Longitudinal Evaluation of Youth Advocate Programmes (YAP) Ireland

Youth Advocate
PROGRAMMES IRELAND

Centre for Youth Research and Development
Department of Applied Social Studies
National University of Ireland, Maynooth
Longitudinal Evaluation of Youth Advocate Programmes (YAP) Ireland

By
Prof. Maurice Devlin, Dr. Nuala Connolly, Dr. Kathryn McGarry & Berny McMahon
Centre for Youth Research and Development,
Department of Applied Social Studies,
National University of Ireland, Maynooth.

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Email: info@yapireland.ie
Web: www.yapireland.ie
Research Team & Contributors

Research Team
Professor Maurice Devlin, Department of Applied Social Studies, NUIM
Dr. Nuala Connolly, Department of Applied Social Studies, NUIM
Dr. Kathryn McGarry, Department of Applied Social Studies, NUIM
Berny McMahon, Department of Applied Social Studies, NUIM

Contributors
Emma Cassidy, Consultant Statistician
Ivan Privalko, Researcher
Thomas McCarthy, Youth Worker
Sinead O’Connor, Departmental Support Worker
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Executive Summary

Introduction
In 2002 YAP Ireland, through the support and backing of the Health Boards (now Health Service Executive), piloted the Youth Advocate Programmes (YAP) model in the North Dublin, Galway, Roscommon and Mayo areas. YAP Ireland uses a unique strengths based, family focused approach to provide intensive support for six months, to young people and families with complex needs at Level 3 and 4 of the Hardiker Scale referred by HSE children and families social work teams. Advocates recruited and employed from the local community provide up to 15 hours of one-to-one support per week for a young person and family. The Youth Advocate Programme (YAP) was originally developed in Pennsylvania in 1975 as an intervention for young people who were within the juvenile justice system and today YAP Inc. is one of the largest non-profit Youth and Family Support agencies in the US. The YAP model is based upon the development of a trust relationship between a supportive, trained and skilled adult Advocate, the young person and their family. The programme has since gone on to expand into regions across Ireland and is currently operating in 21 counties, with plans for further expansion. YAP Ireland is a registered charity managed by a voluntary Board of Directors, employing 32 permanent staff and approximately 150 Advocates on a fixed-purpose basis. YAP Ireland also provides Disability, Crisis Intervention, Aftercare and Family Support Programmes. In 2012, 528 young people and their families participated in YAP programmes.

The Research
The longitudinal evaluation of YAP Ireland sought to address the following research questions:

1. Is the YAP model effective in an Irish context?
2. Are the YAP programmes contributing to positive outcomes for young people and their families?

The research shows that YAP Ireland has a statistically significant impact on the outcomes of young people and families who participated in the programme and that staff are committed to the model and working in a strengths based way.

The Context
Despite significant advances of recent years, children and young people in Ireland continue to be faced with economic, social and psychosocial challenges, exacerbated by ongoing economic difficulties. The Central Statistics Office reports that children in Ireland are more likely to be in consistent poverty than their European peers, with 7.4% of children under the age of fifteen in consistent poverty in 2010 (CSO, 2012), with young females more likely to be affected. Further, the number of children in state care is rising, with the Department of Children and Youth Affairs (2012) report on the state of
the nation's children holding that the number of children in the care of the HSE increased by approximately 16% between 2007 and 2011, the majority (90.3%) living with foster families. An Amnesty International report (2011) also found that children and young people are subject to social exclusion, with 50% of those polled agreeing that wider society is particularly prejudiced towards vulnerable groups, including children in care, children who commit crime, Traveller children and children seeking asylum.

Recent research by the Children's Mental Health Coalition (2013) highlights the importance of supporting mental health in children and young people by building protective factors to support their resilience, self-worth and self-efficacy. The report emphasises the need to put greater emphasis on ‘at risk’ families, with young people experiencing mental health problems diverted from the youth justice system towards community services that address their need, including those that support the whole family.

Evaluations of advocacy and mentoring programmes for vulnerable young people have reported positive outcomes in a wide range of areas, supporting the argument for mentoring as a strategy. “The argument for using mentoring as an intervention strategy is particularly strong when there is an interest in promoting outcomes across multiple areas of a young person’s development” (DuBois et al. 2011, 58). A meta-analysis of 73 mentoring programmes directed at children and young people in the United States (DuBois et al., 2011) found that overall, mentoring programmes are effective in improving outcomes across behavioural, social, emotional and academic domains for young people’s development. It was also found that mentoring as an intervention strategy has the capacity to serve both promotion and prevention aims.

**Research Design**

The research design was mixed methods, incorporating qualitative and quantitative components. It was a ‘quasi-experimental’ design in that the quantitative component included demographic data collection from both a sample of YAP young people and from young people in a broadly similar comparator group who were not participating in YAP or any other structured youth service provision; a series of phased Strengths and Difficulties Questionnaires (SDQs) administered longitudinally to the YAP sample of young people, their guardians and the comparator cohort; and a mid-way fidelity study with the YAP cohort.

All new YAP programme participants from September 2011 were briefed on the study by their Case Managers and invited to take part. A total of 191 young people and 180 parents/guardians consented to participate in the research at baseline. By end-point, a total of 102 young people and 94 parents/guardians were still participating. As stated above, data was also collected from a comparator cohort of broadly similar young people. A quasi-experimental design was considered appropriate because a randomised...
control trial would not have been practicable or ethical in this case (Matthews & Ross, 2010). The comparator group was identified through engagement with youth work outreach services. A total of 130 comparator young people consented to participate in the research at baseline, with 69 still participating at end-point. While of interest for indicative purposes, it is not claimed that the comparator group findings have the robustness of an experimental control group. The data for this group, while referred to in the body of the report, is therefore included as an appendix.

The quantitative component of the research also included an online survey of YAP Advocates. The qualitative component included a series of phased one-to-one interviews with participants, their guardians and their Advocates; along with focus group interviews with YAP Managers and Advocates. Qualitative data was also collected from open-ended questions in the online survey of Advocates. Data was also collected through observation of YAP training sessions.

Information from the different components of the research is summarised below. For more details, please see the full report at www.yapireland.ie.

The Strengths and Difficulties Questionnaire (SDQ)
The Strengths and Difficulties Questionnaire (SDQ) (Goodman, 2005) is a brief behavioural screening questionnaire incorporating 25 attributes, some positive and some negative. The 25 items are divided into five scales including emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems and pro-social behaviour, as well as a composite total difficulties score. The SDQ is a widely used instrument in clinical assessment; outcome and intervention evaluation; and epidemiology. It is used as a research tool internationally, in developmental, genetic, social, clinical and educational studies. For the YAP participants and their parents/guardians, the SDQ was administered four times, at the baseline, mid-point and end-point of the six month programme, and again three months after completion. For the comparator cohort, the SDQ was administered to the young people only, at the beginning and end of a six month period.

SDQ Findings
The quantitative component of the research yielded predominantly positive results for young people engaged in the programme. SDQ total difficulties scores decreased from baseline to mid-point, and again to end-point for both parents/guardians and young people’s self-reports. The mean score for YAP young people’s self-reports moved from the ‘borderline’ category to the ‘average’ category for total difficulties. Similarly, the mean score for parents decreased, moving from ‘at risk’ to the lower end of the ‘borderline’ category. Parent/guardian scores show markedly higher improvements. Parents’ perceptions of difficulties were higher than self-reported at baseline. The changes were found to be statistically significant between the baseline and end-point
for both young people and their parents'/guardians’ reports. The figures indicate that there was an overall perceived improvement in difficulties for respondents who took part in the programme.

Comparing the end of programme score to the three month post-programme scores reveals that there is no significant change in the self-report scores, which suggests that the improvements made were sustained after the programme ended. This is true for four sub-scales, as well as for the total difficulties score. Of note, the pro-social scores improved significantly for self-reports in the post-programme findings, previously remaining statistically unchanged during the programme, possibly suggesting that benefits relating to this aspect of young people’s behaviour had accrued over time.

However, in the parent/guardian post-programme scores for total difficulties, a disimprovement can be reported, with the young people moving to the ‘at risk’ category. However, when outliers (extreme cases) are removed, this change is smaller. Given the relatively smaller number of responses at the three month post-programme phase, sufficient cases were not available to test significance of variance, and thus all of these findings need to be interpreted with caution. A further caveat is that parent/guardian perceptions and apprehensions regarding disengagement from the programme, as expressed in the qualitative strand of the research, may have influenced responses to this item.

**Young People’s Views through Interview Series**

Young people participating in the YAP programme also described beneficial outcomes when interviewed. On the whole, they reported positive experiences of their YAP Advocate, including references to the Advocates’ interests and hobbies, their ability to listen and offer advice, as well as their ability to engage the young people by ‘telling stories’, encouraging and joining in activities including supporting school work and, drawing on the YAP model, avoiding judgment and focusing on the strengths of the young person, while listening to their points of view.

“She is interested in most of the things that I am interested in so there is a lot to do and lots of things to talk about. We watch the same things, we like the same music and things like that. She is a great person.”

“You actually know someone is listening to you and taking in the information and being able to give you advice on it.”

“She will always make you feel good about yourself; she would talk to me about positive things.”

The approach is consistent with the ‘one good adult’ ethos adopted by YAP Ireland, drawing on the the Headstrong My World Survey (2012), which finds that the presence of one good adult makes it more likely that a young person will be connected, self-
confident, future looking and able to cope with problems (Headstrong, 2013). This is in keeping with long-established insights from the psychological literature: the importance of a mentor as a role-model in youth development is identified in Erikson’s life-stage psychosocial development theory (1959), while Bandura’s social learning model holds that a young person will reproduce observed behaviours and, if feeling motivated, will continue to engage with positive behaviours.

Qualitative data gathered during the interview series strand of the research indicates that young people on the YAP programme find the experience predominantly positive, reporting improved confidence and increased participation in activities and improved community engagement.

“It has changed me so far as being more open and more confident, getting out there, it has got me involved in stuff.”

Young people also reported improvements in their mental health, leading to decreased stress, in addition to increased self-esteem and resilience, and increased ability to cope with challenges.

“Maybe I don’t feel as stressed because I know if I have an issue I can talk to [my Advocate].”

“Yes, I think I have become stronger than before...when I am with [the Advocate], I can just tell her everything that I feel, she doesn’t judge me.”

These protective factors are noted as important to a young person’s self-worth, self-efficacy and mental health, particularly within ‘at risk’ families (Children’s Mental Health Coalition, 2013).

The Matching Process
Experiences of the matching process were predominantly positive, with young people and parents/guardians largely reporting positive relationships based on shared interests and tailored to the specific needs of the young person. One contrasting view arose in the interview series, with a guardian and their young person describing the matched Advocate as unsuitable. Findings from the survey of Advocates concur that the process is largely positive, with the majority of Advocates giving accounts of positive matches.

“I certainly think that yes we are matched well in terms of being able to communicate with each other. And I think [the young person] clearly needed a woman, a mother figure in her life so yes so far I think the match is good.”

“[The Case Manager] has done a great job on the match...it is working really well.”
Managers also described the process of matching as working very well, with the variety of Advocates providing a pool from which appropriate matches can be drawn.

“The variety on the panel gives us the opportunity to have really good matches with the young people.”

Again, a view was expressed that in some regions, it is not always possible to produce an ideal match, with logistical difficulties presenting.

**Activities and Community Engagement**

The young people participating in the interview series acknowledged changes in their level of community participation since joining the YAP programme. Those interviewed described their experiences before YAP, including a lack of social outlets and limited participation in community.

“On the weekends I would stay in bed until around 3pm or 4pm, lie around, get dressed and then I’d go out to the park and I’d come in. Sometimes I wouldn’t come in at all, I’d just stay out. [I would] stay in my friend’s house or stay all night in the streets.”

They described a range of activities undertaken with their Advocates, including dining out, going to the cinema, going bowling, taking walks and taking horse-riding lessons. Those interviewed were for the most part satisfied with the range of activities they were experiencing on the YAP programme.

“I love playing pool so we will look into playing pool. I think playing pool, going for walks and getting lunch are the main things that we would be doing.”

“We usually go to the library because [the Advocate] wants us to get our homework done and sometimes we go to [shopping centre].”

Advocates also identified many of the same activities undertaken with their young person, including food and drink based activities, excursions and entertainment activities including cinema visits.

Just under a quarter of Advocates indicated that they would like to have done other activities, with prohibitive factors including logistical and budget constraints, as well as differing levels of engagement of their young person.

“Like I mentioned earlier, I can’t take [the young person] to things that are costing €40, €50 and €60 and then expect that to be picked up [by the family], after the programme.”

The views of parents/guardians were largely positive. The young people taking part in the interview series also identified some challenges encountered while participating in
the YAP programme. The young people reported finding budget constraints prohibitive, and those in rural areas expressed interest in improved dedicated facilities.

“I think more money should be added to the budget because you can’t do a lot for €15.”

Length of Programme
Evidence indicates that the longevity of relationships impacts on youth outcomes in mentoring programmes (DuBois et al., 2002, Moore et al., 2002). It has also been reported that young people in programmes that terminated within six months reported disimprovements in several areas (Grossman & Rhodes, 2002), and that young people in relationships that lasted over a year reported greater improvements (Tierney et al., 1995).

While there was some acknowledgement that the six month period of intervention is short, the consensus among focus group participants was that this was a sufficient period to achieve results and improve the life of the young person. This is reflected in the statistical data collected for this study, with positive outcomes found. Managers conveyed the need to empower not just the young person, but also the parents or guardians, while also facilitating community engagement during this time.

“What we’re finding is that the reason they don’t want to be part of communities anymore is they find it very hard to cope...for example if conflict arose, how to resolve those issues, how to deal with conflict in school, at home.”

Some Advocates also expressed an interest in a phased wind down of the service, with some limited opportunities for contact between the Advocate and young person after the programme has ended. Despite this, longitudinal evidence from this study reports positive outcomes for young people participating in the programme over the six month period.

The Disengagement Process
Case Managers reported positively on the disengagement process, describing how the young person is prepared for the service wind down during wrap meetings and during their time spent with their Advocate. Managers also described YAP’s extension policy, indicating that occasionally the request for an extension may come from an external service. Advocates also commented on the disengagement process with the young people, recording the importance of openness and clarity when working with the young people and drawing on their training, to avoid undue attachment or dependence. Advocates reported preparing their young person(s) for life after YAP.
“I think there is no doubt that if the relationship has worked well, any exit process is going to be difficult for both. For them to acknowledge that is incredibly powerful as well, it is part of life, endings and beginnings.”

However, a disparity presented between the views of the Managers on the disengagement process and those of the young people and their families interviewed. The main concern focused on perceptions of preparedness for the disengagement process, with parents expressing fear that their young person would return to exhibiting previous challenging behaviours, while others expressed concerns about managing once services were withdrawn. This data indicates a concern among some parents/guardians, understandable perhaps given their positive assessment of the programme, about ‘life after YAP’ and support without the programme.

“I’ll be very sad when it comes to an end because I know she can’t have any more contact with us and I am going to be lost without her, when [the Advocate is gone], I don’t have anyone then...I can’t see myself managing too well to be totally honest.”

Parents’ Views
The parents/guardians of young people participating in the YAP evaluation interview series predominantly spoke positively about their experiences of YAP Advocates, discussing the benefits of having the additional support of the YAP worker, which was having a positive effect on the young person’s home life; and also providing support to the guardian in motivating or encouraging the young person, in line with YAP’s core principle of partnering with parents.

“She has started to talk now, she tells me about things happening at school that she doesn’t like, it is different from before.”

Parents/guardians also report positive outcomes for their young people, including improved communication and social skills, and increased confidence and community engagement. The responses are by and large in line with YAP’s core principles, including ‘partnership with parents’ and a ‘focus on strengths’ approach. Parents also identified improvements that met the specific needs of their young person, aligning to YAP’s ‘individualised service planning’ approach.

“She has more self-esteem with people, she has more confidence.”

Parents and guardians discussed the prospect of their young person continuing to engage in the activities undertaken on the YAP programme. Responses varied, with some indicating that their young person would maintain levels of engagement, with others reporting that their young person would be less likely to maintain activity levels after the disengagement process, especially where activities were dependent on the company of the Advocate, or would likely present a financial burden.
Advocates’ Views

Advocates currently employed by YAP Ireland come from a variety of work backgrounds, including community and youth work, social care work, education, retail and sports/recreation. This reflects YAP Ireland’s policy of recruiting people with the necessary aptitudes, and ideally living in the local community, rather than having specific qualifications. The majority of matched Advocates were working with one or two young people at the time of this research, typically spending 6-10 hours with their young person.

YAP Advocates were by and large well-informed of the YAP model and conscious of the need to apply the model in practice. Advocates identified positive features of the model, including ‘one to one interaction’ with the young people, ‘the strengths based approach’, ‘focusing on positives’, providing ‘a support network’ for the young person, and YAP’s ‘no reject, no eject’ policy. The responses are in keeping with YAP’s strengths based wraparound model.

“I am the young person’s voice and support. My role is for [young person], right now as we sit it is for [the young person] regarding whatever support she needs be it education, social skills.”

“I really believe in the model and I have seen from my first case how it works and it has worked for me.”

In reporting on their experiences of working as an Advocate for YAP Ireland, responses varied. Survey results show that Advocates are confident in their roles and feel well-matched with their young people. Substantial majorities of Advocates surveyed feel confident and supported in their roles and agree that their work with YAP Ireland contributes to their professional development. Responses are also positive, but less decisively so, regarding the adequacy of feedback received; 59% (n=48) think it is ‘Certainly True’ they are given adequate feedback and 37% (n=30) think it is ‘Somewhat True’.

Advocates reported facing challenges in their roles. Advocates identified difficulties in motivating their young person to engage in activities, and apprehension in dealing with complex cases, particularly where the young person has exhibited or threatened violent behaviour. In some instances, it was reported that further training, or the selection of an Advocate with specific experience would benefit a challenging or crisis situation.

“The biggest challenge has been getting [the young person] into school, I’ve tried everything.”
“Just dealing with when the day goes wrong, dealing with how much effort you have put into your job and then you are dissatisfied going home. That is disheartening sometimes.”

Managers’ Views
Service and Case Managers working with YAP Ireland described the young people on the YAP programme, often in terms of the challenges faced and how these could be overcome utilising the YAP model. They described young people on the YAP programme as lacking a sense of contribution to society and community, manifesting in a sense of being mistreated or let down, as well as isolated. They also highlighted the prevalence of drug and alcohol abuse among YAP clients, emphasising the at-risk nature of the young people on the programme.

“To some degree what is facing them is that they have lost their connection with communities.”

“There are certain events happening, mental health issues have always come up.”

Family and home circumstances were also reported as potentially contributing to problems, with accounts that some young people may be responding to behaviours witnessed in their home environment.

“In the cases I work with there’s a lot of dysfunction and the kids are taking on the parents’ issues.”

Staff were positive about the YAP model in responding to the needs of vulnerable young people and young people with complex needs, in keeping with the evidence in the literature which reports that mentoring relationships produce more marked outcomes and are most effective where the participating young people have either had pre-existing difficulties or been exposed to significant levels of environmental risk (DuBois et al., 2011). Managers occasionally expressed concern at their workload and the associated expectations, describing how they often balanced a variety of competing tasks, while continuing to remain as involved as possible with their cases.

“From recruiting to training, we are heavily involved from short listing, through to the training through to checking references and child protection clearance.”

Training
The characteristics of an effective mentoring relationship have been identified in the literature, with studies emphasising the importance of mentor recruitment and training. Moreover, positive outcomes have been deemed to be dependent on, and moderated by, measures such as guidelines for practice in the field and the screening and training of mentors (Du Bois et al., 2002). Findings from the observation of YAP training and from
focus groups and the survey of Advocates suggest that participants have had positive experiences and have benefited from the training provided.

During training observations, staff training was positively received by those present. Group dynamics were positive across the training sessions, with good levels of group interaction, and opportunity for questions and feedback. The trainers frequently drew on professional experience and knowledge of YAP and related work, a process that was undoubtedly beneficial for those present. While focus group responses were also positive, a small number of Managers identified the need for improved induction or training for Case Managers, with an emphasis on opportunities to share experience and learn from one another.

