responses will be kept private and used only for research purposes. We will not share your comments with anyone other than members of the Mathematica research team. Our team will use your responses in conjunction with other data sources to identify themes to describe the implementation experience. We will not attribute any comments to you, or your organization, or this grant, and no individuals will be quoted by name. Your participation in this discussion is voluntary.

These are all open-ended questions. There are no right or wrong answers. You are the experts, and we want to learn from you. We are not evaluating you or your organization.

We have many topics to cover during the discussion. At times, I may need to move the conversation along to be sure we cover everything.

I would like to record our discussion so that I can have this interview transcribed. No one besides the transcription service will listen to the recording. If you want to say anything that you don't want recorded, please let me know, and I will be glad to pause the recorder. Do you have any objections to being part of this interview or to my recording our discussion?

We want to reiterate that being part of this discussion is up to you, and you may choose not to answer a question if you wish. Being part of this discussion will not affect your employment or your involvement with the YARH-2 grant.

The discussion will last no more than one and a half hours, and we will not take any formal breaks. Please feel free to get up at any time if you need to do so.

Do you have any questions before we get started?

Warm-up

To start, would you please describe your role/involvement in the [PROGRAM NAME] program?

[Follow-up]

How long have you been in that role?

How long have you been involved in the [PROGRAM NAME] program?

How is the [PROGRAM NAME] program going?
(Probe on positive and negative aspects of the program.)

Experiences with the program

Now, I have some questions about your experiences with [INTERVENTION NAME], with regard to what you are doing to incorporate the program into the local child welfare system to make it a success.

Screening and assessing youth

1. How is the process of screening and assessing youth for enrollment in [INTERVENTION NAME] going?
   a. What has been challenging about screening and assessing youth for enrollment?
      i. How did you address/overcome this challenge?
   b. Is there anything that helps to make the screening and assessment process work well?
   c. How has the process of screening and assessing youth for enrollment changed over time?
   d. What have been youths' reactions to the screening and assessment process?
   e. How are your partners [PARTNER 1] and [PARTNER 2] involved in screening and assessing youth?
2. Your formative evaluation is focused on [POPULATION], will the screening and assessment process be different for the other populations of interest to YARH, [OTHER POPULATIONS]?

Recruitment and enrollment activities

1. How is the process of recruiting and enrolling youth into [INTERVENTION NAME] going?
   a. What has been challenging about recruitment and enrollment?
      i. How did you address/overcome this challenge?
   b. Is there anything that helps to make the recruitment and enrollment process work well?
   c. How has the process of recruiting and enrolling youth changed over time?
   d. What have been youths' reactions to the enrollment process?
   e. How are your partners [PARTNER 1] and [PARTNER 2] involved in enrolling youth into the program?

Direct service provision – [INTERVENTION NAME]

I understand that the [INTERVENTION NAME] intervention is organized into …, so I have questions about each …:

[When we interview youth:

1. We will first ask the staff which intervention activities each youth is in and only ask about the activities they have completed

2. We will rephrase the question to, "Can you tell me about your experience …"]

[PHASE OR ACTIVITY]

1. How is […] going?
   a. What has been challenging about […]
      i. How did you address/overcome this challenge?
   b. What has helped to identify those supports?
   c. How has the process of […] changed over time?
   d. What have been youths' reactions to […]?
      i. How are they benefiting from this?
   e. How are your partners [PARTNER 1] and [PARTNER 2] involved in […]?

Overarching questions about [INTERVENTION NAME]

1. Can you give examples of how [INTERVENTION NAME] is resulting in changes in how youth receive services within the child welfare system?
2. Can you give examples of how [INTERVENTION NAME] is resulting in changes to the child welfare system?
3. Do you see benefits to the [INTERVENTION NAME] intervention? Probe for examples
   a. How are youth benefiting from the [PROGRAM NAME] program overall?
4. How was the [INTERVENTION NAME] initially introduced to staff/partners?
5. Has [INTERVENTION NAME] been rolled out as planned? Why or why not? (Probe on changes overtime)
6. We know you are focused on [POPULATION], have you thought about if you were to provide this intervention to [OTHER POPULATION], would you use the same [INTERVENTION NAME] intervention?

Experiences with the implementation activities/templates

Now, I have some questions about your experiences with the implementation activities, primarily the templates that were required as part of the second phase of YARH.

1. Can you tell me about your experience with completing the templates?
   a. Was any template particularly helpful? How was it helpful?
   b. Was any template particularly challenging? How was it challenging?

Theory of Change

1. How has developing the Theory of Change helped you to implement the program?
2. What has been challenging about articulating the Theory of Change?

Logic Model

1. How has developing the Logic Model helped you to implement the program?
2. What has been challenging about developing the Logic Model?

Population, Intervention, Comparison, Outcomes (PICO) (completed, SAR #/#)

1. How has articulating the PICO elements helped you to implement the program?
   a. Populations?
   b. Intervention?
   c. Comparison? Has your team had conversations about what reasonable comparisons would be? What are they?
   d. Outcomes? Has your team had conversations about what reasonable outcomes would be? What are they?
2. What has been challenging about articulating the PICO elements? *(Probe on each element.)*

Rapid-Cycle/Usability Testing (completed for Pop #, SAR #/#)

1. How has usability testing helped you to implement the program? (Probe on individual tests.)
2. What has been challenging about usability testing?

Formative Evaluation

1. How has formative evaluation helped you to implement the program?
2. What has been challenging about formative evaluation of your program?

Process

1. Will you please tell me about your process for completing the templates and implementing the HFWRP program?
   a. Who was involved?
   b. How often did you meet?
   c. What helped you to complete the templates and implement the program?
   d. What was challenging about completing the templates and implementing the program?

Quality improvement

1. In addition to the work on the templates, have you set goals to support the implementation of [INTERVENTION NAME]? If yes, what are those goals, and how did you set them?
   a. How do you monitor those goals for progress? (Probe on data used to monitor goals)
   b. Who is involved in setting goals? Monitoring progress?
   c. [If the respondent describes a CQI process] Have you thought about how your CQI process could be used to support implementation in a summative evaluation to address implementation challenges and ensure fidelity to the [INTERVENTION NAME] model?

Staffing & Leadership

1. [If not discussed by leadership] Will you tell me about your experiences with recruiting and preparing staff (facilitators and peer support specialists) to support [INTERVENTION NAME]?
   a. What went well in your efforts to hire and prepare facilitators to support [INTERVENTION NAME]?
   b. What was challenging about hire and prepare facilitators to support [INTERVENTION NAME]?
   c. Probe on turnover if not already mentioned.
2. [If not discussed by frontline staff] Will you tell me about program leadership?
   a. How do they support you?
   b. How could they better support you?

Wrap-up

1. Is there anything else that has influenced the successful implementation of [INTERVENTION NAME] that we have not discussed?

Mathematica

Princeton, NJ • Ann Arbor, MI • Cambridge, MA
Chicago, IL • Oakland, CA • Seattle, WA
Tucson, AZ • Woodlawn, MD • Washington, DC

EDI Global, a Mathematica Company

Bukoba, Tanzania • High Wycombe, United Kingdom

Mathematica
Progress Together

mathematica.org