

In The SPOTLIGHT

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Designing Services for Youth and Young Adults At-Risk of Homelessness

Initial and ongoing implementation of YARH grantees' comprehensive service models

The Children's Bureau (CB), within the Administration for Children and Families (U.S. Department of Health and Human Services), is funding a multiphase grant program to build the evidence base on what works to prevent homelessness among youth and young adults who have been involved in the child welfare system. This program is called Youth At-Risk of Homelessness (YARH). YARH focuses on three populations: (1) adolescents who enter foster care from ages 14 to 17, (2) young adults aging out of foster care, and (3) homeless youth and young adults up to age 21 with foster care histories.

Eighteen organizations received funding for the first phase (YARH-1), a two-year planning grant (2013 – 2015). Grantees used the planning period to conduct data analyses to help them understand their local population and develop a comprehensive service model to improve youth outcomes related to housing, education and training, social well-being, and permanent connections. Six of those organizations received funding to refine and test their comprehensive service models during the second phase (YARH-2), a four-year initial implementation grant (2015 – 2019). During the third phase (YARH-3), Mathematica will continue to support the YARH-2 grantees (also known as sites) in building and disseminating evidence related to their comprehensive service model (2019 – 2024). In addition, Mathematica will design and implement a federally led evaluation of at least one intervention implemented by a site.

This spotlight is part of a series that summarizes high-level themes from a process study of grantees' activities and accomplishments during the implementation grant period. Additional details are available in the full <u>process</u> <u>study report</u>. The information in this spotlight comes from grant applications, semiannual progress reports submitted by grantees, and site visits with each grantee in 2019.

For more information on YARH, please see <u>https://www.acf.hhs.gov/opre/project/building-capacity-evaluate-interventions-youth/young-adults-child-welfare-involvement</u>.







Grantees took various approaches to facilitate implementation of the comprehensive service 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.

Committed leaders facilitated initial implementation by engaging stakeholders at all levels and identifying solutions for emerging problems. Respondents from one grantee found it helpful that the project director was highly collaborative and took initiative to identify and engage stakeholders at all levels. Some grantees reported that their project leaders directly supported the youth practitioners (caring and supportive adults who served as the primary contact for youth and young adults), which enabled these leaders to understand challenges and identify strategies to address them.

Grantees with established partnerships implemented their comprehensive service models quickly because partners were already engaged and committed to the success of the model. These grantees did the work of engaging partners, obtaining their buyin, and developing strong communication processes during YARH-1, and could focus on enrollment and service delivery in YARH-2.

Service providers faced challenges hiring qualified youth practitioners. Initially, youth practitioners did not have adequate training, and it took time to assess training needs and develop the training accordingly. Hiring youth practitioners with lived experience resulted in unexpected challenges. Some of these staff struggled with the same issues as the youth and young adults being served and could become emotionally triggered by the behaviors or problems of youth and young adults. For many, this was their first experience with professional employment and working with youth and young adults.

Ongoing training supported youth practitioners and facilitated implementation.

Over time, grantees identified training and support needs for youth practitioners, which focused on skills, knowledge, and emotional support. Some grantees held regular workshops focused on skill building around a specific concept, in addition to regular meetings in which youth practitioners discussed how to address challenging situations with their peers. Grantees noted the importance of providing emotional support to youth practitioners, because the work could be stressful or trigger past trauma, especially for staff with lived experience in foster care.

Grant activities facilitated communication among grantees and their partners, helping them achieve a shared vision of the comprehensive service model. Grant activities included (1) describing the model's theory of change, (2) developing a logic model, (3) conducting usability tests of model components, (4) formative evaluation of the model, and (5) continuous quality improvement (CQI). The Administration for Children and Families intended grant activities to prepare grantees to move to full implementation and summative evaluation of their models. Completing grant activities gave stakeholders something tangible to discuss during meetings and facilitated a common language. Grant activities forced stakeholders to consider new questions about their models, such as what services were unclear, or whether the theory of change reflected the realities of working with the youth.

CQI processes facilitated quick changes to services, ensuring the comprehensive service models reached their goals and guiding grantees' efforts to engage partners. Grantees noted that they reviewed CQI measures and benchmarks with partners to demonstrate the benefits of their model and facilitate

conversations about changes needed to keep the model progressing toward its goals.

Reference

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