**Summary of Research Findings**

This evaluation study concludes that the YAP programme is implemented as intended, with treatment fidelity. Managers and Advocates working for YAP Ireland believe in the YAP model, and are also positive about the application of the YAP model in practice, and the benefits for the young people and families participating in the programme. Staff were positive about the YAP model in responding to the needs of vulnerable young people and young people with complex needs, in keeping with the evidence in the literature which reports that mentoring relationships are most effective where the participating young people have either had pre-existing difficulties or been exposed to significant levels of environmental risk (DuBois et al., 2011).

Staff, young people and parents/ guardians were positive about the matching process and working with Advocates, in line with the literature, which holds that positive outcomes are more likely to be reported where the mentor and young person have been paired based on similarities of interest (DuBois et al., 2002).

Young people participating in the programme have positive outcomes, as measured statistically through the Strengths and Difficulties Questionnaire. Overall the findings signify improved wellbeing for young people participating in the programme. Parents/guardians of participants also recorded positive outcomes overall through the Strength and Difficulties Questionnaire. The reported improvements as evidenced by the qualitative data and quantitative SDQ findings represent significant positive outcomes for the young people participating in the YAP programme. The outcomes show improvements in factors which enhance wellbeing, as described in the literature. Happiness and health are associated with physical participation in life, spending time with friends and a sense of belonging within families and communities (Lalor, De Róiste & Devlin, 2007). Correspondingly, resilience and the maintenance of wellbeing in the presence of adversity have been linked to individual factors such as self-esteem and leisure interests; social factors such a sense of belonging and a pro-social peer group; and community factors such as attachment to community networks and access to
support services (National Youth Health Programme, 2004). These reported findings in relation to wellbeing suggest that there are clear positive outcomes for young people who participate in the YAP programme.

**Strengths**

Based on the findings of this research, it is possible to identify a number of strengths of the YAP programme in practice.

- Young people participating in the YAP Ireland programme have positive outcomes, as measured statistically through the Strengths and Difficulties questionnaire. Young people’s self-report scores for total difficulties improved significantly across the six month time frame. Participants also perceived positive outcomes on a range of sub-scales across the six month time frame, including the emotional symptoms, conduct problems and hyperactivity scales. While young people showed a small improvement on the peer problems scale and a small increase in risk on the pro-social scale, these were not deemed to be statistically significant. Overall the findings signify improved wellbeing for young people participating in the programme.

- Parents/guardians of young people participating in the YAP Ireland programme perceived positive outcomes for their young people, in addition to highlighting the benefits of YAP’s programme to the family, particularly in terms of support provision. This is in line with YAP’s core principle of ‘partnership with parents’. Parents/guardians of participants also recorded positive outcomes through the Strength and Difficulties Questionnaire. Scores for total difficulties improved significantly across the six month time frame. Parent/guardian reports also showed significant improvements across a range of sub-scales, including the emotional symptoms, conduct problems, hyperactivity and peer problems scales.

- Young people engaged in the YAP Ireland programme typically reported beneficial experiences of participation, including improved community engagement and the benefits of new experiences in their day-to-day lives. Young people also perceived improved confidence and self-esteem, which are qualities linked to resilience in young people, and of particular importance to at risk groups.

- The YAP programme is implemented as intended, with treatment fidelity scores consistently positive, from the perspectives of the young people and their parents/guardians. Young people were particularly positive about feeling heard, understood and respected on the YAP programme, while parents/guardians reported particular satisfaction with the matching process.

- YAP’s matching process is predominantly effective, drawing on a variety of Advocates and implementing YAP’s core principle of ‘individualised service planning’.

- Managers and Advocates working for YAP Ireland believe in the YAP model, including features of the model aligning to YAP’s core principles, notably the
strengths based wraparound approach and the core principle of empowerment. Managers and Advocates were also positive about the application of the YAP model in practice, and the benefits for the young people participating in the programme, with shared understandings of positive outcomes achieved for participants and their families.

- The training provided by YAP Ireland is well-received by potential and matched Advocates and staff, with particularly positive responses to specialised training relating to specific risk factors for young people participating in the programme.

**Challenges**
A number of challenges have been identified through the research, highlighting opportunities for learning for YAP Ireland.

- Some Advocates identified difficulties in motivating their young person to engage in activities, and apprehension in dealing with complex cases, particularly where the young person has exhibited or threatened violent behaviour. It may be possible to address this through further training, with training relating to specific risk factors particularly well-received by Advocates.

- In a small number of cases, where a match is not successful, the programme may not be as effective in supporting the young person to achieve positive outcomes.

- Managers also identified challenges faced in dealing with some cases, sometimes linked to external services, including social work services and in some cases, treatment of the young person in the school environment.

- Some Advocates are not satisfied with the pay they receive for the work that they do. When asked if they were paid fairly for the work that they do, 42% (n=34) found this to be 'Somewhat True', with 16% (n=13) finding this to be 'Not True'.

- A small number of Managers participating in focus groups occasionally expressed frustration at their workload and the associated expectations, describing how they often balanced a variety of competing tasks, while continuing to remain as involved as possible with their cases. For a small number of new Case Managers the on-call time was challenging.

- Parents expressed concern about 'life after YAP' and losing the support provided by YAP Ireland. Consequently, it is important that sustainable community engagement is emphasised as vital to the YAP process and visited and revisited at meetings throughout the young person’s participation in the programme.

- While Case Managers and Advocates were well-informed of the disengagement process, some parents expressed fear that their young person would return to exhibiting previous challenging behaviours, while others expressed concerns about managing once services were withdrawn. This data further highlights a perceived concern among some parents/guardians about ‘life after YAP’ and support without the programme.
The administration of the research was resource-intensive, requiring ongoing organisational support for staff and young people. It is important that YAP staff have an understanding of the research process and handling of research material but also of the value of the research within the context of the overall work of the organisation.

Recommendations

Based on the strengths and challenges identified here, the following recommendations can be made:

- It may be possible to address more challenging cases through further training, with current training relating to specific risk factors particularly well-received by Advocates. The opportunity for accreditation of the current training was also identified.

- The issues of Advocates’ pay and conditions merit further consideration. While acknowledging severe financial constraints, it is recommended that YAP Ireland considers a review of the overall package provided to Advocates.

- In consideration of Managers’ workloads, YAP should review the support and training for staff providing the on-call service and strengthen induction for new staff.

- The perceived concern among some parents/guardians about ‘life after YAP’ and sustained support without the programme could be further addressed throughout programme engagement, including at wraparound meetings, for young people and their families. YAP Ireland should consider the option of a phased aftercare plan to support families and young people participating in the programme. This would help to alleviate apprehension around the disengagement process, while facilitating sustained community engagement and supporting sustained outcomes for young people.

- YAP Ireland should consider what more could be done to encourage related organisations to work in a strengths based, youth-friendly way, promoting advocacy within the youth sector, and influencing change more broadly.

Based on analysis of the data collected through this longitudinal evaluation, it can confidently be concluded that the YAP model is effective in an Irish context and the YAP programme contributes to positive outcomes for young people and their families.
**Organisation of Report**

The report is divided into nine chapters, as follows:

**Chapter 1: Introduction**
Chapter 1 provides an introduction to YAP Ireland, and the YAP model and implementation process.

**Chapter 2: The Literature Context**
In Chapter 2, the relevant literature is detailed, providing the Irish context as well as exploring outcomes of alternative mentoring programmes in practice.

**Chapter 3: Research Design**
In Chapter 3, the research design and methodology is described, including the qualitative and quantitative data collection strategy and details of analysis, along with relevant research ethics.

**Chapter 4: Strengths and Difficulties Questionnaires Analysis**
In Chapter 4, statistical analysis of the Strengths and Difficulties Questionnaires is presented, including outcomes results and comparative data from the two cohorts.

**Chapter 5: Interview Series**
This chapter presents findings and discussion from the longitudinal interview series conducted with young people, their guardians and Advocates, including perceptions of the programme, along with opportunities and challenges.

**Chapter 6: Focus Groups**
This chapter details findings from the longitudinal focus groups conducted with Advocates, Case Managers and Service Managers, including experience of the programme and model, as well as views on YAP as an organisation.

**Chapter 7: Training Observation**
This chapter includes findings from observation of training provided by YAP for Case Managers and Advocates.

**Chapter 8: Survey of Advocates**
In Chapter 8, findings from the online survey of Advocates component of the research evaluation are presented and discussed, including views on working with YAP Ireland, and experiences of the YAP programme.

**Chapter 9: Discussion & Recommendations**
In Chapter 9, the research questions are revisited and addressed, through analysis and discussion of the complete data set.
Chapter 1: Introduction

1.1 Youth Advocate Programmes

The YAP programme is a unique service based on a strengths based, needs-led model which engages with young people and families. In 2002, YAP Ireland through the support and backing of the Health Boards (now Health Service Executive), piloted the Youth Advocate Programmes (YAP) model in the North Dublin, Galway, Roscommon and Mayo areas. YAP Ireland uses a strengths based, family focused approach to provide intensive support of up to 15 hours a week, to young people and families with complex needs at Level 3 and 4 of the Hardiker Scale referred by HSE children and families social work teams. The programme has since gone on to expand into regions across Ireland and is currently operating in 21 counties with a view to expanding services further. YAP Ireland is a registered charity managed by a voluntary Board of Directors, employs 32 permanent staff and approximately 150 Advocates on a fixed purpose basis. YAP Ireland also provides Disability, Crisis Intervention, Aftercare and Family Support Programmes. In 2012, 528 young people and their families participated on YAP programmes.

The Youth Advocate Programme (YAP) was originally developed in Pennsylvania in 1975 as an intervention for young people who were within the juvenile justice system. The YAP programme was developed with the aim to preserve their family placement, while providing an intervention. Today YAP Inc. is one of the largest non-profit Youth and Family Support agencies working with high-risk youth and their families in a strengths based, needs led advocacy model in the United States.

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1 Details gathered from YAP documentation, and YAP website. Available at: http://www.yapireland.ie/about-us/
1.2 Programme, Individualised Service Plan and Wraparound Approach

The programme offers intensive support of up to 15 hours a week of one-to-one work with the young person and their family for a period of six months. The holistic model is strengths based, designed to develop competencies and empower young people and their families. The approach is ‘wraparound’, combining individualised in-home and community-based services developed around each young person and their family structure. The YAP team works with the family to develop an Individualised Service Plan (ISP), incorporating the young person’s strengths. Wraparound meetings take place at intervals throughout the programme, to assess the implementation of the ISP and identify and build relationships with community supports. Central to the programme is the recruitment, training and employment of Advocates matching the young person for a six month period with a locally recruited ‘Advocate’. The Advocates are local, selected from a diverse pool to be best placed to support and meet the needs of the young person. YAP works with the young person and family to develop their competencies, improve their coping skills and support them in building networks of community support. This process of empowerment encourages change and improved outcomes that can be sustained by the young person and their family, after the disengagement process and transition of service withdrawal.

1.3 Vision & Mission Statement

Figure 1.1 YAP Ireland Vision & Mission Statement

YAP Ireland’s Vision

“"A society where young people and families are confident and connected with their communities."“

YAP Ireland’s Mission Statement

“"YAP Ireland’s mission is to build partnerships between vulnerable young people, their families and communities to support their full potential through a community based, strengths focused, intensive support model which provides a more effective and economic alternative to society’s reliance on the direct provision of state institutions and out of-home care services."“

Figure 1.1 YAP Ireland Vision & Mission Statement
1.4 Communities Served
The young people who are referred to YAP are at high risk of placement in care, secure care and custody. These young people present with a range of inter-connected difficulties around their home, education, peer groups, behaviour and community (Level 3 and 4 on the Hardiker Scale). The young people on the programme are often vulnerable to a range of negative life outcomes including early school leaving, criminal activity, drug and alcohol abuse, sexual abuse, poverty, violence and ill-health. The intensive support of up to 15 hours a week over six months is provided to young people and their families using a strengths based, needs-led approach, with a view to achieving positive outcomes for the young people, their families, their community and referral agents.

1.5 Advocates
YAP Ireland currently employs approximately 150 Advocates. Advocates are local, grassroots and community-based. Living within the community of their young person affords YAP Advocates local cultural competence, along with a good working knowledge of local services, support services and facilities. Advocates are recruited by YAP through a selection process, before receiving tailored training to work with YAP. Advocate training includes a series of Core Modules, concentrating on the role of YAP and the YAP model, boundaries, report writing and crisis intervention; child protection training; and specialised training sessions on particular topics such as mental health. An example of specialist training provided by YAP is a session focusing on young people with a diagnosis on the autism spectrum. Advocate training is facilitated and delivered by Managers.

The Advocates are employed on a fixed purpose contract basis linked to the needs of the young person, can work on more than one case and if appropriate cases are available work with YAP Ireland for up to two years. Some Advocates may work with YAP Ireland on just one case and some will have a number of cases over a two-year period and having taken a break, reapply to work for YAP Ireland and go through the recruitment process anew. From the organisation’s point of view, a cut off of two years is in line with a policy of not professionalising the role of Advocate, while also helping to
maintain a pool of Advocates available to meet the diverse needs of the young people and families. YAP Ireland reports that a high number of Advocates have successfully applied for permanent posts within the organisation and have used their experience in YAP to find employment or engage in further education in related areas.

The Advocate has up to 15 hours one-to-one contact with their young person, every week for six months. The intensity of the programme is case-specific and depends on the young person’s needs at a given time and their individualised service plan. The Advocate carries out activities with the young person, on a goal-driven and needs-led basis, focusing on the strengths of the young person and their family. Again, the activities are case-specific, contributing to the provision of a bespoke service for YAP clients. The activities can vary from social activities including sports and YAP organised group participation events, to education based activities including library visits and support with homework. Because of the tailored matching process, the young person often shares interests with their Advocate. Advocates are managed and supervised by Case or Service Managers, who provide fortnightly supervision sessions, as well as organising and attending reviews of all cases. A 24 hour on-call, 365 days a year service is also available to staff, Advocates, young people and families, with a Manager available at all times.

1.6 YAP Core Principles & Values

YAP Ireland operates by a series of core principles, which underlie the programme implementation. YAP’s core principles are:

- **Individualized Service Planning:** Interventions and goals are tailored to each young person’s and family’s unique needs, strengths and interests.

- **Cultural Competence:** Staff demonstrate respect for and knowledge of different cultures and values in practice.

- **Partnership with Parents:** The unit of intervention is the entire family. Families are co-designers of their own services and are invested in having the plan succeed (ACCESS, VOICE, and OWNERSHIP). Staff work with families to achieve their goals as opposed to doing things for them.

- **Focus on Strengths:** Intervention and Service Plans build on youth, family and community strengths to address deficits and weaknesses.
• "No Reject, No Eject" Policy: YAP will not refuse service to any youth referred to one of our programmes.

• Team Work: A team of professional and non-professional individuals who care about the youth and family work together in helping the family achieve their goals. YAP works with all team members to ensure that all team members contribute in a meaningful way to helping the family achieve their goals.

• Community-Based Care: Supportive persons and associations are organised on behalf of the family from within the community. These are both formal (professional/system) and informal (natural) supports.

• Unconditional Caring: Staff show consistent positive regard for families despite resistance or non-compliance. Staff maintain a “never give up” approach with all youth.

• Giving Back: Staff identify with youth and families a way for them to contribute to their community through building upon their strengths and interests.

• Corporate and Clinical Integrity: Staff maintain professional relationships with youth and families and other systems. Staff report accurate hours and maintain ethical practice.

• Crisis On-Call System: Young people and their families can contact YAP 24 hours a day 7 days a week for crisis support when it is most often needed.

Figure 1.2 YAP Ireland Core Principles

YAP Ireland also identifies a number of core values, which underpin its work and programme implementation. YAP Ireland’s core values are:

• Empowerment: We support individuals to become aware of their strengths in order to realise their full potential.

• Equality & Respect: We treat each individual fairly, regardless of their age, gender, ethnicity, religion, sexual orientation, disability, offending background, marital status and political affiliation.

• Non-judgemental: We approach each and every individual, service and situation with an open, non-blaming perspective which creates a spirit of partnership and cooperation. Evidence based practice: We believe in the value of assessing, evaluating and reflecting on our practice so that we continually provide a high quality service to our young people and families.

• Honesty & Integrity: We ensure honesty and integrity in all aspects of the organisation.

Figure 1.3 YAP Ireland Core Values
1.7 YAP Programme Lifecycle

**New Case**
- YAP Ireland receive a referral from HSE referral agent, YAP team meets with referral agent and a new case is opened.

**Week 1**
- YAP Case Manager calls to residence and conducts a strengths & needs based assessment of the young person and their family.

**Week 1-2**
- YAP Case Manager matches a suitable advocate to the young person, based on their needs and interests.

**Programme Start**
- The matched advocate meets young person and young person's family for the first time, and begins to engage with the YAP programme.

**Months 1-2**
- Wraparound meeting is held from weeks 4-6 with the aim of drawing up a safety plan, identifying strengths and drawing up the Individualised Service Plan. Activities with the matched advocate commence, with intensity of contact is determined on a case-by-case basis.

**Months 3-4**
- The Individualised Service Plan (ISP) is implemented. A further wraparound meeting takes place between 12-16 weeks. The second wrap includes, where possible, some of the community supports/links that have been identified that will continue to support the young person when YAP have finished.

**Months 5-6**
- A further review takes place 4 weeks prior to the end of the case to assess whether goals set at the previous wraps are being followed through. The wind down process commences; at this point, contact hours are gradually reduced. Extension applications may be commenced at this point, where the young people meet the criteria set out by YAP Ireland.

**Programme End**
- The discharge closure meeting takes place, with the team gathered to examine outcomes with the the young person, carry out closing activities, close the case.

*Figure 1.4 YAP Programme Lifecycle*
1.8 Measuring Outcomes & Monitoring

YAP Ireland currently implements a number of quality assurance policies, with a view to assessing the effectiveness of their involvement with each young person and their family, while also providing them with an opportunity for feedback. These include participation groups, Individualised Service Plans (ISPs) and reviews, Monitoring and outcomes measurement tools.

As well as implementing the ISP with each YAP client, YAP uses an internal outcomes system to measure the impact of the YAP model for each case. This system affords YAP the opportunity to measure outcomes on ongoing cases, while also generating data that provides an opportunity for learning, contributing to enhanced services for young people and families. The data is currently collected in the form of an outcomes booklet, introduced in the early stages of engagement with the YAP programme to the young person and their family. The booklet is implemented over the six month period, with a view to identifying areas of need and developing individualised insight in each case. Outcomes for the young person and their family are ranked from 1-9, with a score of 1 representing a major problem, and a score of 9 reflecting excellent progress. Outcomes are ranked at the referral stages, the beginning of the 3rd month, the beginning of the 5th month, and at the exit meeting. Examples of outcomes measured for young people include social relationships, self-confidence and emotional wellbeing. Also measured are outcomes for education, training and employment; and outcomes for offending behaviour, including current offending and risky behaviour. Examples of outcomes measured for families include parenting skills, the home environment, emotional wellbeing and social supports. 2012 research reports improvements across a range of outcomes, for young people and their families (see Appendix 7).

YAP also conducts monitoring calls with the young person and their parent/guardian in order to gather their views on the programme. The calls take place at the two and five month stage, and to facilitate impartiality, the YAP worker making the monitoring calls has no contact with the case.
1.9 Organisational Structure & Staffing

In March 2009, YAP Ireland became a registered charity. YAP Ireland is managed by a Board of Directors. YAP currently employs 32 permanent staff, including a CEO; Director of Services; two Heads of Service; four Service Managers; 15 Case Managers; and Support Services and Finance teams, including Administrators. YAP also employs about 150 Advocates on a fixed purpose basis at any one time.

Figure 1.5 Organisational Structure
1.10 Evaluation Objectives & Implementation

The longitudinal evaluation of YAP Ireland seeks to evaluate the effectiveness of the model in an Irish context, exploring whether the needs-led wraparound approach leads to positive outcomes for young people, their families, their communities and referral agents. The following research questions will be addressed:

1. Is the YAP model effective in an Irish context?
2. Are the YAP programmes contributing to positive outcomes for young people and their families?

The research design is mixed method, with a number of research strands contributing to a holistic evaluation of YAP Ireland. The approach taken for this evaluation is fixed mixed methods, incorporating qualitative and quantitative components. The quantitative component of the research evaluation included demographic data collection on a sample of YAP young people and a selection of young people in a broadly similar non-equivalent comparator group; a quasi-experimental series of phased Strengths and Difficulties Questionnaires (SDQ) administered longitudinally to the YAP sample of young people, their guardians and the comparator cohort; a mid-way fidelity study with the YAP cohort; and an online survey of Advocates. The qualitative component of the research methodology included a series of phased one-to-one interviews with participants, their guardians and their Advocates; along with focus group interviews with YAP Managers and Advocates. Qualitative data was also collected from open-ended questions in the online survey of Advocates. Data was also collected through observation of YAP training sessions. The research design and data collection strategy is described in more detail in Chapter 3: Research Design.
Chapter 2: The Context

2.1 Young People in Ireland

Ireland’s population is increasing at a higher rate than in any other EU country and the 2011 census findings report that Ireland has the highest proportion of young people in the EU (Central Statistics Office, 2012). Ireland’s youth demographic is also undergoing a transformation, with young people transitioning into adulthood in different contexts. The number of foreign national children in Ireland increased by 49.5% between 2006 and 2011 and the number of Traveller children increased by 30.3% in the same period (Census of Ireland, 2011).

Despite the changing demographics, children and young people in Ireland continue to be faced with economic, social and psychosocial challenges, exacerbated by ongoing economic difficulties. The Central Statistics Office reports that children in Ireland are more likely to be in consistent poverty than their European peers, with 7.4% of children under the age of fifteen in consistent poverty in 2010 (CSO, 2012), with young females more likely to be affected. The number of children in state care is rising, with Department of Children and Youth Affairs (2012) report on the state of the nation’s children holding that the number of children in the care of the HSE increased by approximately 16% between 2007 and 2011, with the majority (90.3%) living with foster families.

An Amnesty International report (2011) found that children are also subject to social exclusion, with 50% of those polled agreeing that wider society is particularly prejudiced towards vulnerable groups, including children in care, children who commit crime, Traveller children and children seeking asylum. According to the report, these groups are considered lower priorities for Government attention. It was also found that the potential for social exclusion and poorer outcomes increases for children when the experience of a mental health problem is added to the mix. Corresponding evidence also holds that vulnerable young people are also more at risk of mental health problems. An Irish Health and Behaviour in School-aged Children Study in 2010 found that immigrant children, Traveller children and children with a disability and/or chronic illness are more likely to report being bullied at school (HBSC, 2010). Further, a report by the
National Office of Suicide Prevention (NOSP, 2013) found that Ireland ranks fourth highest in the EU in terms of deaths by suicide among young people.

Recent research by the Children’s Mental Health Coalition (2013) highlights the importance of supporting mental health in children and young people by building protective factors to support their resilience, self-worth and self-efficacy. The report emphasises the need to put greater emphasis on ‘at risk’ families, with young people experiencing mental health problems diverted from the youth justice system towards community services that address their need, including those that support the whole family. This finding is in line with juvenile justice trends at a policy level, with the principle that detention should only be used as a last resort underlying Ireland’s Children Act, 2001. In support of this principle, and in line with other youth-related policies and programmes, there are a number of Irish initiatives that currently support young people and vulnerable young people. Some of these are presented in Figure 2.1.
• Community based, multi-agency crime prevention initiatives seeking to divert young people from becoming involved (or further involved) in anti-social and/or criminal behaviour by providing suitable activities to facilitate personal development and promote civic responsibility. The projects are funded by the Department of Justice and Equality, and administered through Garda Community Relations Section (Department of Justice & Equality, 2013).

Garda Youth Diversion Projects

• An alternative to juvenile prosecution where a young person is supervised by a Juvenile Liaison Officer (JLO). The programme is funded by An Garda Síochána. The programme aims to prevent young offenders from entering the full criminal justice system by offering them a second chance (Department of Children and Youth Affairs, 2013).

Juvenile Diversion Programme

• YouthReach is an education and training programme for early school leavers. The programme is directed at unemployed young early school leavers aged 15-20, offering participants the opportunity to identify and pursue viable options within adult life, and providing them with opportunities to acquire certification.

YouthReach

• Neighbourhood Youth Projects are community-based youth development and family support services working with young people and their families. The projects aim to strengthen young people’s relationships and support young people to engage in positive behaviour and improve their lives. They are usually managed by voluntary organisations and run by the Health Services Executive (HSE) (Foróige, 2013a).

Neighbourhood Youth Projects

• Big Brothers Big Sisters (BBBS) is an internationally recognised youth mentoring programme, introduced to Ireland in 2001. The programme is operated in Ireland by Foróige and is available in 15 counties (Foróige, 2013b). The preventative community-based mentoring programme matches an adult volunteer with a young person deemed in need of support and friendship. The programme is less time-intensive than the YAP programme, and works with volunteers (Brady & Dolan, 2007)

Foróige Big Brother/ Big Sister

• The SPY projects are among the main local youth work interventions funded by the Department of Children and Youth Affairs. They are run by voluntary youth organisations and employ full-time youth workers. The overall aims are to support young people to reach their full potential through personal development and raising awareness on issues that affect young people’s lives. SPY also provides support and information and a safe space for young people to meet and be themselves, and work with parents, schools and other local agencies and volunteers to enhance the quality of the youth service.

DCYA Special Projects for Youth (SPY)

• The Youth Support programme provides community based alternatives to residential care or custody, for ‘medium’ or ‘high risk’ young people from 10-17 years. Working with social workers and carers, the needs led group model uses community resources to deliver tailored packages, across a 12 week cycle (Extern, 2013)

Extern- Youth Support Programme

Figure 2.1 Youth Initiatives
2.2 Legislative and Policy Context

Children and young people in Ireland are served by a growing body of international and national policy and legislation. The UN Convention on the Rights of the Child, 1990, highlights the four ‘P’s of prevention, protection, provision and participation. These rights are also transposed at a national level. Ireland’s Child Care Act 1991 provides for the allocation of statutory responsibility to promote the welfare of children not receiving adequate care and protection and strengthening capacities to provide child and family support services, emphasising the importance of the welfare of the child. On 1st January 2014 statutory responsibility for child welfare and protection transferred from the Health Service Executive to the newly established Child and Family Agency. The HSE’s family support functions transferred at the same time.

Children First is Ireland’s national guidance for the protection and welfare of children, outlining key principles in best practice for child protection and welfare in the state. In July 2013 the Government approved revised Heads of the Children First Bill which will place the Children First National Guidelines on a statutory basis.

The main legislation covering children and the criminal justice system is the Children Act 2001, amended by the Criminal Justice Act 2006. This Act focuses on preventing criminal behaviour, diversion from the criminal justice system and rehabilitation, with detention as a last resort. A National Youth Justice Strategy 2008-2010 set out a number of goals to provide for the implementation of the criminal justice provisions of the Children Act 2001, relating to sanctions in the community, restorative justice, diversion and the operation and development of the children detention schools.

The Education Act 1998 deals with the requirements for obligatory education and a range of other educational matters, while the Education (Welfare) Act 2000 aims to provide a comprehensive, national system which will ensure that all children of school going age attend school and if they fail to do so, that they will receive a certain minimum education otherwise, focusing on school attendance, absence, State supervision of home education, and a prescribed minimum education. The functions of the National Educational Welfare Board, established by the Act of 2000, were taken over by the new Child and Family Agency at the start of 2014. The Youth Work Act 2001 defined youth
work as “a planned programme of education designed for the purpose of aiding and
enhancing the personal and social development of young people through their
voluntary participation, which is (a) complementary to their formal, academic or
vocational education and training; and (b) provided primarily by voluntary youth work
organisations”. It proposed that Vocational Education Committees would be responsible
for supporting and coordinating youth work within their areas of operation. The
Education and Training Boards Act 2013 restated the definition of youth work in the
2001 Act and assigned responsibility for supporting the “provision, coordination,
administration and assessment” of youth work at local level to the new Education and
Training Boards, which were created through the merger of the former VECs.

The Ombudsman for Children Act 2002 established the Office of the Ombudsman for
Children and details the responsibilities and duties of the role of the Ombudsman for
Children. The role of the Office includes complaints handling, communication and
participation, research and policy. The Department of Children and Youth Affairs
(DCYA) was established in 2011. The DCYA consolidates a range of functions across a
number of key areas of policy and provision for children and young people, including
educational welfare, child and youth protection, youth work and youth justice. The
DCYA also oversees the work of the new Child and Family Agency, referred to above.

Ireland’s National Children’s Strategy 2000 was a 10-year plan to give children a voice
and their views due weight in issues that affect them, to understand children’s lives
better and to ensure the provision of quality supports and services to promote all
aspects of their development. Following on from the strategy and taking account of its
youth affairs remit, the DCYA is currently leading the development of an overarching
national policy framework for children and young people, with subsidiary strategies
concerned with the early years, middle childhood and youth.
2.3 The Mentoring Context

Recent years have seen a growth in the popularity of youth mentoring programmes internationally with many reflecting the four principles of prevention, protection, provision and participation highlighted in the UN Convention on the Rights of the Child (1990). More than five thousand mentoring programmes serve an estimated three million young people in the United States (DuBois et al., 2011). YAP Ireland report working with over 500 young people in 2012 (YAP Ireland, 2012). There is considerable rationale for the youth mentoring approach in the literature. While the YAP model differs from other similar mentoring programmes by recruiting paid Advocates rather than volunteers, the literature is comparable. A number of perspectives on child and youth development inform the design and implementation of youth mentoring programmes, with wraparound approaches having foundational roots in theory. Theory tends to emphasise the relationship between the young person and their context, or the various environmental systems they inhabit.

Bronfenbrenner’s (1979) socio-ecological conceptual model holds that the individual and environment are interrelated or the person-context interrelatedness. According to Bronfenbrenner, there are four levels of influence on the individual, – the micro (individual), meso (proximal/social context), macro (cultural and socio-economic) and the exo (external contexts with indirect effects). This relates to YAP’s wraparound model in that it posits that the young person is best placed to function well when the larger system works closely with the micro system of the young person and family (Robins, 2006). Bandura’s (1977) social learning model emphasises the importance of the social context and again, the relationship between the young person’s development and the environment in which they live. In the context of a mentoring approach, where the young person is paired with a mentor or Advocate, this approach would see the young person learn from and imitate positive psychosocial and related behaviours. In order for this to be successful, the young person must pay attention to the modelled behaviour, retain details of the behaviour, reproduce the behaviour and feel motivated to continue to engage with positive behaviours (Bandura, 1977).
The importance of a mentor as a role-model in youth development is also identified in Erikson’s life-stage psychosocial development theory (1959), which focuses on the stages a person passes through from infancy to adulthood. The theory holds that a young person or adolescent is newly concerned with how they appear to others, what roles they will play in the adult world, drawing attention to the importance of the next generation’s role in nurturing young people at this point and passing on skills and wisdom. Similarly, models of increased psychological resilience in young people, an intended outcome of the YAP programme, emphasise the importance of the community context and the support of role models. Rhodes & Ryan Lowe (2008) identify the psychological factors that have been recognised as fostering resilience, including the characteristics of the individual, the characteristics of the family and also the characteristics of the community, such as bonds to non-related adults who are positive role-models.

2.4 Mentoring in Practice

Evaluations of advocacy and mentoring programmes for vulnerable young people have reported positive outcomes in a wide range of areas, supporting the argument for mentoring as a strategy. “The argument for using mentoring as an intervention strategy is particularly strong when there is an interest in promoting outcomes across multiple areas of a young person’s development” (DuBois et al., 2011, 58).

Evaluations of YAP mentoring programmes internationally report that YAP services have high completion rates (Rea, Prior & Davis, 2003; Tarrant, 2002). Evaluations also report that young people participating in YAP programmes achieved reductions in risks and needs (Jones, Harris & Bachovchin, 1997; O’Brien, 2004); improvements in quality of life (COA, 2006); positive results in education (Jameson & Cleary, 2004; O’Brien, 2004; Rea, Prior & Davis, 2003; THINK, 2003); enhanced links with community activities (Jameson & Cleary, 2004); and improvements in social behaviour (Jameson & Cleary, 2004; THINK, 2003), where effective mentoring is in place. Data specific to YAP Ireland outcomes show improvements across a range of areas, including confidence and self-esteem and mental health, along with education and youth justice benefits (YAP Ireland, 2012).
A meta-analysis of 73 mentoring programmes directed at children and young people in the United States (Du Bois et al., 2011) found that overall, mentoring programmes are effective in improving outcomes across behavioural, social, emotional and academic domains for young people’s development. It was also found that mentoring as an intervention strategy has the capacity to serve both promotion and prevention aims. Mentoring programmes were also found to improve outcomes of policy interest, including academic achievement. Moore et al. (2002) conducted a review of ten youth mentoring programmes and found that overall, young people participating in mentoring programmes experience positive outcomes across a range of areas, including academic returns, positive social attitudes and relationships, lower instances of some negative behaviours some returns in the prevention of substance misuse. In an evaluation of the US Big Brothers Big Sisters (BBBS) Programmes, it was found that participants also had improved outcomes across a range of areas, including pro-social behaviour, attitudes and improved peer and family relationships (Tierney et al., 1995).

It has also been found that formal youth mentoring programmes such as those provided by YAP Ireland have significant capacity to reproduce through more formal mechanisms the types of benefits that have been indicated to accrue from so-called natural mentoring relationships between youth and adults (DuBois et al., 2002). A Headstrong My World Survey of 14,500 young people in Ireland (2012) found that “one good adult” is important to the mental health of young people. Over 70% of young people reported that they received very high or high support from a special adult. Young people who perceived very low support from a special adult when in need had significantly higher levels of depression and anxiety. Moreover, the presence of “one good adult” is reported as a key indicator of how well a young person is connected, self-confident, future looking and can cope with problems (Headstrong, 2013). Further, mentoring relationships produce more marked outcomes and are most effective where the participating youth have either had pre-existing difficulties or been exposed to significant levels of environmental risk (DuBois et al., 2011).

Further, while positive outcomes are reported, they are not guaranteed but accrue where the right conditions for effective mentoring exist. The characteristics of an
effective mentoring relationship have been identified in the literature, with studies emphasising the importance of mentor recruitment and training, as well as appropriate mentor matching and a strengths and community-based approach.

In addition, research holds that positive youth development programmes should foster resilience, promote social, emotional, cognitive, behavioural and moral competence as well as foster self-determination, self-efficacy, belief in the future and pro-social norms (Catalano et al., 2002). These positive outcomes are dependent on, and moderated by, the implementation of practices, including guidelines for practice in the field and the screening and training of mentors, refinement and strengthening of programmes (DuBois et al., 2002). Also important are the characteristics of the youth, mentor recruitment and selection and the criteria used to match youth with mentors (DuBois et al, 2011). Positive outcomes are more likely to be reported where the background characteristics of the mentor are considered and the young person and mentor have been paired based on similarities of interest (DuBois et al, 2002).

Moore et al. (2002) hold that mentoring programmes that are driven by the needs and interests of youth, rather than mentor expectations, are more likely to succeed. This is also recognised as individualised care and considered particularly important for individuals with complex needs. Individualisation is considered the cornerstone of the wraparound process, with a specific need to focus on family driven and individualised service processes where the young person has complex needs (Bruns, 2004). A further principle identified as important to the wraparound mentoring process is that care is community based (Bruns, 2004), supporting the need to consider the young person’s environmental context. Moore et al. (2002) found that youth are more likely to benefit from a mentoring relationship if the mentor knows their family. This can also create challenges for the mentor, with Brady and Dolan (2007) reporting that parents who are under stress and lacking in confidence may feel undermined by the child’s mentor, who they may perceive as engaged in activities that they cannot offer, a further consideration for programme design and implementation.

DuBois et al. (2002) report that longevity of relationships impacts on youth outcomes in mentoring programmes. Moore et al. (2002) also found that the longer the mentoring
relationship, the better the outcome. Grossman & Rhodes (2002) report that within the US Big Brothers Big Sisters Programme, young people in relationships that terminated within six months reported disimprovement in several areas, while Tierney et al. (2005), studying the same programme, found that young people in relationships that lasted over a year reported greater improvements (Tierney et al., 1995).

While the literature provides considerable rationale for the preventative intervention mentoring model, particularly for at risk and vulnerable young people, it also holds that outcomes are not guaranteed but rather depend on a number of moderating conditions and variables, with programme success dependent on needs of the young person and their family, as well as an understanding of the interrelatedness of the individual and their context, including the environmental systems they inhabit. The literature provides a context for analysis of the YAP research evaluation data.
Chapter 3: Research Design

3.1 Introduction

The longitudinal evaluation of YAP Ireland seeks to evaluate the effectiveness of the YAP model in an Irish context, to assess whether the structure of the organisation is fit for purpose and whether its new programmes contribute to positive outcomes for young people and families. The research design is mixed method, with a number of research strands contributing to a holistic evaluation of YAP Ireland. Programme evaluation is concerned with the functioning of the programme, entailing the collection of multiple data (Harinck et al., 1997, 369), informed by a careful assessment of both intervention strength and fidelity (DuBois et al., 2006, 663). The approach taken for this evaluation is fixed mixed methods, incorporating qualitative and quantitative components. The quasi-experimental quantitative component of the research evaluation included demographic data collection of YAP and comparator cohorts; a series of phased Strengths and Difficulties Questionnaires (SDQ) administered to a sample of young people, their guardians and a sample of young people from a broadly similar comparator group; a mid-way fidelity study with the YAP cohort; and an online survey of Advocates. The qualitative component of the research methodology included a series of phased one-to-one interviews with participants, their guardians and their Advocates; along with focus group interviews with Managers and Advocates. Qualitative data was also collected from open-ended questions in the online survey of Advocates. In addition, data was collected from supplementary commentary gathered during SDQ and fidelity instrument administration. Data was also collected through observation of YAP training sessions. The data collection strategy is described in more detail below.

3.2 Data Collection Strategy

3.2.1 YAP Cohort

Demographic and SDQ data was collected from a sample of young people participating in the YAP programme. Collection commenced with new YAP participants in September 2011 and continued until an adequate sample was reached. YAP staff were informed about the research project and prepared and given instructions for consent/ assent collection and SDQ completion. Staff were directed to return all completed paperwork.
to YAP Ireland for collection by the research team. All new programme participants from September 2011 were briefed on the study by their Case Managers and invited to take part. A total of 191 young people and 180 parents/guardians participated in the research at baseline. By end-point, a total of 102 young people and 94 parents/guardians participated in the research.

Those who agreed to participate were asked to complete assent/consent forms, with subsequent completion of SDQs by the YAP client and their parent/guardian at the outset of the programme, midway and at the end. A fourth follow-up SDQ was then administered from three months subsequent to completing the programme. The SDQs were administered by Case Managers and occasionally by Advocates during meetings. A further smaller representative sample of new YAP clients was asked to participate in an interview series.

While staff were largely enthusiastic, and engaged with the research process, some reluctance was encountered, partly because of the nature of the research and the context of working with vulnerable young people. Staff were keen that the administration of questionnaires would not discourage participation at a sensitive stage of initial engagement, with some concern that the additional paperwork may be perceived as off-putting, complex or time-consuming. The process also required that staff were responsive to the individual needs of young people, using appropriate language and ensuring the questionnaire, a formal research instrument, was presented in as youth-friendly a way as possible, particularly challenging when working with vulnerable young people. The process of data collection thus presented challenges, and was also resource-intensive, requiring ongoing organisational support for staff and young people.

3.2.2 Comparator Cohort
The comparator cohort sampled was a broadly similar but non-equivalent group. The quasi-experimental non-equivalent group design is similarly structured to the pre/post-test randomised control trial. Studies of the effects of interventions typically incorporate a randomized control trial, where individuals from a pool of subjects with
similar characteristics are randomly assigned to an experimental or control group, with one group receiving ‘treatment’ and the other not (Neuman, 2007). For comparison purposes, the groups should not differ with regard to variables that may present alternative explanations for causal relationships. Random assignment is unbiased and can facilitate highly accurate predictions. For the purposes of the YAP study, it was not possible to utilise random sampling. The YAP cohorts are referred to the service by the HSE social work teams and are thus not random. To test a matching control group of young people engaged with the social work services would necessitate denying a referred young person access to the YAP service and would therefore be unethical. The quasi-experimental design is appropriate where two or more naturally different groups are present (Matthews & Ross, 2010). The non-equivalent group design used in the quasi-experimental approach facilitates a fair comparison of groups that are broadly similar, although it does not claim to be able to identify causal relationships between variables.

The non-equivalent comparator group was identified through engagement with youth work outreach services by a youth worker. Demographic data on the YAP cohort facilitated the selection of a broadly similar cohort of young people, taking into account location, age, gender and other demographic and family structure variables. Youth work outreach services were asked to identify young people in their local areas with whom they were familiar (from street work or through contact with families) but who were not actively engaged in their programmes or with any other youth services. These young people were then approached by a member of the research team who is also a youth worker. For the comparator cohort, the SDQ was administered to the young person only, at the beginning and end of a six month period. The first set of SDQ data was collected locally for each participant by a youth worker, with consent/ assent secured from parents/ guardians. The follow up SDQ data was collected locally and where this was not possible, via phone. A small incentive was offered for participation, in the form of mobile phone vouchers.
3.2.3 Demographic Data
A body of quantitative demographic data has been compiled from a sample of young people participating in the YAP programme and their families; and for a comparator sample of young people. The data provides detailed information on the characteristics of the cohorts, including composition and distribution. As well as facilitating representativeness across the cohorts, the data informs SDQ analysis by allowing for exploration of other variables that may influence cohort outcomes.

Demographic data for the YAP cohort has been drawn from the YAP client files using the cohort data gathered by YAP Ireland on all clients, with comparable data collected individually for the comparator cohort. Data collected includes gender, age, YAP area or region, education or work status, education welfare, legal status and placement, care history and risk, mental health or disability diagnoses, risk behaviours, service engagement, and household demographics.

3.2.4 Strengths and Difficulties Questionnaires (SDQ)
The Strengths and Difficulties Questionnaire (SDQ) (Goodman, 2005) is a brief behavioural screening questionnaire incorporating 25 attributes, some positive and some negative. The 25 items are divided into five scales including emotional symptoms, conduct problems, hyperactivity/ inattention, peer relationship problems and prosocial behaviour, as well as a composite total difficulties score. The SDQ is a widely used instrument, in clinical assessment; outcome and intervention evaluation and epidemiology. It is used as a research tool internationally, in developmental, genetic, social, clinical and educational studies. The versions used for this evaluation are aimed at adolescents (self-report) and their parents/ guardians and incorporate an extended ‘impact factor’ supplement, asking whether the respondent thinks the young person has a problem, and if so, enquiring further about chronicity, distress, social impairment, and burden to others.

3.2.5 Fidelity Study Analysis
A fidelity study contributes to the assessment of the intervention implementation by testing adherence to the model, as well as participant responsiveness. For the purposes
of this evaluation, a fidelity survey was administered to the YAP cohort young people and their parents/ guardians at time two of the SDQ data collection (at the mid-point/three months into the YAP programme). The administered instrument consists of five short statements, scored on a scale of one to ten. The statements (as presented to the young people) are as follows:

<table>
<thead>
<tr>
<th>Statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>The YAP programme focuses on my strengths and abilities</td>
</tr>
<tr>
<td>I feel heard, understood and respected on the YAP programme</td>
</tr>
<tr>
<td>I have a say in what happens with my Advocate</td>
</tr>
<tr>
<td>My Advocate is a good match for me</td>
</tr>
<tr>
<td>I find it easier to deal with things since starting with YAP</td>
</tr>
</tbody>
</table>

*Figure 3.1 Fidelity Instrument*

3.2.6 Focus Group Analysis

Focus groups are used to gather data generated in a discussion between focus group members (Matthews & Ross, 2010). In the context of a research evaluation, focus groups provide qualitative data that can supplement quantitative data; as well as involving and empowering relevant people. As part of the YAP study, focus groups were undertaken across the YAP programme regions, with Managers and Advocates. Consulting with YAP employees provided a sense of contribution to the research as well as an opportunity to seek clarification or interpretation on interim study findings. The facilitation approach was semi-structured, using a topic guide and open ended questions, facilitating interaction. Items for discussion included questions about the current circumstances of the young people, the success of the interventions and the challenges and opportunities faced in the programme. The first series of focus groups took place in late 2011 in Galway, Limerick, Dublin, Navan and Cork. A total of 36 Advocates and Case Managers (then referred to as Deputy Managers) participated. A second round of focus groups took place in late 2013, in Dublin, Limerick and Navan. A total of 18 Case Managers and Service Managers participated. The perspectives and insights gathered have contributed to the evaluation of the effectiveness of the YAP model.
3.2.7 Training Observation
The evaluation of YAP Ireland includes observation of YAP training sessions. The method was disclosed observation, gathering data openly, with the researcher present at the training sessions, via note-taking (Bell, 2010). The researcher was conscious of bias and careful to record events in as an objective a way as possible, considering aspects of the training that required investigation, including the training provided; the training facilitation process; and the level of interaction and engagement amongst the participants. YAP Ireland provides ongoing training for all staff and Advocates while potential Advocates receive core module and child protection training before they are considered for a match. Sessions for Managers include wraparound and advanced wraparound training, focusing on application of the YAP model, along with specialist training sessions ensuring that the programme meets the needs of specific groups of young people. An example of specialist training provided by YAP in 2012 focused on young people with a diagnosis on the autism spectrum delivered by YAP Inc. staff. Potential Advocate training includes child protection training as well as a series of Core Modules, concentrating on the role of YAP and the YAP model, boundaries, report writing and crisis intervention. Training for potential Advocates is facilitated by Managers across a number of YAP regions and ongoing staff training takes place on at least six days in the year while matched Advocates attend two days training a year. The data collected is important to the overall evaluation by providing first-hand experience of the training received by YAP Advocates, contributing to their understanding of the YAP model.

3.2.8 YAP Interview Series
To gain more detailed information about the experience of participating in the programme, a smaller number of young people, along with their Advocates and guardians, were invited to take part in a series of interviews at the beginning, middle and end stages of programme. The approach was a semi-structured interview, gathering data on the opinions and experiences of the participants. A flexible interview guide of open-ended questions guided the sessions, with prompts used where needed. In the context of youth research, this provided the young people with a more confidential setting within which they could express their views and opinions in a sensitive
environment (Matthews & Ross, 2010). The interviews were conducted on a one-to-one basis in a neutral space by a youth work practitioner with professional research training.

Nine young people, along with their Advocates and guardians have taken part in the interview series, including seven females and two males. One male participant withdrew from the YAP programme after the initial interview, with two females withdrawing after the second round of interviews. The young people range from 11 to 16 years of age. Of those interviewed, five are in Dublin, two are in Limerick and one is in the Monaghan region. The interview data was manually coded, from which themes were derived for subsequent analysis.

3.2.9 Survey of Advocates
As part of the evaluation of YAP Ireland, a survey of Advocates was administered in May 2013. The survey was administered online, with responses anonymised and aggregated. Online surveys are also less intrusive (Bethlehem & Biggignandi, 2012) and provide the respondent the opportunity to complete the survey at their own pace, facilitating considered responses. Respondents were reached through a group email, within which they were provided with information about the survey and a link to the website where the survey could be completed. The survey comprised a series of demographic questions about the YAP Advocates; quantitative questions relating to experience, work with their young person, and job satisfaction; along with open-ended qualitative questions about the Advocates’ experiences and their perceptions of the YAP model.

3.3 Research Ethics
The evaluation adhered to the principles of research ethics and was subject to an ethical review process by the National University of Ireland, Maynooth Research Ethics Committee. The special case of working with vulnerable young people makes consideration of involving them as research subjects especially important. Ethical research practice safeguards their interests and protects them from harm throughout the research process.
From September 2011, new YAP clients were offered the opportunity to participate in the research. The young people, along with their parents/guardians were provided with information sheets and informed about the nature and extent of the research evaluation by their Manager. Where a young person and/or their parent/guardian agreed to participate, informed assent and consent forms were completed. Participants were aware that participation was voluntary and that they had the right to decline and could withdraw at any stage. The participants in the comparator group were also asked to complete assent/consent forms. Where they were minors, consent was also sought from their parent/guardian. Participants from the comparator cohort were informed in advance that there would be a small incentive for their participation.

For the purposes of conducting one-to-one interviews, the participants were again informed that participation was voluntary and that they could withdraw from the process at any point, as well as completing assent/consent forms. The researchers were also conscious of their roles in the research process. Researchers working directly with young people were all vetted by An Garda Síochána.

Participants in the survey of Advocates and focus groups with Case and Service Managers were also provided with an information sheet explaining that participation was voluntary and that data would be anonymised and aggregated, upholding participants’ rights to confidentiality and privacy. Similarly, during the training observation sessions, participants were advised that they would not be identified during the research process.

All data in relation to the project was stored in password protected files, with physical data including SDQs stored in a locked filing cabinet, upholding participants’ rights to confidentiality and privacy and ensuring adequate information security standards were met at all times.

### 3.4 Limitations and Learning

Using the quasi-experimental non-equivalent approach presents its own limitations, in particular the difficulty in establishing causal relationships, because of the absence of
randomisation. The impact of confounding variables from the social environment cannot be measured in this type of study, and so caution must be exercised in the interpretation of findings. The overall findings for the comparator group are referred to at the end of the next chapter, and full details are included in Appendix 2. However, it is clearly acknowledged throughout the study that the non-equivalent comparator group, while broadly similar, is not directly comparable.

The project also presented opportunities for learning. As highlighted above, some staff were reluctant to participate, concerned that administration of questionnaires would discourage participation at a sensitive stage of initial engagement, with further concern that the additional paperwork may be perceived as not youth-friendly, off-putting, complex or time-consuming. In addition to these challenges, the administration of the research was resource-intensive, requiring ongoing organisational support for staff and young people. SDQ administration was completed by YAP Case Managers (and occasionally Advocates) who were given a detailed briefing on the completion of the forms. Responsibility for SDQ administration for the YAP cohort also required completion of consent/assent forms for each young person. A small number of consent forms were noted as absent upon compilation of the dataset for analysis. To overcome this problem, all relevant Case Managers were contacted and asked to review their relevant research documentation and in a small number of cases, the research team made further contact with the participants to secure consent. This has highlighted the importance of YAP Ireland staff possessing an understanding of the research process and handling of research material, and the value of such research within the context of the overall work of the organisation.
Chapter 4: Strengths and Difficulties Questionnaires Analysis

4.1 Introduction

The Strengths and Difficulties Questionnaire (SDQ) (Goodman, 2005) is a brief behavioural screening questionnaire incorporating 25 attributes, some positive and some negative. The 25 items are divided into five scales including emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems and pro-social behaviour, as well as a composite total difficulties score. This chapter presents a demographic profile of the YAP cohort and scoring information from SDQ analysis. SDQ analysis for the non-equivalent comparator group can be found in Appendix 2.

The presented scores include total difficulties scores, along with sub-scale scores at baseline, mid-point and end-point for young people and their parents/guardians. A comparison over time is also presented for total difficulties and sub-scales. In addition, impact factor scoring is also presented for young people and their parents/guardians.

4.2 Demographic Information

The following demographic data was collected from YAP client files. The percentages shown represent proportions of the respondents for each given variable (age, location etc.). Consequently, percentages may differ across variables where respondent numbers differ, as a result of some missing data and non-responses. In addition to the YAP cohort, a detailed demographic profile of the comparator cohort can be found in Appendix 2.

Within the YAP cohort, there were 126 males (59.2%) and 87 females (40.8%). The mean age for the YAP cohort at baseline was 13.99. As the ages for each stage of the research was calculated using the start date, these results are statistically different at each time point.
A large proportion of the YAP cohort were from the Dublin (36.6%, n=78) and Meath (17.8%, n=38) regions, reflecting the scale of the programme in these regions, with the lowest number of clients in the Kerry region (0.5%, n=1).

With regard to cohort placement, 164 young people (77%) were living at home at SDQ baseline, with a further 25 (11.7%) living with extended family and 22 (10.3%) in foster care. One young person was recorded as being in residential care and one in supported lodgings. 49 young people (23%) reported a history of care and a further 49 were at risk of care at baseline. Looking at current household circumstances, 109 young people (55.3%) were in a single-parent household at baseline, with 62 young people (31.5%) in
a two-parent household. Of the remainder, 14 young people (7.1%) were living with extended family, and 11 (5.6%) were living with a partner.

40 (19.1%) of the young people in the YAP cohort reported a family member with a conviction, while 84 (40.2%) reported a family member with history of substance abuse. There was a high level of unavailable data/ non-response within the cohort; possibly partly due to the sensitive nature of the information requested. 53 young people (24.9%) in the YAP cohort reported a history of arrest.

29.6% (63) of the young people in the programme group had a diagnosis of disability or mental health issue, with 4.2% (9) awaiting assessment at the beginning of the study. Within the YAP cohort, 98 young people (46.0%) engaged at least once per week in other services. Of those services, 21 young people engaged with the Child and Adolescent Mental Health Services (CAMHS) (21.4%), 14 engaged with a counsellor or psychologist (14.3%), and 13 young people had engaged with a youth project at baseline (13.3%). Other services include family support workers, Garda Youth Diversion and sports or social clubs. More detail is provided in Figure 4.3 below.

![Figure 4.3 Service Engagement YAP Cohort](image-url)
4.3 Strengths and Difficulties Scores

Table 4.1, adapted from Coombs (2005) which is based on norms for British children was used to interpret the scoring and scales within the SDQ. There are currently no norms available for Ireland, but the use of the British norms was deemed an appropriate alternative. ‘Average’ is defined as scores which are close to average – clinically significant problems in this area are unlikely; ‘borderline’ is defined as scores which are slightly raised/low – may reflect clinically significant problems; ‘at risk’ is defined as scores which are high/low – there is a substantial risk of clinically significant problems in this area. A total of 191 young people and 180 parents/guardians participated in the research at baseline. By end-point, a total of 102 young people and 94 parents/guardians participated in the research.

### Self Completed Version

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Difficulties Score</strong></td>
<td>0 – 15</td>
<td>16 – 19</td>
<td>20 – 40</td>
</tr>
<tr>
<td><strong>Emotional Symptoms Score</strong></td>
<td>0 – 5</td>
<td>6</td>
<td>7 – 10</td>
</tr>
<tr>
<td><strong>Conduct Problem Score</strong></td>
<td>0 – 3</td>
<td>4</td>
<td>5 – 10</td>
</tr>
<tr>
<td><strong>Hyperactivity Score</strong></td>
<td>0 – 5</td>
<td>6</td>
<td>7 – 10</td>
</tr>
<tr>
<td><strong>Peer Problem Score</strong></td>
<td>0 – 3</td>
<td>4 – 5</td>
<td>6 – 10</td>
</tr>
<tr>
<td><strong>Pro-social Behaviour Score</strong></td>
<td>6 – 10</td>
<td>5</td>
<td>0 – 4</td>
</tr>
</tbody>
</table>

### Parent Version

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Difficulties Score</strong></td>
<td>0 – 13</td>
<td>14 – 16</td>
<td>17 – 40</td>
</tr>
<tr>
<td><strong>Emotional Symptoms Score</strong></td>
<td>0 – 3</td>
<td>4</td>
<td>5 – 10</td>
</tr>
<tr>
<td><strong>Conduct Problem Score</strong></td>
<td>0 – 2</td>
<td>3</td>
<td>4 – 10</td>
</tr>
<tr>
<td><strong>Hyperactivity Score</strong></td>
<td>0 – 5</td>
<td>6</td>
<td>7 – 10</td>
</tr>
<tr>
<td><strong>Peer Problem Score</strong></td>
<td>0 – 2</td>
<td>3</td>
<td>4 – 10</td>
</tr>
<tr>
<td><strong>Pro-social Behaviour Score</strong></td>
<td>6 – 10</td>
<td>5</td>
<td>0 – 4</td>
</tr>
</tbody>
</table>

Table 4.1 Scoring of Strengths and Difficulties Questionnaires

4.3.1 Programme Baseline

This section presents the total difficulties composite scores for the YAP cohort at baseline, in addition to the scores across sub-scales, for parents/guardians and young people. The results are presented as categorical (the number and percentage of valid cases per test) and scores (based on SDQ scoring and scales).
4.3.1.1 Total Difficulties Score

The total difficulties scores for programme baseline are presented in Table 4.2. The mean score for young people is 15.61, falling into the ‘borderline’ category, with the parent/guardian mean score at 19.69 falling into the ‘at risk’ category, indicating parent/guardian perceptions of their young people as ‘at risk of clinically significant problems’.

### Total Difficulties Score Categorical Results (Baseline)

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>89 (46.6%)</td>
<td>45 (23.6%)</td>
<td>57 (29.8%)</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>31 (17.2%)</td>
<td>16 (8.9%)</td>
<td>133 (73.9%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>15.61</td>
<td>(14.72, 16.50)</td>
<td>6.317</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>19.69</td>
<td>(18.74, 20.64)</td>
<td>6.666</td>
</tr>
</tbody>
</table>

*Table 4.2 Baseline Total Difficulties Scores*

4.3.1.2 Emotional Symptoms Scale

The emotional symptoms scores for programme baseline are presented in Table 4.3. The mean score for young people is 3.62, falling into the ‘average’ category, with the parent/guardian mean score at 5.04, falling into the ‘at risk’ category, reflecting differing perceptions of the emotional symptoms faced by young people on the programme.

### Emotional Symptoms Score Categorical Results (Baseline)

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>147 (75.0%)</td>
<td>19 (9.7%)</td>
<td>30 (15.3%)</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>52 (27.4%)</td>
<td>21 (11.1%)</td>
<td>117 (61.6%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>3.62</td>
<td>(3.27, 3.97)</td>
<td>2.523</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>5.04</td>
<td>(4.68, 5.40)</td>
<td>2.542</td>
</tr>
</tbody>
</table>

*Table 4.3 Baseline Emotional Symptoms Scores*

4.3.1.3 Conduct Problem Scale

The conduct problem scores for programme baseline are presented in Table 4.4. The mean score for young people is 3.91, falling into the ‘borderline’ category, with a
parent/guardian mean score of 5.07, falling into the ‘at risk’ category. Again, perceptions of conduct problems differ between parents/guardians and young people.

<table>
<thead>
<tr>
<th>Conduct Problem Score Categorical Results (Baseline)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average</strong></td>
</tr>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
</tbody>
</table>

- **Conduct Problem Score (Baseline)**

<table>
<thead>
<tr>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main (Self Complete)</strong></td>
<td>3.91</td>
<td>(3.61, 4.21)</td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
<td>5.07</td>
<td>(4.68, 5.46)</td>
</tr>
</tbody>
</table>

*Table 4.4 Baseline Conduct Problem Scores*

### 4.3.1.4 Hyperactivity Scale

The hyperactivity scores for programme baseline are presented in Table 4.5. The mean score for young people is 5.68, falling into the ‘borderline’ category, with a parent/guardian mean score of 6.10, again falling into the ‘borderline’ category.

<table>
<thead>
<tr>
<th>Hyperactivity Score Categorical Results (Baseline)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average</strong></td>
</tr>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
</tbody>
</table>

- **Hyperactivity Score (Baseline)**

<table>
<thead>
<tr>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main (Self Complete)</strong></td>
<td>5.68</td>
<td>(5.33, 6.03)</td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
<td>6.10</td>
<td>(5.75, 6.45)</td>
</tr>
</tbody>
</table>

*Table 4.5 Baseline Hyperactivity Scores*

### 4.3.1.5 Peer Problems Scale

The peer problems scores for programme baseline are presented in Table 4.6. The mean score for young people is 2.41, falling into the ‘average’ category, with the parent/guardian mean score at 3.45, falling into the ‘at risk’ category. Again, the differing perceptions between parents/guardians and young people of peer problems presents.

<table>
<thead>
<tr>
<th>Peer Problem Score Categorical Results (Baseline)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average</strong></td>
</tr>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
<tr>
<td>Peer Problem Score (Baseline)</td>
</tr>
<tr>
<td>-------------------------------</td>
</tr>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
</tbody>
</table>

Table 4.6 Baseline Peer Problems Scores

4.3.1.6 Pro-social Behaviour Scale

Finally, the pro-social behaviour scores for programme baseline are presented in Table 4.7. The mean score for young people is 7.72, falling into the ‘average’ category, with the parent/guardian mean score at 7.14, also falling into the ‘average’ category. These scores indicate that both parents/guardians and young people perceive clinically significant problems in this area to be unlikely at base point.

<table>
<thead>
<tr>
<th>Pro-social Behaviour Score Categorical Results (Baseline)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main (Self Complete)</strong></td>
<td>175 (88.8%)</td>
<td>12 (6.1%)</td>
<td>10 (5.1%)</td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
<td>148 (77.5%)</td>
<td>23 (12.0%)</td>
<td>20 (10.5%)</td>
</tr>
</tbody>
</table>

Table 4.7 Baseline Pro-social Behaviour Scores

4.3.2 Programme Mid-Point

This section presents the total difficulties composite scores for the programme mid-point, in addition to the scores across sub-scales, for parents/guardians and young people.

4.3.2.1 Total Difficulties Score

The total difficulties scores for programme mid-point are presented in Table 4.8. The mean score for young people is 14.51, falling into the ‘average’ category, with a parent/guardian mean score of 17.04, falling into the ‘at risk’ category. Again, the differing perceptions between parents/guardians and young people of total difficulties is evident.

<table>
<thead>
<tr>
<th>Total Difficulties Score Categorical Results (Mid-Point)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main (Self Complete)</strong></td>
<td>81 (61.4%)</td>
<td>21 (15.9%)</td>
<td>30 (22.7%)</td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
<td>34 (30.4%)</td>
<td>14 (12.5%)</td>
<td>64 (57.1%)</td>
</tr>
</tbody>
</table>
4.3.2.2 Emotional Symptoms Scale

The emotional symptoms scores for programme mid-point are presented in Table 4.9. The mean score for young people is 3.51, falling into the ‘average’ category, with the parent/guardian mean score at 4.15, falling into the ‘borderline’ category.

| Emotional Symptoms Score Categorical Results (Mid-Point) |
|-----------------------------------|-----------------|-----------------|----------|
|                                   | Average         | Borderline      | At Risk  |
| Main (Self Complete)              | 102 (76.1%)     | 16 (11.9%)      | 16 (11.9%)|
| Main (Parent)                     | 53 (42.7%)      | 16 (12.9%)      | 55 (44.4%)|

| Emotional Symptoms Score (Mid-Point) |
|-------------------------------------|-----------------|-----------------|----------|
|                                     | Mean Score      | 95% Confidence Interval | Standard Deviation |
| Main (Self Complete)                | 3.51            | (3.10, 3.92)     | 2.420    |
| Main (Parent)                       | 4.15            | (3.69, 4.61)     | 2.608    |

Table 4.9 Mid-Point Emotional Symptoms Scores

4.3.2.3 Conduct Problems Scale

The conduct problems scores for programme mid-point are presented in Table 4.10. The mean score for young people is 3.43, falling into the ‘borderline’ category, with the parent/guardian mean score at 4.10, falling into the ‘at risk’ category. Again, perceptions of conduct problems differ between parent/guardian report and young people’s self-reports.

| Conduct Problem Score Categorical Results (Mid-Point) |
|------------------------------------------------------|-----------------|-----------------|----------|
|                                                     | Average         | Borderline      | At Risk  |
| Main (Self Complete)                                | 75 (56.4%)      | 17 (12.8%)      | 41 (30.8%)|
| Main (Parent)                                       | 34 (32.1%)      | 7 (6.6%)        | 65 (61.3%)|

| Conduct Problem Score (Mid-Point)                    |
|------------------------------------------------------|-----------------|-----------------|----------|
| Main (Self Complete)                                | 3.43            | (3.11, 3.75)    | 1.905    |
| Main (Parent)                                       | 4.10            | (3.65, 4.55)    | 2.496    |

Table 4.10 Mid-Point Conduct Problems Scores
4.3.2.4 Hyperactivity Scale

The hyperactivity scores for programme mid-point are presented in Table 4.11. The mean score for young people is 5.08, falling into the ‘borderline’ category, with the parent/guardian mean score at 5.42, also falling into the ‘borderline’ category at mid-point.

<table>
<thead>
<tr>
<th>Hyperactivity Score Categorical Results (Mid-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Main (Self Complete)</td>
</tr>
<tr>
<td>Main (Parent)</td>
</tr>
</tbody>
</table>

Table 4.11 Mid-Point Hyperactivity Scores

4.3.2.5 Peer Problems Scale

The peer problems scores for programme mid-point are presented in Table 4.12. The mean score for young people is 2.49, falling into the ‘average’ category, with the parent/guardian mean score at 3.31, falling into the ‘at risk’ category at mid-point. Again, perceptions differ, with parents/guardians perceiving their young people to be at risk of clinically significant problems in this area.

<table>
<thead>
<tr>
<th>Peer Problem Score Categorical Results (Mid-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Main (Self Complete)</td>
</tr>
<tr>
<td>Main (Parent)</td>
</tr>
</tbody>
</table>

Table 4.12 Mid-Point Peer Problems Scores

4.3.2.6 Pro-social Behaviour Scale

Finally, the pro-social behaviour scores for programme mid-point are presented in Table 4.13. The mean score for young people is 7.57, falling into the ‘average’ category, with the parent/guardian mean score at 7.31, also falling into the ‘average’ category at mid-point.

<table>
<thead>
<tr>
<th>Peer Problem Score (Mid-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean Score</td>
</tr>
<tr>
<td>Main (Self Complete)</td>
</tr>
<tr>
<td>Main (Parent)</td>
</tr>
</tbody>
</table>


### Pro-social Behaviour Score Categorical Results (Mid-Point)

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>110 (82.1%)</td>
<td>14 (10.4%)</td>
<td>10 (7.5%)</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>92 (74.2%)</td>
<td>18 (14.8%)</td>
<td>14 (11.3%)</td>
</tr>
</tbody>
</table>

### Pro-social Behaviour Score (Mid-Point)

<table>
<thead>
<tr>
<th></th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>7.57</td>
<td>(7.23, 7.91)</td>
<td>1.983</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>7.31</td>
<td>(6.94, 7.68)</td>
<td>2.124</td>
</tr>
</tbody>
</table>

Table 4.13 Mid-Point Pro-social Behaviour Scores

### 4.3.3 Programme End-Point

This section presents the total difficulties composite scores for the programme end-point, in addition to the scores across sub-scales, for parents/guardians and young people.

#### 4.3.3.1 Total Difficulties Score

The total difficulties scores for programme end-point are presented in Table 4.14. The mean score for young people is 12.66, falling into the ‘average’ category, with a parent/guardian mean score of 15.47, falling into the ‘borderline’ category at end-point. Again, parents/guardians perceive a greater risk.

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>71 (69.6%)</td>
<td>14 (13.7%)</td>
<td>17 (16.7%)</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>38 (40.4%)</td>
<td>14 (14.9%)</td>
<td>42 (44.7%)</td>
</tr>
</tbody>
</table>

Table 4.14 End-Point Total Difficulties Scores

#### 4.3.3.2 Emotional Symptoms Scale

The emotional symptoms scores for programme end-point are presented in Table 4.15. The mean score for young people is 2.97, falling into the ‘average’ category, with a parent/guardian mean score of 3.77, falling into the ‘borderline’ category at end-point.

<table>
<thead>
<tr>
<th></th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>12.66</td>
<td>(11.50, 13.82)</td>
<td>6.001</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>15.47</td>
<td>(14.07, 16.87)</td>
<td>6.935</td>
</tr>
</tbody>
</table>

Table 4.15 End-Point Emotional Symptoms Scores
4.3.3.3 Conduct Problems Scale

The conduct problems scores for programme end-point are presented in Table 4.16. The mean score for young people is 2.96, falling into the ‘average’ category, with a parent/guardian mean score of 3.89, falling into the ‘at risk’ category at end-point. Again, parents/guardians perceive greater conduct problems at end-point.

### Conduct Problem Score Categorical Results (End-Point)

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>71 (68.9%)</td>
<td>11 (10.7%)</td>
<td>21 (20.4%)</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>32 (34.0%)</td>
<td>14 (14.9%)</td>
<td>48 (51.1%)</td>
</tr>
</tbody>
</table>

### Conduct Problem Score (End-Point)

<table>
<thead>
<tr>
<th></th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>2.96</td>
<td>(2.57, 3.35)</td>
<td>2.017</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>3.89</td>
<td>(3.88, 4.40)</td>
<td>2.508</td>
</tr>
</tbody>
</table>

*Table 4.16 End-Point Conduct Problems Scores*

4.3.3.4 Hyperactivity Scale

The hyperactivity scores for programme end-point are presented in Table 4.17. The mean score for young people is 4.60, falling into the ‘average’ category, with a parent/guardian mean score of 4.97, also falling into the ‘average’ category at end-point, indicating that both groups perceive clinically significant problems in this area to be unlikely at end-point.

### Hyperactivity Score Categorical Results (End-Point)

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>65 (63.1%)</td>
<td>14 (13.6%)</td>
<td>24 (23.3%)</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>59 (62.8%)</td>
<td>5 (5.3%)</td>
<td>30 (31.9%)</td>
</tr>
</tbody>
</table>

*Table 4.17 End-Point Hyperactivity Scores*
### Hyperactivity Score (End-Point)

<table>
<thead>
<tr>
<th></th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>4.60</td>
<td>(4.12, 5.08)</td>
<td>2.475</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>4.97</td>
<td>(4.45, 5.49)</td>
<td>2.562</td>
</tr>
</tbody>
</table>

*Table 4.17 End-Point Hyperactivity Scores*

### 4.3.3.5 Peer Problems Scale

The peer problems scores for programme end-point are presented in Table 4.18. The mean score for young people is 2.23, falling into the ‘average’ category, with a parent mean score of 2.85, falling into the ‘borderline’ category at end-point.

<table>
<thead>
<tr>
<th>Peer Problem Score Categorical Results (End-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
</tr>
<tr>
<td>---------</td>
</tr>
<tr>
<td>Main (Self Complete)</td>
</tr>
<tr>
<td>Main (Parent)</td>
</tr>
</tbody>
</table>

*Table 4.18 End-Point Peer Problems Scores*

### 4.3.3.6 Pro-social Behaviour Scale

The pro-social behaviour scores for programme end-point are presented in Table 4.19. The mean score for young people is 7.37, falling into the ‘average’ category, with a parent mean score of 7.47, again falling into the ‘average’ category at end-point.

<table>
<thead>
<tr>
<th>Pro-social Behaviour Score Categorical Results (End-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
</tr>
<tr>
<td>---------</td>
</tr>
<tr>
<td>Main (Self Complete)</td>
</tr>
<tr>
<td>Main (Parent)</td>
</tr>
</tbody>
</table>

*Table 4.19 End-Point Pro-social Behaviour Scores*
4.4 Comparison over Time

As the scales/scores follow a normal distribution for each group, it was appropriate to compare means using paired-sample t-tests to evaluate the difference over time points. It should be noted that paired-sample t-tests require that the pair in question (e.g. total difficulties at baseline and total difficulties at end point) are non-missing. If either of the pair is missing for a respondent, it was not included in the calculation. Thus some calculated differences from baseline to end-point may differ slightly from the composite of differences from all three time points.

4.4.1 Overall Score

Between baseline and mid-point, the total difficulties score on the self-report version decreased by 0.769 \([-0.235, 1.772]\), \(t=1.517, p=0.132\). Between mid-point and end-point, the score further decreased by 2.634 \([1.573, 3.694]\), \(t=4.940, p<0.001\). Overall, from baseline to end-point, the total difficulties score decreased by 3.206 \([2.062, 4.349]\), \(t=5.568, p<0.001\). These figures indicate that there was an overall improvement in respondents who took part in the YAP programme. This change was found to be statistically significant. This effect was further seen through the parent version with a decrease of 2.630 \([1.553, 3.708]\), \(t=4.838, p<0.001\) from baseline to mid-point, a further decrease of 2.114 \([0.965, 3.324]\), \(t=3.626, p=0.001\) from mid-point to end-point, with an overall decrease from baseline to end-point of 4.751 \([3.488, 6.014]\), \(t=7.477, p<0.001\). Again, this finding is statistically significant.

![Figure 4.4 Comparison Over Time](image-url)
This trend can be seen more clearly when looking at the categories of ‘average’, ‘borderline’ and ‘at risk’ scores, in addition to the raw scores. As above, the parent version shows markedly higher improvements. There was a 29.2% drop in perceived risk from the parent/guardian perspective and a 13.1% drop from the young person’s perspective.

![Figure 4.5 Comparison Over Time: Parent](image1)

![Figure 4.6 Comparison Over Time: Young Person](image2)
4.4.2 Emotional Symptoms Scale

Between baseline and mid-point, the emotional symptoms score on the self-report version decreased by 0.010 [-0.320, 0.341], t=0.061, p=0.952. Between mid-point and end-point, the score further decreased by 0.697 [0.235, 1.160], t=2.997, p=0.004. Overall, from baseline to end-point, the emotional symptoms score decreased by 0.686 [0.235, 1.138], t=3.017, p=0.003. These figures indicate that there was an overall improvement in respondents who took part in the programme, with the results found to be statistically significant. This effect was further seen through the parent version with a decrease of 0.855 [0.452, 1.258], t=4.199, p<0.001 from baseline to mid-point, a further decrease of 0.453 [-0.069, 0.976], t=1.729, p=0.088 from mid-point to end-point, with an overall decrease from baseline to end-point of 1.310 [0.806, 1.814], t=5.165, p<0.001. Again, this decrease was found to be statistically significant.

This trend can be seen more clearly when looking the categories of ‘average’, ‘borderline’ and ‘at risk’ scores, rather than the raw scores. As above, the parent version shows much higher improvements. There was a 21.4% drop in perceived risk from the parent/guardian perspective and a 5.6% drop from the young person perspective.
4.4.3 Conduct Problems Scale

Between baseline and mid-point, the conduct problems score on the self-report version decreased by 0.429 [(0.094, 0.763), t=2.537, p=0.012]. Between mid-point and end-point, the score further decreased by 0.568 [(0.263, 0.874), t=3.706, p<0.001]. Overall, from baseline to end-point, the conduct problems score decreased by 0.997 [(0.627, 1.368), t=5.342, p<0.001]. These figures indicate that there was an overall improvement in respondents who took part in the programme, with the results found to be of statistical significance. This effect was further seen through the parent version with a decrease of 0.803 [(0.348, 1.258), t=3.498, p=0.001] from baseline to mid-point, a further decrease of 0.419 [(-0.037, 0.875), t=1.832, p=0.071] from mid-point to end-point.
point, with an overall decrease from baseline to end-point of 1.259 [(0.741, 1.778), t=4.830, p<0.001]. Again, this finding is statistically significant.

![Conduct Problems](image)

**Figure 4.10 Comparison Over Time: Conduct Problems**

This trend can be seen more clearly when looking the categories of ‘average’, ‘borderline’ and ‘at risk’ scores, rather than the raw scores. Once again the improvement is greater from the perspective of the parents. There was a 23.8% drop in perceived risk from the parent perspective and a 14.8% drop from the young person’s perspective. Parent scores saw a drop from the beginning of the programme, with a smaller change from mid-point to end-point. Self-report scores gradually declined across the programme.

![Conduct Problems: Parent](image)

**Figure 4.11 Conduct Problems: Parent**
4.4.4 Hyperactivity Scale

Between baseline and mid-point, the hyperactivity score on the self-report version decreased by 0.475 [(0.052, 0.898), $t=2.225$, $p=0.028$]. Between mid-point and end-point, the score further decreased by 0.709 [(0.257, 1.161), $t=3.118$, $p=0.003$]. Overall, from baseline to end-point, the hyperactivity score decreased by 1.198 [(0.718, 1.679), $t=4.954$, $p<0.001$]. These figures indicate that there was an overall improvement in respondents who took part in the programme, with the decrease found to be statistically significant. This effect was further seen through the parent version with a decrease of 0.652 [(0.232, 1.072), $t=3.076$, $p=0.003$] from baseline to mid-point, a further decrease of 0.612 [(0.218, 1.006), $t=3.096$, $p=0.003$] from mid-point to end-point, with an overall decrease from baseline to end-point of 1.381 [(0.919, 1.843), $t=5.940$, $p<0.001$]. Again, this result was found to be statistically significant.
As with previous scales, there is a clear trend of improvement when we look at the categories of ‘average’, ‘borderline’ and ‘at risk’ scores, rather than the raw scores. There was a 15.7% drop in respondents perceived as at risk from the parents’ perspective and a 17.4% drop from the young person’s perspective. This is the only scale where the improvement is perceived as greater by the young people themselves than by the parents.
4.4.5 Peer Problems Scale

Between baseline and mid-point, the peer problems score on the self-report version increased by 0.132 [(−0.228, 0.492), t=0.727, p=0.468]. Between mid-point and end-point, the score then decreased by 0.611 [(0.231, 0.992), t=3.197, p=0.002]. Overall, from baseline to end-point, the peer problems score decreased by 0.213 [(−0.159, 0.584), t=1.138, p=0.258]. While these figures represent a small overall improvement in respondents who took part in the programme, this score was not found to be statistically significant and it is not possible to say why the midpoint score increased slightly and decreased subsequently. In the parent version there was a decrease of 0.280 [(−0.113, 0.673), t=1.411, p=0.161] from baseline to mid-point, a further decrease of 0.504 [(0.061, 0.948), t=2.264, p=0.026] from mid-point to end-point, with an overall decrease from baseline to end-point of 0.728 [(0.253, 1.202), t=3.047, p=0.003]. Unlike the self-report results, the parent/guardian changes were statistically significant.
There is an overall improvement in the scores for peer problems when we look at the categories of ‘average’, ‘borderline’ and ‘at risk’ scores, rather than the raw scores. There was a 13.5% drop in perceived risk of problems from the parents’ perspective and a 6.9% drop from the young person’s perspective.
4.4.6 Pro-social Scale

Between baseline and mid-point, the pro-social behaviour score on the self-report version decreased by 0.169 \([-0.151, 0.490]\), \(t=1.047, p=0.297\). Between mid-point and end-point, the score further decreased by 0.092 \([-0.263, 0.447]\), \(t=0.517, p=0.607\). Overall, from baseline to end-point, the pro-social behaviour score decreased by 0.298 \([-0.114, 0.711]\), \(t=1.438, p=0.154\). These scores were not deemed to be of statistical significance. The parent version saw a decrease of 0.050 \([-0.378, 0.478]\), \(t=0.231, p=0.817\) from baseline to mid-point, an increase of 0.327 \([-0.127, 0.780]\), \(t=1.435, p=0.156\) from mid-point to end-point. While the results show an overall increase from baseline to end-point of 0.191 \([-0.344, 0.726]\), \(t=0.710, p=0.480\), this was not deemed of statistical significance. There were no statistically significant changes in pro-social behaviour scores for the self-report version or the parent version.
The programme seems to have minimal effect on the pro-social behaviour score, with only a 3.1% drop in the ‘at risk’ category from the parents'/guardian perspective and a 2.6% increase from the young person's perspective, with neither change statistically significant.

![Pro-social Behaviour: Parent](image1)

*Figure 4.20 Pro-social Behaviour: Parent*

![Pro-social Behaviour: Young Person](image2)

*Figure 4.21 Pro-social Behaviour: Young Person*
In order to ascertain whether there were significant gender differences in the programme outcomes, a repeated measure ANOVA was used. ‘Within-subject effects’ are defined as the scores at baseline and endpoints of the programme. Since the sphericity assumption is not important with cases of only two within subject effects, the greenhouse-geisser was used. It suggests that the difference between rounds highlights a statistically significant decline in total difficulty scores ($f(1, 161)= 25.102, p=<0.001$), but that variance among genders was not significant ($f(1, 161)= 0.884, p=0.349$). We can say therefore that the difference in the decline in total difficulty scores between genders was not statistically significant.
4.6 Post-Programme Scores

Comparing the end of programme score to the three month post-programme scores reveals that there are some significant changes in the parent and self-report scores, with some of the improvements made sustained after the programme ended. From the perspective of the young people, there were no significant changes in total difficulties scores, or across the emotional symptoms, conduct problems, hyperactivity or peer pressure sub-scales, indicating that outcomes were sustained post-programme for respondents. A statistically significant increase was recorded for the pro-social scale, although the young people remained in the ‘average’ category. A statistically significant increase in total difficulties from the parent/guardian perspective was recorded. While there were no statistically significant changes across the emotional symptoms, conduct problems, or pro-social sub-scales from the parent/guardian perspective, an increase was recorded on the hyperactivity and peer problems sub-scales. It is important to note that responses were limited at the post-programme phase of data collection, meaning that these figures should be interpreted with caution.

4.6.1 Total Difficulties Score

From the respondents’ perspective, the improvements made on total difficulties were sustained post-programme with an overall average decrease in score of 1.375 \([-0.723, 3.473]\), \(t=1.383, p=0.185\) which was not statistically significant. However, from the parent/guardian perspective, the score increased by an average of 2.473 \([0.530, 4.416]\), \(t=2.600, p=0.014\) which was statistically significant.

<table>
<thead>
<tr>
<th>Total Difficulties Score Categorical Results (Post Programme)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Main (Self Complete)</td>
</tr>
<tr>
<td>Average</td>
</tr>
<tr>
<td>15 (71.4%)</td>
</tr>
<tr>
<td>Main (Parent)</td>
</tr>
<tr>
<td>Average</td>
</tr>
<tr>
<td>11 (28.2%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Difficulties Score (Post Programme)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Main (Self Complete)</td>
</tr>
<tr>
<td>Mean Score</td>
</tr>
<tr>
<td>12.76</td>
</tr>
<tr>
<td>Main (Parent)</td>
</tr>
<tr>
<td>Mean Score</td>
</tr>
<tr>
<td>18.04</td>
</tr>
</tbody>
</table>

*Table 4.20 Post Programme Total Difficulties Scores*
4.6.2 Emotional Symptoms Scale

Emotional symptoms scores remained statistically unchanged at this stage, with an increase of 0.395 \([-0.162, 0.952]\), \(t=1.448, p=0.158\) from the parents’ perspective and a decrease of 0.193 \([-0.600, 0.986]\), \(t=0.511, p=0.615\), neither of which represent a significant change overall from end point to post programme.

<table>
<thead>
<tr>
<th>Emotional Symptoms Score Categorical Results (Post Programme)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average</strong></td>
</tr>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
</tbody>
</table>

**Table 4.21 Post Programme Emotional Symptoms Scores**

4.6.3 Conduct Problems Scale

Conduct problem scores remained statistically unchanged at this stage, with an increase of 0.331 \([-0.408, 1.069]\), \(t=0.914, p=0.368\) from the parents’ perspective and a decrease of 0.671 \([-0.194, 1.536]\), \(t=1.629, p=0.121\), neither of which represents a significant change overall from end point to post programme.

<table>
<thead>
<tr>
<th>Conduct Problem Score Categorical Results (Post Programme)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average</strong></td>
</tr>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
</tbody>
</table>

**Table 4.22 Post Programme Conduct Problems Scores**

4.6.4 Hyperactivity Scale

From the parents’ perspective, hyperactivity scores saw a statistically significant increase post-programme by 1.097 \([0.381, 1.812]\), \(t=3.130, p=0.004\). This increase may be due to non-response bias at the 4th stage of data collection. The self-report score
remained unchanged, with an average decrease of 0.278 \([-0.851, 1.407], t=0.5119, p=0.610\].

<table>
<thead>
<tr>
<th>Hyperactivity Score Categorical Results (Post Programme)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td>--------------------------------------------</td>
</tr>
<tr>
<td>14 (66.7%)</td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hyperactivity Score (Post Programme)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td>--------------------------------------------</td>
</tr>
<tr>
<td>4.81</td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
</tbody>
</table>

**Table 4.23 Post Programme Hyperactivity Scores**

4.6.5 Peer Problems Scale

From the parents' perspective, peer problem scores saw a statistically significant increase post-programme by 0.651 \([0.024, 1.277], t=2.121, p=0.042\]. This is very interesting because parent responses had perceived a decrease in peer problems across the duration of participation in the programme. The self-report score remained unchanged, with an average decrease of 0.444 \([-0.478, 1.366], t=1.017, p=0.323\]. Again, these figures should be interpreted with caution.

<table>
<thead>
<tr>
<th>Peer Problem Score Categorical Results (Post Programme)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td>--------------------------------------------</td>
</tr>
<tr>
<td>16 (76.2%)</td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Peer Problem Score (Post Programme)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main (Self Complete)</strong></td>
</tr>
<tr>
<td>--------------------------------------------</td>
</tr>
<tr>
<td>2.14</td>
</tr>
<tr>
<td><strong>Main (Parent)</strong></td>
</tr>
</tbody>
</table>

**Table 4.24 Post Programme Peer Problem Scale**

4.6.6 Pro-social Scale

From the parents' perspective, pro-social behaviour scores saw no statistically significant change post-programme, with an average increase of 0.153 \([-0.608, 0.914], t=0.411, p=0.684\]. The self-report scores saw a statistically significant increase of 1.118 \([0.225, 2.011], t=2.631, p=0.017\]. As with the other scales, it is important to interpret
these findings with caution, based on the small number of post programme respondents.

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>20 (95.2%)</td>
<td>1 (4.8%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>25 (65.8%)</td>
<td>8 (21.1%)</td>
<td>5 (13.2%)</td>
</tr>
</tbody>
</table>

Pro-social Behaviour Score (Post Programme)

<table>
<thead>
<tr>
<th></th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (Self Complete)</td>
<td>7.95</td>
<td>(7.31, 8.59)</td>
<td>1.499</td>
</tr>
<tr>
<td>Main (Parent)</td>
<td>6.92</td>
<td>(6.21, 7.63)</td>
<td>2.264</td>
</tr>
</tbody>
</table>

Table 4.25 Post Programme Pro-social Scores
4.7 Impact Factors

For the impact questions, a score of 0 is interpreted as ‘average’, a score of 1 is interpreted as ‘borderline’ and a score of between 2 and 10 is interpreted as ‘at risk’. The self-report for the YAP participants stayed within the ‘borderline’ category at all points through the study. There was no statistically significant difference, with a change of 0.280 [(-0.170, 0.666), t=1.435, p=0.155]. These figures indicate that the programme had no overall effect on the impact scores. The parent version saw the impact score drop from an average score in the ‘at risk’ group to the ‘borderline’ group, dropping more than the self-report group. There was an average decrease of 0.958 [(0.533, 1.384), t=4.490, p<0.001], indicated that the score improved from a parent/guardian perspective from mid-point to end-point.

**Figure 4.23 Impact Factor Scores**

Parents/guardians indicated a 15% drop in perception of risk between mid-point and programme end.

**Figure 4.24 Impact Factor Scores: Parent**
A similar overall drop of 14.2% was seen for respondents between baseline and end point.

Figure 4.25 Impact Factor Scores: Young Person
4.8 Fidelity Study

A fidelity survey was administered to the YAP cohort young people and their parents/guardians at time two of the SDQ data collection (at the mid-point/three months into the YAP programme). 72 parents and 63 young people answered the fidelity study questions. The administered instrument consists of five short statements, scored on a scale of one to ten. The statements (as presented to the young people and parents) are as follows:

| The YAP programme focuses on my strengths and abilities |
| I feel heard, understood and respected on the YAP programme |
| I have a say in what happens with my Advocate |
| My Advocate is a good match for me |
| I find it easier to deal with things since starting with YAP |

*Figure 4.26 Fidelity Instrument*

All items in the fidelity study scored very highly, indicating that both parents and young people were positive about their experiences with the programme. For young people, scores were consistently high, ranging from 8.6 for “The YAP programme focuses on my strengths and abilities” to 9.27 for “I feel heard, understood and respected on the YAP programme”. For parent/guardian responses, scores were also consistently high, ranging from 8.26 for “The young person finds it easier to deal with things since starting with YAP” and 9.51 for “The young person has a say in what happens with their Advocate” and “The young person’s Advocate is a good match for them”. 
Parent Scores:
For questions 1 through 4, scores ranged from 5 to 10. For question 5, scores ranged from 1 to 10 (however, only 7% of parents indicated a score lower than 5)

Self Scores:
Responses to question 1 ranged from 5 to 10. For question 2, they also ranged mainly from 5 to 10, with a single respondent scoring a 2. For question 3, scoring ranged from 0 to 10, however only 8% of respondents indicated a score under 7. For question 4, scoring again ranged from 0 to 10, however only 4.8% of respondents indicated a score under 8. Question 5 responses ranged from 2 to 10, however only 4.8% responded with a score under 5.
<table>
<thead>
<tr>
<th>Question</th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1 (Self)</td>
<td>8.60</td>
<td>(8.23, 8.97)</td>
<td>1.487</td>
</tr>
<tr>
<td>Q1 (Parent)</td>
<td>9.13</td>
<td>(8.80, 9.46)</td>
<td>1.424</td>
</tr>
<tr>
<td>Q2 (Self)</td>
<td>9.27</td>
<td>(8.90, 9.64)</td>
<td>1.483</td>
</tr>
<tr>
<td>Q2 (Parent)</td>
<td>9.44</td>
<td>(9.18, 9.70)</td>
<td>1.112</td>
</tr>
<tr>
<td>Q3 (Self)</td>
<td>8.87</td>
<td>(8.35, 9.39)</td>
<td>2.106</td>
</tr>
<tr>
<td>Q3 (Parent)</td>
<td>9.51</td>
<td>(9.26, 9.76)</td>
<td>1.100</td>
</tr>
<tr>
<td>Q4 (Self)</td>
<td>9.37</td>
<td>(8.96, 9.78)</td>
<td>1.652</td>
</tr>
<tr>
<td>Q4 (Parent)</td>
<td>9.51</td>
<td>(9.22, 9.80)</td>
<td>1.245</td>
</tr>
<tr>
<td>Q5 (Self)</td>
<td>8.68</td>
<td>(8.18, 9.18)</td>
<td>2.039</td>
</tr>
<tr>
<td>Q5 (Parent)</td>
<td>8.26</td>
<td>(7.72, 8.80)</td>
<td>2.320</td>
</tr>
</tbody>
</table>

Table 4.26 Fidelity Study Mean Scores
4.9 Conclusion

Young people participating in the YAP programme had positive outcomes, as evidenced statistically through the Strengths and Difficulties Questionnaire. Young people’s self-report scores for total difficulties improved significantly across the six month time frame. Young people participating in the programme also perceived positive outcomes on a range of sub-scales across the six month time frame, including the emotional symptoms, conduct problems and hyperactivity scales (in the latter case perceiving a greater improvement than the parents). While young people showed a small improvement on the peer problems scale and a small increase in risk on the prosocial scale, these findings were not deemed to be statistically significant. Parents/guardians of young people participating in the programme also perceived positive outcomes. Scores for total difficulties improved significantly across the six month time frame. Parent/guardian reports also showed significant improvements across a range of sub-scales, including the emotional symptoms, conduct problems, hyperactivity and peer problems scales. Overall, these results for both participants and parents/guardians indicate significantly improved wellbeing for young people participating in the programme. The programme supports outcomes across multiple areas of a young person’s development, corresponding to research holding that positive youth development programme should foster resilience, as well as promote social, emotional, cognitive, behavioural and moral competence (Catalano et al., 2002).

Note on Comparator Group

As explained earlier in this report, the research design for the study included administration of the SDQ to a ‘comparator group’ of young people who were broadly similar, in terms of background and experiences, to the young people participating in the YAP programme, but who were not involved in YAP or in any other regular youth service programme or activity. For ethical as well as practical reasons the groups were not randomly assigned, and they were not precisely matched, variable by variable, so any similarities or differences in their SDQ outcomes must be interpreted particularly tentatively. That is why we have not presented the comparator group findings in detail in this chapter, juxtaposed item by item with the YAP cohort, but have rather included them in an appendix. Nonetheless it is certainly of indicative interest to note that the
SDQ outcomes for the comparator group over the six month period from first to second administration of the questionnaire were less favourable than the outcomes for the YAP cohort. The comparator group showed no statistically significant change in total difficulties scores from baseline to end-point. In addition, the comparator group showed no significant changes in the emotional, conduct and peer problems scales. The comparator group did show a statistically significant improvement on the pro-social scale, although the group stayed in the ‘average’ category from baseline to end-point. The group also showed a statistically significant improvement on the hyperactivity scale, just falling into the ‘borderline’ category at end-point. There were no statistically significant changes in impact factor scores over time for young people in the comparator group. Detailed SDQ results for the comparator group can be found in Appendix 2.
Chapter 5: YAP Interview Series

5.1 Introduction
The previous chapter presented the findings of an analysis of strengths and difficulties questionnaires (SDQs) completed by young people participating in the YAP programme and by their parents/guardians. To gain more detailed information about the experience of participating in the programme, a smaller number of young people, along with their Advocates and guardians, were invited to take part in a series of interviews at the beginning, middle and end stages of programme, providing detailed information about their progress and the time they spend with their Advocate. Nine young people, along with their Advocates and guardians took part in the interview series, including seven females and two males. One male participant withdrew from the YAP programme after the initial interview, with two females withdrawing after the second round of interviews. The young people range from 11 to 16 years of age. Of those interviewed, six were in Dublin, two were in Limerick and one was in the Monaghan region. The interview data was manually coded for thematic analysis. This section presents findings from interviews. During the interviews, the young people, their Advocates and their guardians were asked questions about their time before YAP, the activities the young people do on the YAP programme, changes in the young people since joining YAP, the disengagement process, and challenges faced on the programme.

5.2 YAP Young People
The young people participating in the YAP evaluation interview series discussed how they would spend their time before joining the YAP programme, their opinions of their Advocates and the matching process, the activities they do with their YAP Advocates, the benefits of the programme, the disengagement process and things they might do differently. Overall, the young people describe their experience as positive and positive change including increased confidence and increased participation in activities and community.
5.2.1 Before YAP

The young people participating in the interview series talked about their experiences before joining the YAP programme. They described a lack of social outlets and limited participation in community. The young people described ‘hanging around’, ‘staying in bed’ and ‘watching telly’. The young people also described negative experiences of, and a lack of interest in education. Occasionally, the young people told of becoming involved in activities that may warrant concern for their safety, including staying out ‘all night in the streets’ and self-harming.

“Most days I probably go to school, if I get bribed with something. Then I come home and just sit around. I go out Saturday night and go out to the local park with everybody. That is really it.”

“I shout abuse at teachers and they ask me to leave class.”

“On the weekends I would stay in bed until around 3pm or 4pm, lie around, get dressed and then I’d go out to the park and I’d come in. Sometimes I wouldn’t come in at all, I’d just stay out. [I would] stay in my friend’s house or stay all night in the streets.”

“I don’t go out much so I stay home most of the time. I would most of the time be studying and watching TV and that, and that is it.”

“Last year I would self-harm just to feel something other than anger.”

5.2.2 Experience of a YAP Advocate

The young people interviewed described beneficial experiences of working with YAP Advocates. The young people also demonstrated their ability to reflect on the process and the strengths of their Advocates. Those interviewed reported positive experiences, including references to the Advocates’ interests and hobbies, their ability to listen and offer advice, as well as their abilities to engage the young people by ‘telling stories’, encouraging and joining in activities including supporting school work and, drawing on the YAP model, avoiding judgment and focusing on the strengths of the young person, while listening to their points of view.
“I could tell [the Advocate] stuff and if I need help with things [the Advocate] would tell me, don’t do that, give it a few more days and don’t make a straight decision, give it time. [The Advocate] gives good advice.”

“[The Advocate] really appreciates if you have Christmas exams and you need to study she’d bring me to the library and she’d give you space and she’d give you time.”

“I can just talk to her about anything and just completely no judgement and anything like that.”

“She is interested in most of the things that I am interested in so there is a lot to do and lots of things to talk about. We watch the same things, we like the same music and things like that. She is a great person.”

“You actually know someone is listening to you and taking in the information and being able to give you advice on it.”

“She will always make you feel good about yourself; she would talk to me about positive things.”

The young people also reported positive experiences of the matching process and satisfaction with the Advocate chosen for them, often based on similar interests but also matched to their specific needs of the young person.

“[The Advocate is a good match] because she is into sports and she is into the old music and so am I.”

“We have a lot of similarities...[Advocate] knows what situation you are in, like [the Advocate] would be afraid you would get bored so is always talking to you and that is a good thing.”

“Yes [my Advocate is a] perfect [match]. Well we like the same drinks and stuff, like hot chocolate, we can’t stop talking about it. We are always going around to different coffee shops to have hot chocolate. And we watch the exact same shows...if we hear a song on the radio that I like then I know that [Advocate] likes it too because she likes singing to it and everything.”

“We are really alike actually; we have the same tastes in music and stuff. So we’d be in the car and we’d be playing music and all.”

A small number of respondents reported dissatisfaction with their Advocate, although the reasons given did not for the most part reflect on the Advocate’s ability or on the matching process.
For example, one young person reported finding it strange that their Advocate was 'young' and 'in college', possibly a result of previous experience with more mainstream services, including social work.

“I just don’t like [my Advocate], [the Advocate] can be okay, sometimes.”

“[The Advocate] is a bit too young because [the Advocate] is in college and I find that weird.”

“She had a lot of car trouble and she had to cancel a lot of times and that really bugged [guardian] because...I think he thought YAP in general would be a bit more efficient.”

5.2.3 Activities Undertaken

The young people on the YAP programme described a range of activities undertaken with their Advocates, including dining out, going to the cinema, going bowling, taking walks and taking horse-riding lessons. Those interviewed were for the most part satisfied with the range of activities they were experiencing on the YAP programme.

“We’d go to the pictures, we’d go in and get our tickets and go into the cinema and sit down and watch the whole film. We’d just be looking at each other and laughing.”

“We went to [the coast] and looking out over the bay and the sea and everything and I saw the fishing boats and oh my God I love that scenery.”

“I love playing pool so we will look into playing pool. I think playing pool, going for walks and getting lunch are the main things that we would be doing.”

“We usually go to the library because [the Advocate] wants us to get our homework done and sometimes we go to [shopping centre].”

“[The Advocate] is bringing us diving next week or something, [at] the National Aquatic Centre.”

The activities were sometimes linked to sustainable community engagement, drawing on the community ethos of the YAP model. Not all respondents agreed that they had made lasting community connections, with two responses of ‘no’ and ‘no not really’ when asked if they had found a ‘role model’ or ‘adult’ in the community to engage with after the programme.
“We go horse riding for half an hour and then we might go to Costa after. In January I am going to be going to hip-hop dancing.”

“We go to a regular place where we go and get our nails done and we go and get our tan done and all and we have kind of built a relationship with the girl that is working in the shop. I would keep going to her, because I only know her, and I would keep going to her.”

“We would do swimming and drama; sometimes we go out for walks.”

The young people also described how decisions were reached on the types of activities they would pursue, reporting brainstorming, discussing a variety of options and ultimately, mutual decision-making based on a variety of factors, including interests and availability, as well as limitations such as staying within the allocated budget.

“Well when we’d be going out we’d be talking and [the Advocate would] ask, ‘What do you want to do later and when do you want to do it?’ So we just talk about it, that is what we do, that is what we decide so if [the Advocate] has a suggestion and I have a suggestion we will decide what is best.”

“Well usually she would say a few stuff and we’d sit and think about it.”

“She asks me what I would like to do and usually I don’t come up with loads of things so she would come up with places and she’d say, ‘which one would you like to go to most?’ And I’d pick one thing and then we would go to that.”

5.2.4 Experience of the YAP Programme

Young people interviewed reported positive experiences of the programme, including new experiences and activities, improved social outlets and relationships and an acknowledgement of the change this has brought to their day to day lives. Young people also reported improvements in their mental health, leading to decreased stress, as well as increased confidence and resilience, and increased ability to cope with challenges.

“I became more mature, I take responsibility, I don’t go out drinking on the streets or anything like that, I have learned how to speak properly.”

“They get you in off the streets out of trouble. They keep you out of trouble. Basically they make you change if you want to change. They made me want to change.”
“I have changed now. I used to go around robbing things, robbing bikes but I don’t do that anymore. I have respect for my ma. I used not to have respect for my ma but I have respect for her now.”

“Maybe I don’t feel as stressed because I know if I have an issue I can talk to [my Advocate].”

“We are doing anger management, and because my anger would be so bad before I started YAP, my anger has completely changed.”

“Yes, I think I have become stronger than before....when I am with [the Advocate], I can just tell her everything that I feel, she doesn’t judge me.”

“It has changed me so far as being more open and more confident, getting out there, it has got me involved in stuff.”

“I have become a lot more confident because before I wasn’t really..I should be confident and I think that has really helped me.”

“I think it was perfect for me because I needed support and I wasn’t getting it.”

One participant reported dissatisfaction with their experience of the YAP programme, attributing this to being an unsuitable candidate.

“I don’t think YAP was right for me but I wouldn’t say it is a bad programme, it is a great programme with great content, but for someone that needed it.”

It should be noted that self-report responses occasionally differ to those reported by Advocate and parents/guardians. For instance, while one young person reports changing and finding respect for his guardian, the young person’s guardian reports an opposing view of the young person’s difficult behaviour escalating over the past year and lack of obvious positive outcomes to date.

5.2.5 Challenges
The young people interviewed were asked to describe what challenges they have faced to date on the YAP programme, and what changes they would make to the programme. The young people reported some challenges, including finding budget constraints prohibitive, and expressed interest in improved dedicated facilities. It is acknowledged that YAP Ireland impose the weekly budget limit
with a view to encouraging participation in activities that can be sustained by the family after the disengagement process.

“I think more money should be added to the budget because you can’t do a lot for €15.”

“I think I mentioned bowling and it goes over our budget.”

“[I wanted to] do the roller jam but we weren’t able to because we didn’t have enough.”

“I know they have a headquarters but I think they should make a really big centre where people could go, something like Foróige, like the one in Tallaght, there is only like three of them in Dublin. maybe something where activities go on and you could just drop in and hang out. Something like a café.”

Occasionally, the young people would express dissatisfaction with the types of activities undertaken, typically relating to an unwillingness on the part of the young person or disinterest in repeating particular activities. One young person reported an unwillingness to participate based on a personal view that they did not ‘need’ the YAP programme.

“I don’t want to go and [Advocate] won’t bring me anywhere else if I don’t go to [activity] and I don’t want to go. [The Advocate] keeps telling me that [Advocate’s] boss is making her and I really don’t want to go.”

“We don’t go anywhere fun, like water parks. We just go to all drinking and eating places.”

One young person also expressed dissatisfaction at the expectation that they would be willing to discuss their mental health.

“Today was more focused on the heavier stuff that is going on at the moment when actually I don’t want to talk about that.”

5.2.6 Disengagement Process
Responses to questions about the disengagement process and the end of the YAP programme varied. While a small number of participants reported an awareness of the ‘winding down’ process and gave accounts of being prepared for disengagement, typical responses described apprehension, concern and ‘sadness’ over their Advocate’s departure.
“You only get six months and me and [my Advocate] have only started to get close, then our time is up ...[my Advocate] was saying if we got the extension that we could do up CVs, hand them into jobs or get a Youthreach going.”

“No I would like longer. Now that I am not working with [my Advocate] anymore I kind of realised how much she was around for me now that I haven’t got her.”

“I felt at the beginning and in the middle of it, that I was going to be okay with it ...but now I don’t feel like I am going to be fine so I don’t think I was prepared.”

“No, not really, I don’t really think about that stuff because I just get sad or upset, I just wait until the end and then she is gone and it comes as a big shock because you haven’t really taken it in.”

“I know it was ending, I knew it had to be done and [my Advocate] talked to me about it.”

5.3 YAP Advocates

The YAP Advocates participating in the YAP evaluation interview series discussed their role as an Advocate, the matching process and the young person they are currently working with, the amount of time they spend with their young person and the activities they do during that time, the disengagement process, the challenges they face in their role, the support they receive from their colleagues and Managers in YAP. The Advocates interviewed reported an awareness of the needs of their young person, as well a consideration of the YAP wraparound model and the strengths based focus of the model. The Advocates reported facing some challenges, including motivating the young people and working within the budget set by YAP.

5.3.1 Role as an Advocate

The Advocates described their expectations of their roles working with YAP, describing their support for and application of the model, including the need to encourage and motivate the young person in education and community engagement, improve social skills and ability to cope, while also remaining conscious of the different needs and different challenges posed by the variety of young people engaged with the YAP service. The Advocates also described providing family support in addition to working with their young person.
“I am the young person's voice and support. My role is for [young person], right now as we sit it is for [the young person] regarding whatever support she needs be it education, social skills.”

“I really believe in the model and I have seen from my first case how it works and it has worked for me.”

“I suppose I think what I learned is that it depends on the individual. Because my first case was emotional difficulties, the second one was behavioural and now this one is kind of building on self esteem.”

“[I have been] getting to know them and them me and just showing that I am reliable to them and if I say I am going to do something I will. And I have been resourcing lots of activities for them and supporting them.”

“Getting her out in the community, getting her involved with young people her own age.”

“It is family support too, sometimes [the guardian] feels like she is talking to the wall; my Manager was here the other day, it was like a wraparound session to see how everything was going.”

“The [guardian] is in a parenting course and doing brilliantly at that.”

5.3.2 Experience of Young Person

The YAP Advocates interviewed were conscious of the complex needs of the young people with whom they were working, as well as discussing and reflecting on how the YAP model and the activities they engaged in met those needs. While describing the young people, the Advocates focused on strengths, aligning to the YAP model and applying the Advocate training to their role.

“[The young person] has got a few issues around authority and a break down in the relationship a bit [with her mother], but [she] is highly intelligent, yet doesn't like school.”

“But she is really, really great wee girl. She has just had a lot of stuff to put up with in her life and it has just come to a head a wee bit.”

“[The young person] is a very dedicated, honest, sweet, kind, gentle girl, she really, really is. Sensitive would be a big word. That sums her up pretty much.”

“She is becoming an adult and I think she is on the right track anyway but needs to bend and I think I am the best person.”
“She loves reading so she has always got her head in a book...she is quite chatty and she loves her sisters, she often talks about them.”

The Advocates mainly reported positive experiences and satisfaction with the matching process, often detailing how their interests and experience suited the young person they were working with and how they felt confident they could meet the needs of the young person and provide encouragement and support. Again, the Advocates reflected on the individual needs of the young people they were working with, and how these needs could be best met.

“Absolutely a really good match which is something that I have to say is brilliant.”

“[The Case Manager] has done a great job on the match... it is working really well.”

“I certainly think that yes we are matched well in terms of being able to communicate with each other. And I think [the young person] clearly needed a woman, a mother figure in her life so yes so far I think the match is good.”

“I think yes it was a perfect match. I know what he is like, I live local myself as well. Yes perfect, definitely.”

“She is at a stage where she needs people to be interested in her life so every little detail I am picking up at the moment, her love for different things.”

“We get along well, we have built a strong relationship.”

Not all Advocates were satisfied with the matching process, with one Advocate reporting confusion over how and why they were matched with their young person.

“I don’t know [why we were matched] to be honest, it is a bit strange. [A male Advocate would have been better] because he doesn’t have any really good male role models in his life.”

“I don’t think [we are a good match], I was quite disappointed with it because I think a [different] Advocate would have been more suitable.”

5.3.3 Activities Undertaken
The Advocates interviewed described the type of activities undertaken with their young person, often providing supplementary detail justifying the choice of
activity and explaining why it was appropriate for their young person and how it met their specific needs. The Advocates focused on pursuing activities that were of interest to the young person, that facilitated community involvement and engagement and that motivated and encouraged the young person, drawing on their strengths. The range of activities includes art classes, horse-riding, bowling, going to the gym, going to a youth club, going for walks and supporting the young person’s education by helping with homework. One Advocate also described rewarding positive behaviour, explaining how the young person’s activity, in this case horse-riding, depended on her attendance at school. Some of the activities involved creating sustainable community relationships and engagement for the young person.

“At the moment with [the young person], she is interested in health, so we will do the gym. She loves music and we will do, like tonight we have an activity planned for a roller disco, ‘80s music’, which is her kind of music."

“[The young person] mentioned at the beginning her love for scenery and things like that so I took her to [the coast], we had a walk around.”

“[We organised] an art class for the younger girl, but a drama class for [the other girl] and it is run with the Youth Resource Centre, Foróige run it, and the younger girl goes to the art class."

“I bring her horse riding and I also help out, since about two or three weeks ago, with doing her homework because her sister would have done it with her and I think there was a lot of arguments going on.”

“Well we go horse riding every second week and that all depends on her going to school. So if she doesn’t go to school she misses out on it, and she actually missed out on her last one.”

“We go bowling, play different games, do arts and crafts, that is the only time you will get her to talk and everything comes out then.”

“She goes to the youth club, she is part of the committee for it, and with the [Manager] of that, she would have a good relationship there.”

“The only person he engaged with was a guy [teaching in a college] he seemed to listen and respect that lad...I could tell he was really interested in what he was saying.”

The Advocates also detailed the amount of time they would spend on activities with their young person, ranging from meeting two to three times a week to more frequent meetings. Hours spent with the young person varied, with one...
Advocate reporting spending five hours a week with their young person, depending on the circumstances and another reporting spending 10 to 15 hours. All Advocates reported that the time spent with the young person would vary from week to week. The YAP model provides that the Advocate may spend up to 15 hours a week with their young person, dependent on the needs of the young person.

Those interviewed also explained how they came to decisions about the types of activities they would pursue with their young person, again emphasising a particular interest that the young person had expressed or a suggestion that was favoured. Generally, as reported by the young people participating in the programme, the process was viewed as mutual, with Advocates and young people reaching their decisions together.

“*I would generally say, ‘what do you want to do this week?’ And they are able to say what it is they want to do.”*

“*It is up to them. You can make suggestions but we would never decide, it is them that will say what they want.”*

“*It is never a case of landing today and saying that tonight we are going to do this. It is always, for me anyway, I have it looked at the week before and I’ll say, ‘What do you think?”*

“*You really have to put in the work before every week and have a look and you get another wee snippet of information and try and look and think, what is going on in town, what may work for her? And tailor it to her.”*

“*To begin with we were talking about all the activities that she likes to do and we had so many ideas to begin with. So all of those came from her at the start.”*

5.3.4 Challenges
The Advocates interviewed also described the challenges they have faced to date on the YAP programme. The Advocates, unlike the young people, were in the position to draw on more extensive experience of the YAP programme, with many having previous work experience on other YAP cases. The challenges described included the budget constraints, also acknowledged by the young people, as well as coping with the complex needs and behaviours of the young
people referred to the YAP programme and occasionally, those around them. There is some acknowledgement by the Advocates of the logic behind the budget limit, with the Advocates recognising the obligation on the family to sustain new activities after the programme has ended.

Most common responses related to pay conditions and budget constraints, with Advocates reporting spending their own pay on activities. The research team was informed by YAP Ireland that Advocates can seek agreement from their Case Manager for an increased budget if the activity is specifically needs led and goals focused, but this was not conveyed in the comments from Advocates.

“I think it's trying to fit in the hours with the money that we get.”

“Like even the cinema, it is going to cost me maybe €8, I mightn’t have an interest in it at all and I have to pay for myself.”

“I could be out for an hour and my hour’s pay could be spent.”

“Expense [is a problem], petrol particularly in [this region], we are restricted and we have been told to just pull up and sit in the car, it feels a bit like, as a youth worker, having your hands tied behind your back.”

“It’s really hard to do activities with no money.”

There was also some acknowledgement of why the budget is in place for the young person, although relevant responses relate only to the young person.

“Like I mentioned earlier, I can’t take [the young person] to things that are costing €40, €50 and €60 and then expect that to be picked up [by the family], after the programme.”

“There might be some weeks where you take them for something to eat and you could easily spend €10 or close to the €15 mark. And if we meet them three times a week, so the other days we might just have to go for a drive because you don’t have the money left. But I understand why the budget is in place too.”

It is clear that there is a perception among some Advocates interviewed that it is difficult to work within the current budget.

A small number of Advocates described difficulties in dealing with case-specific challenges, often in the context of failure to engage on the part of the young
person, challenging behaviour or mental health. Advocates expressed fear and concern in dealing with complex cases, where their young person has discussed or threatened violence.

“The biggest challenge has been getting [the young person] into school, I’ve tried everything.”

“Just dealing with when the day goes wrong, dealing with how much effort you have put into your job and then you are dissatisfied going home. That is disheartening sometimes.”

“He keeps on going around saying he is going to be battered and he is going to be this and he is going to be that and someone is after him. Ok that is a challenge; that would be the fear. If I am out in the car with him and someone is genuinely after him, I mean what do I do?”

In some instances, it was reported that further training, or perhaps an Advocate with more experience of a particular issue would have been of benefit in dealing with a challenging or crisis situation.

“I knew she wasn’t going to throw it at my face but it was almost like a threat...it went on for ages and I was called everything...I think somebody older might have had more experience.”

“I have heard lots of examples where stuff has happened with other people and it is like you would really need professional training to deal with it because most of the people including myself, are just ordinary people.”

“[The guardian] has bi-polar disorder so for me I suppose it’s a big challenge around understanding that because I was never in contact with anyone with that before.”

One Advocate expressed dissatisfaction with the application of the strengths based ethos at all times, indicating concern that this may be an opportunity for a young person to take advantage of the programme.

“I feel it is letting kids get away with doing what they want and still saying ‘well done’ at the end of the day, it’s like they can behave whatever way they want and are still praised.”

One Advocate also expressed an interest in feedback opportunities for the young people, commenting that there is little opportunity for a young person to express their views on their Advocate, or change Advocate.
“You really don’t know the young person’s point of view….a little interview maybe from the Manager a month into the programme to see if they’re happy, there is no mediator to take their views.”

5.3.5 Support

The Advocates interviewed as part of the interview series largely reported positive experiences of the support provided by YAP while working with their young person, describing the supervision and contact they would have with their Manager, as well as the team meetings they are expected to attend and communication channels in place to deal with any incidents that may arise at any stage, including contact with other Advocates.

“I have a Manager that is so supportive. I have supervision every two weeks basically to come and sit down and talk about whichever case I am on. I can pick up a phone, like the family can pick up a phone any time day or night and will get someone from YAP.”

“There [are] team meetings once a month, I have been to one and I have another one this week, so you would see other Advocates as well so that is good support”

“I feel I have a very good, very strong working relationship with my [Case] Manager.”

“We are very supported, [the Case Manager] is brilliant, you will always get [the Case Manager] at the end of the line and if you can’t get [the case Manager] there is the on-call. And it is very rare you wouldn’t get on-call, you’d get your other Advocates.”

Occasionally, a small number of responses relating to Case Managers were negative, with one Advocate concerned that her Manager was ‘condescending’ and ‘too by the book’.

“The [Case] Manager is pushing me on the hours, cutting them down. I couldn’t get supervision done in an hour and she is saying we have to.”

“[My Manager] is too by the book, I had another Manager for another case and [that Manager] was brilliant, [the previous Manager] talks to you like an equal but [my Manager now] doesn’t.”

One Advocate expressed an interest in an Advocate representative, a point of contact for issues that may arise on specific cases.
“I have always said there should be an Advocate rep or something somewhere. Now I have said it a couple of times to YAP. An Advocate could ring me about [an issue].”

“I don’t know if other Advocates are doing much more activity based stuff...I really don’t know because we don’t meet up very often.”

Advocates also described the challenge of working within a definite contract and the certainty of that coming to end, citing an interest in improved support around career progression for Advocates coming to the end of their contracts with YAP.

“I sometimes feel that Advocates feel unsupported in progressing because YAP is a short term thing, of course the focus has to be on the young person and needs based. But at the same time I think that Advocates can feel a bit kind of abandoned at the end of a contract.”

“How does YAP support you to progress on in your career? And I think there is something a bit lacking there. But I don’t know how you reconcile the model.”

It is acknowledged that this data is longitudinal and that changes within the YAP organisation may mean that some responses have been superseded by new initiatives, including enhanced supervision, training, team meetings and financial support for training external to YAP.

5.3.6 Disengagement Process
Advocates also commented on the disengagement process with the young people, recording the importance of openness and clarity when working with the young people and drawing on their training, to avoid attachment or dependence. The Advocates also expressed differing views on whether the six month time-frame allocated by YAP is sufficient, possibly reflecting the different needs of the young people with whom they are working. It is acknowledged that where the young person is deemed in need, YAP

“For the last six weeks, so I would look at maybe eight weeks, I mention and now I can’t believe the time is up, we are getting close to the end and reinforcing what I have done.”
“They have to remember that is them that made the change, not you. So yes in that one the six months was fine.”

“I think there is no doubt that if the relationship has worked well, any exit process is going to be difficult for both. For them to acknowledge that is incredibly powerful as well, it is part of life, endings and beginnings.”

“It is quite clear from the start that it is six months, you are always reinforcing that, especially coming in to the last two months.”

Some Advocates reported finding the six months too brief, with extensions providing extra time with the young person. One Advocate also expressed an interest in a phased wind down of the service, with some limited opportunities for contact between the Advocate and young person after the programme has ended.

“It was quite an emotional ending. It was obviously planned and it was emotional. I suppose what I found subsequent to that is that six months isn’t always enough.”

“It was really good for this case that the extension did come through, it was perfect and it gave those months with [the young person].”

“I was three days and then I cut it to two days and now I am one day, and she has just realised now that I am going to be going, but there is no other way...I think they should be able to make contact maybe four weeks after and then two months after that because they get it into their heads that they are never going to see you again.”
5.4 Parents/ Guardians

The parents/guardians of young people participating in the YAP evaluation interview series were interviewed at the beginning, mid-point and end-point of the YAP programme. They were asked to talk about their young person, including experiences prior to and on the YAP programme, the young person’s Advocate and the time their young person spends with the Advocate, the benefits of the programme, and any changes they might make. As the parents/guardians interviewed have, for the most part, recently become involved with YAP, it is acknowledged that these findings may change as their young person’s participation in the programme progresses. A small number of those interviewed had previous experience of the YAP programme, through engagement of another young person in their care or through previous engagement of their young person.

5.4.1 Before YAP

Parents/guardians on the YAP programme described their young people, explaining why they thought the YAP programme might provide support and what support was needed. The types of complex needs described ranged from poor social skills, social isolation and lack of confidence, to negative behaviours and mood problems. While the parents/guardians outlined the issues faced by their young people, they also emphasised their positive qualities and strengths and were aware and conscious of the sources of some of the problems faced by the young people in their care.

“[The young person] is normally outgoing, bubbly, great fun to be around...but has kind of lost interest in a lot of things, especially school, started to go missing and has a drink problem.”

“She was bullied a few years ago and has found it very hard to befriend people since or trust. She kind of encloses herself inside.”

“There are two personalities in her, she has a split personality. She can be lovely one minute and then in two minutes she can just turn completely. And then she could come back then and she would apologise. She is a loveable little child.”

“[The young person] is not very good at mixing. Doesn’t go out and when she does go out she will argue with them, she will argue with children. If there is another child here for the weekend she will argue.”
5.4.2 Experience of Advocate

The parents/guardians interviewed were predominantly positive about the matching process and the Advocates assigned to their young people, reporting that the Advocates were supporting their young people, which was having a positive effect on the young person’s home life; and providing support to the guardian in motivating or encouraging the young person, in line with the YAP wraparound model. One guardian reported that while her young person was initially wary of the assigned Advocate, the relationship had improved.

“She has built up a great bond with her, and [the Advocate] has been brilliant to me as well.”

“She’s a great support, she’s at the end of the phone whenever you want her, whenever you need her.”

“[The Advocate] is a lovely girl; she is very kind, very gentle. She listens to everything you say, she takes it all in and she tries to help you in every way that she can.”

“She kind of communicates with [the young person] at [her] level. Like [the young person] got upset here the other day because of [a personal issue]... and I could see [the Advocate] had no problem dealing with it and talking at [young person’s] level.”

“[The Advocate] is great with [the young person], she was a great support to me when [the young person] would not do what I told her to do.”

“[The Advocate] is a good match for [the young person], she can match her, if you searched high and low you wouldn’t get a better match.”

One guardian reported dissatisfaction with the matching process, arguing that the Advocate was not suitable for the young person, and was not matched based on the YAP model.

“[The young person] can walk all over [the Advocate], don’t get me wrong, [the Advocate] is great, just not the right person. [The Advocate] was the only one available so that is why we ended up with [the Advocate].”
5.4.3 Activities

The parents/guardians described the kinds of activities that the Advocates would do with their young people, concurring with those described by the Advocates and by the young people themselves. The activities, supporting social interests, included going to the cinema, going for drives and swimming.

“They get to do a lot of fun things together, they went to the pictures.”

“So with [the Advocate] bringing [the young person] off, it was giving the [young person] some quality time for herself, to hopefully get her social interests back.”

“[The Advocate] is also arranging swimming classes in the new year, so they will be doing that as well, which I think is great because they need something physical. She is probably over stimulated when it comes to the likes of reading.”

“She wanted to play basketball but she didn’t like basketball, so now she wants to go to do martial arts and they are looking for it.”

“Yes because [the Advocate] is a lovely bubbly girl herself and she loves pets, actually her and [the young person] go to walk dogs and [the Advocate] takes her to horse riding and [the young person] loves it.”

“Generally ... a drive and something to eat and then she will drop him.”

Parents and guardians discussed the prospect of their young person continuing to engage in the activities undertaken on the YAP programme. Responses varied, with some indicating that their young person would maintain levels of engagement, with others reporting that their young person would be less likely to maintain activity levels after the disengagement process, especially where activities were dependent on the company of the Advocate, or would likely present a financial burden.

“I will still be able to bring them places and get them to their youth club, it will just be a little stressful financially.”

“At the moment no, because she is losing interest in things again, no, I don’t think so.”

“No, because [the young person] has nobody to go to them with, [the young person] has no friends...part of the process was to build up [the young person’s] confidence so that [the young person] would want to go out and mix with people but that didn’t work.”
“Well the swimming maybe but as for the [other activity], she loves it but she said she won’t go back if [the Advocate] is not with her, I think it is going to be a major problem.”

5.4.4 Benefits
The parents/guardians of the young people were also asked about the benefits of the YAP programme. The main benefits included discernible changes in the young people’s behaviour since starting the programme, as well as the provision of support, improved communication, social skills and confidence, and increased community engagement.

“[The young person] had been attending an addiction service, and was experiencing low moods after counselling sessions where she had been encouraged to revisit her past. The Advocate had provided support by involving the young person in fun activities.”

“Before [the Advocate] came along [the young person] was a nightmare on two legs but thank God she has passed most of that. And once again it is down to [the Advocate].”

“Before it was hard for her to get ready to go, she would make a lot of excuses. But now I can see that whenever she knows that [the Advocate] will come she gets ready and does her things. It is like she is happy to go with [the Advocate]. It is an achievement.”

“She has started to talk now, she tells me about things happening at school that she doesn’t like, it is different from before.”

“She is not as aggressive as she used to be in the past, that is another good thing.”

“She has more self-esteem with people, she has more confidence.”

Parents/guardians were also positive about the provision of support to the entire family, the role the Advocate plays in this process.

“I liked the care and concern they give you. They never rush you, they take their time, they will sit, listen to your problem, they will help you.”

“I had a bit of a breakdown...and things got bad between us...and the Advocate stepped in and it has given [the young person] time away.”

“I just want to thank YAP and all that they have done for me, all the support not just for [the young person] but for me too.”
Again, there are some inconsistencies in the data; while one young person self-reports improved behaviour and respect for the guardian, the guardian conversely reports deterioration in the young person's behaviour.

“No, I don’t see [the Advocate] coming on board and changing [the young person], I don’t see that. I do see, over the last few months, I have seen a change in [the young person] and it is not a good change because he has done things over the last few months that he has never done before.”

5.4.5 Challenges

Parents/guardians provided some commentary on the challenges they had faced engaging with YAP, including budget constraints, Advocate reliability and community engagement.

The issue of the budget restriction again arose. While YAP makes a case for providing a small budget with a view to supporting sustainable activities, there may be an opportunity to improve awareness of this logic.

“The only thing I would prefer if YAP could give more money for a week to take the youngster out, €15 isn’t very much. It is only €15 to take them out, that is nothing. If the girl has to come two or three times a week that is nothing.”

One guardian also expressed concern that the focus of activities was around coffee shops, rather than increased sustainable engagement with the local community. While it is important that the Advocate and young person spend time together and communicate one-to-one, it is equally important that the young people become involved with sustainable group activities.

“I would probably like that the focus wasn’t around coffee shops, I personally rather it be more structured in the activities.”

A small number of guardians expressed dissatisfaction with the reliability of their matched Advocate, and the amount of time spent with their young person, particularly in relation to making links with the local community. It is acknowledged that the following quotes represent the responses of a small number of parents/guardians.

“I wasn’t happy with the overall effect of YAP, [the young person] never received in my eyes the consistent 15 hours allocation.”
“There wasn’t a lot of links made. We have a local community centre just opened up and I mentioned it but me and [the young person] just ended up going ourselves (sic).”

“[The Advocate] was told on a continuous basis, ‘you are not allowed do this’, ‘you are not allowed do that’, and I just felt [the Advocate] was put under pressure because [the Advocate] didn’t know what [Advocate] could or couldn’t do.”

One guardian, again expressing a minority experience, expressed dissatisfaction with the Case Manager working with their young person and Advocate, reporting that the Case Manager’s approach was ‘by the book’, and their manner upsetting.

“If you meet with [the Case Manager], we were having a nice discussion trying to sort out these issues, and she kept referring to me as ‘the mammy’ and to [the young person] as ‘the youth’, and it was like ‘can you not get a little bit personal?’”

“[The Case Manager] was like ‘he is allowed to have his say, he is a very intelligent child, you should realise this’ and I [got upset].”

“[The Case Manager] said that the programme was really meant for more severe cases so I felt like because [the young person] wasn’t out robbing cars or doing drugs, he wasn’t entitled to the programme...[that upset me].”

### 5.4.6 Disengagement

Parents reported concern over the disengagement process, referencing the benefits of having the support of the Advocate, for both themselves and their young person. Some parents/guardians expressed fear that their young person would return to exhibiting previous challenging behaviours, while others expressed concerns about managing once services were withdrawn. Views expressed by Advocates and Case Managers in relation to the disengagement process differ from those expressed by parents. The data indicates a perceived concern among parents/guardians about ‘life after YAP’ and how they will manage without the programme but also reflects their positive experience of participation.

A small number of responses indicated awareness around the disengagement process and feeling prepared.
“I’ll be very sad when it comes to an end because I know she can’t have any more contact with us and I am going to be lost without her, when [the Advocate is gone], I don’t have anyone then...I can’t see myself managing too well to be totally honest.”

“I am terrified, I actually only had this conversation with the counsellor the other day...what happens then and where do we go, [the Advocate] is not on the end of the phone. When all the services are withdrawn, how do we manage and how do we cope?” (Context: this comment appeared also to relate to a broader set of circumstances)

“I am dreading it...”

“I won’t be too happy but what can I do?”

“I’ll be totally lost when the Advocate finishes this week.”

“I think she thinks that it is time for her to take a break as well, because the service is no longer there, she thinks that she is not going to have to do anything anymore so that way she is not being prepared.”

“I kind of knew it was winding down, [the Advocate] was great at keeping me informed.”

5.5 Conclusion

A small number of young people, along with their Advocates and guardians, were invited to take part in a series of interviews at the beginning, middle and end stages of programme, providing detailed information about their progress and the time they spend with their Advocate. Nine young people, along with their Advocates and guardians took part in the interview series, including seven females and two males. One male participant withdrew from the YAP programme after the initial interview, with two females withdrawing after the second round of interviews.

The experiences and accounts recorded to date were generally very positive, with young people, parents and Advocates reporting beneficial experiences. Young people interviewed reported positive experiences of the programme, including new experiences and activities, improved social outlets and relationships and an acknowledgement of the change this has brought to their day to day lives. Young people also reported improvements in their mental
health, leading to decreased stress, as well as increased confidence and resilience, and increased ability to cope with challenges.

The Advocates interviewed reported an awareness of the needs of their young person, as well as understanding of the YAP wraparound model and the strengths based focus. The Advocates reported facing some challenges, including motivating the young people and working within the budget set by YAP and dealing with budget constraints.

The parents/guardians of young people participating in the YAP evaluation interview series also spoke positively about their experiences with YAP, discussing the benefits of having the additional support of the YAP worker and the positive outcomes for their young people. A smaller number of parents/guardians expressed dissatisfaction with some aspects of the programme, including the budget limits and specific relationships with Case Managers or Advocates. Parents’/guardians’ perceptions, along with those of the young people interviewed, also indicate potential for learning in promoting sustainable community engagement and relationships for young people. Further, the differing perceptions regarding preparedness for the disengagement process provide an opportunity for learning.
Chapter 6: Focus Groups

6.1 Introduction

As part of the YAP study, focus groups were carried out across the YAP programme regions, with Case and Service Managers. Two rounds of semi-structured focus groups were conducted. The first series of focus groups took place in late 2011 in Galway, Limerick, Dublin, Navan and Cork. A total of 36 Advocates and Case Managers (then referred to as Deputy Managers) participated. A second round of focus groups took place in late 2013, in Dublin, Limerick and Navan. A total of 18 Case and Service Managers participated. Topics for discussion included questions about the current circumstances of the young people, the success of the interventions and the challenges and opportunities faced in the programme. The perspectives and insights contribute to the evaluation of the effectiveness of the YAP model.

6.2 Young People and YAP

The Case Managers and Advocates described their understanding of the YAP model and the types of young people served by the programme.

6.2.1 Community & Engagement

Case Managers indicated that young people on the YAP programme come from primarily marginalized areas and often lack a sense of contribution to society and community. This can also manifest in a sense of being mistreated or let down, with reports that the young people often feel isolated and abandoned by those in authority. The Case Managers acknowledge that this is something that YAP seeks to address:

“To some degree what is facing them is that they have lost their connection with communities.”

“Through YAP they can have an opportunity to develop their own currency and decide what way they want to be in society.”

It was also noted that adequate conditions to support the process of contributing to community are not always in place. Advocates remarked that there was very little for young people to do in some towns. This is turn is linked to negative
behaviours among the young people. A lack of social engagement results in a lack of social skills.

“They’re hanging around. Everything costs money and they don’t have it.”

“They’re getting into trouble.”

“That is why [YAP is] there - a support structure they can use to help themselves.”

This is also connected to young people’s engagement with education. Case Managers and Advocates reported instances of school ‘negativity’ towards young people, with these negative perceptions based on their address, family name or family reputation. This was particularly relevant to young people from the Travelling community. The Case Managers expressed compassion for the situation, noting that there is a need for supplementary support within schools in marginalized areas, often dealing with large numbers of young people with issues.

“There are all sorts of particular schools that carry judgements, prejudices and stereotypes associated with them.”

“They expect their behaviour will be difficult.”

“Teachers just give up on them; they think ‘what’s the point?”

“The whole class needs special supports, the whole school. That’s very hard for a school.”

6.2.2 Coping Skills, Resilience & Mental Health

The disengagement with community associated with some of the young people is explained as being connected to a lack of resilience. Conflict resolution emerged as an issue, with participants indicating that young people were ill-equipped to cope in certain situations. This underlying issue was addressed as very important across focus groups. It was also identified that parents also struggle to cope with their young person’s behaviour.

“What we’re finding is that the reason they don’t want to be part of communities anymore is they find it very hard to cope...for example if conflict arose, how to resolve those issues, how to deal with conflict in school, at home.”
“Where this has come up on a regular basis say to do with bereavement, or a relationship breakdown...there is that case of how you cope with devastation and loss and how would you respond to it?”

“Sometimes the Gardaí are called to put manners on the child because the parents don’t know what to do.”

There was an acknowledgement of the variety of mental health issues presented by young people on the programme. Focus group participants expressed concern for the young people’s mental health and wellbeing. Family and home circumstances were also reported as potentially contributing to problems, with accounts that some young people may be responding to behaviours witnessed in their home environment. The wraparound approach of the YAP model was identified as valuable in this context.

“There are certain events happening, mental health issues have always come up”.

“In the cases I work with there’s a lot of dysfunction and the kids are taking on the parents issues.”

“It is actually a lack of structure in the family home that is providing that out of control-ness in the young person.”

These issues are also connected to the young person’s place in their local community and their social and civic engagement.

“They have social disorders, personality disorders...nothing to do, nowhere to go to meet people.”

### 6.2.3 Drug/Alcohol Issues

The issue of drug and alcohol use arose repeatedly through focus group discussions, with some Case Managers indicating it was particularly common with the young people they were working with. Again, this issue was connected to overall community contribution and engagement. The Case Managers explained the responsibility of their role and the role of the Advocates in this context.
“The alcohol and drugs are just a rite of passage now. It’s not if, it’s when.”

“It’s amazing how their interests seem to have no direction or motivation now.”

“We notice younger children exposed to violence and substance abuse. Social workers are not supporting this group. They don’t have time.”

6.2.4 Programme Duration & Disengagement
An issue addressed by Managers and Advocates was the length of the programme. While there was some acknowledgement that the six month period of intervention is short, the consensus among focus group participants was that this was a sufficient period to achieve results and improve the life of the young person. Participants conveyed the need to empower not just the young person, but also the parents or guardians, while also facilitating community engagement. Participants explained that creating positive conditions, through connections with support services and community, empowers the young person and their parents/guardians and prepares them for the transition.

“There is huge emphasis on finishing, as there would be about starting.”

“You need to make sure the young person knows he can make a connection when he needs to.”

“[We] get in there, do a huge amount of work and reconnect the young person and family back into existing services and then make [ourselves] redundant.”

The Case Managers also described the process of granting extensions, indicating that extensions were frequently sought by external services, often when the programme appeared to be working well for the young person. Despite this, Case Managers reiterated that for a typical case, the six month programme was sufficient to meet the necessary targets for that young person.

“Sometimes the anxiety on the programme coming to an end is [from other services] because they are confident that the programme does such good work.”

“The six months is certainly enough, if you are building targets.”
6.2.5 The YAP Model
Focus group participants commended the YAP model and programme for addressing these issues, and empowering the Advocates to support the young people in developing coping skills and contributing to community and society.

“I see engagement which is the first objective…I see their faces change, and they talk, they talk more about the future than the past.”

“The work on the ground hasn’t changed.”

“We have a running joke here that we are evangelists for YAP because we really believe in the model.”

“So there are challenging times with the model but overall I have to say a big [positive] for the model. We believe in it.”

“It is very flexible so you really can adapt it to the needs of the young person.”

6.3 YAP as an Organisation
Responses in the focus group also related to aspects of work within the YAP organisation, including the role of the Case Manager, their relationships with external services, along with organisational support, supervision and training.

6.3.1 Role of the Case Manager
Case and Service Managers discussed their roles and responsibilities within the organisation. Responses point to a varied role, where responsibilities can range from direct contact with families; providing support and supervision to Advocates and related administration; recruitment and training; fundraising, networking, and communications; and liaising with external services. The Case Managers also referenced the level of responsibility associated with these roles.

“We’re first point of contact for the family.”

“You really are the case lead; you have the decision-making power on what happens.”

“From recruiting to training, we are heavily involved from short listing, through to the training through to checking references and child protection clearance.”

“We also have to take care of our Advocate’s wages.”
“Sometimes we put together groups, such as the Annual Family Participation Group.”

“It’s a very broad role, we are also involved in fundraising activities...communications, fundraising and the media are becoming increasingly important.”

“The Service Managers provide that extra level of support day to day on the ground, like a team leader.”

The process of matching was also described by Case Managers, with reports that the process typically works very well, with the variety of Advocates providing a pool from which appropriate matches can be drawn. Largely, discussion about matching was positive. Occasionally, time pressures or logistical limits resulted in a less than ideal scenario. This may reflect differences between different types of area.

“The variety on the panel gives us the opportunity to have really good matches with the young people.”

“Dublin is easier, there is a bigger pool.”

“We have to make certain matches; we have to make 2-3 matches a month. Sometimes, it is who is available as much as getting exactly the right person.”

Practical, life and work experience were all described as valuable to the role of Case Manager, with focus group participants explaining how their experiences benefitted their roles.

“Being an Advocate has been really useful, I knew what worked for me; it was nice to have that insight.”

“Coming from a social science background, working with families, working with vulnerable young people, you know about society.”

“Practical experience, I have been a childcare worker, a social care worker...this is how I managed it.”

“I was working in the flats and I came from the flats so I knew the way the flats work, I’ve heard what looks good on paper but is not practical.”

Case Managers occasionally expressed concern at their workload and the associated expectations, describing how they balanced their tasks, while
continuing to remain as involved as possible with their cases. Some Case Managers also described finding on-call time daunting, in terms of the level of commitment and responsibility.

“Sometimes it feels like a balancing act.”

“There are days where it is overwhelming in the sense of what you do, dealing with multiple pressures.”

“The more involved we are with the case, the better the outcome. And that can’t happen if we are doing administration and stuff like that, making phone calls for references.”

“I know at one point this year, I had 18 or 19 cases, there is time pressure, I have to be at a meeting, it’s difficult when your workload is that high.”

“It is quite daunting being the only person on call in the country.”

Case Managers expressed an interest in improved communications within the organisation to support their roles, expressing an interest in being more involved in decision-making processes.

“We get emails saying ‘such a policy has been amended’, chances are I’m not going to read a sixteen page document to figure out where this is.”

“Whereas in other organisations we might get a chance to discuss something and then get an email confirming a decision, here we get an email confirming a decision before we get a chance to discuss it.”

“For me, it has gone from being involved in the process to just being told what is happening.”

“Effective communication is really important.”

“Some things are managed very well, there was a pay cut and that was managed very well.”

6.3.2 External & Established Services

Alongside the YAP workers, young people on the YAP programme often meet with education welfare officers, juvenile liaison officers, social workers, family support workers or other support services. According to those interviewed, the contribution and commitment of these workers and services tends to vary. Some services were subject to careful criticism, with discussion on the sometimes difficult relationships with social workers. Often, a lack of trust
between the social worker and the young person/young person's family was described. A variety of reasons were given, including the turnover of social workers, their legal obligations and connection to the state, and a perceived bias in their role towards focusing on difficulties. Lack of sufficient time and workload was attributed to the difficulties social workers faced in improving these relationships.

“The [education welfare officer] is extremely supportive. She does everything she can. The long term impact will be huge.”

“We are the smallest voice; other services are there, education welfare, juvenile liaison officers.”

“The change of social workers is quite a lot. Social workers are relocated without any continuity.”

“The social worker has a defined role that is statutorily obligated. They are linked to the idea that they have powers.”

“We look at the strengths. The social workers have a huge caseload and would love to do what we do but because they are so short of time, they only monitor what is dangerous.”

Case Managers indicated that established services played an important role in supporting the services provided by YAP Ireland, but also that it is important for YAP as a service to set itself apart from other external services.

“It is very much about aligning yourself with established agencies but also identifying why you are different.”

“We understand that we need the other services to fulfil our role better.”

6.3.3 Training, Supervision & Professional Development
Case Managers discussed the provision of training for new and continuing Advocates on the YAP programmes, describing how they had recently overhauled the training to provide an Irish context, as well as the advantages of providing training to a diverse range of trainee Advocates, selected at the recruitment stages. When describing the training provided, responses were consistently positive. The opportunity for accreditation of the current training was also highlighted.

“It is a comprehensive piece of training and is very user friendly.”
“There is more to the training than standing up and passing on information. We’re heavily involved in the training.”

“We recently updated and edited the training ourselves and we drafted it and we are delivering that...we wanted it to be reflective of an Irish context.”

“It’s great because there are so many different opinions and it adds diversity to the team, participation can be diverse.”

“It could be evaluated and put somewhere on the FETAC spectrum.”

Training for Managers was also discussed, with a small number of respondents identifying the need for improved induction or training for Case Managers, with an emphasis on opportunities to share experiences and learn from one another.

“Opportunity for training within the CRM, a false case, something like that for a new Case Manager would be fantastic.”

“I got no induction at all, I found out something recently that I thought was the way to do something and I’ve been managing with a knowledge that was wrong, there was no induction.”

“We can learn from each other.”

In contrast to this, a number of Case Managers expressed satisfaction with the level of support provided by YAP, emphasising the importance of peer relationships in the informal provision of peer support.

“We would have supervision with our Service Managers, usually fairly regularly.”

“It is once a month, that is what the policy is, it is once a month for case Managers and Service Manager’s supervision.”

“We have training days every year and we try and identify issues that might come up or trends that we might be seeing in our community.”

“Peer supervision was tried once, it was never really clear what it was about...we can kind of do it informally, we do that for ourselves.”

“Everybody needs something different from supervision so I don’t feel I need some aspects as much.”

Case Managers expressed an interest in career development opportunities within YAP, potentially through up-skilling, and taking on lead roles in research projects related to aspects of the programme.
“We talk a lot about Advocate [professional development] but in relation to Case Managers, there is limited space here.”

“I would like to see opportunities for full time staff to go back and up-skill...we could be up-skilled in the disability area.”

“[We could] take on lead roles, do a piece of work around family therapy...do a piece of research.”

“[We could] do a piece of research.”

A participant also identified opportunities to expand and diversify programme offerings, with reference made in particular to the disability sector, indicating that this may require additional training.

“The organisation is moving more towards seeing the disability sector as an area with a lot of opportunities, working with the disability sector.”

“Does that mean in our Core Module training we need to do a specific piece on disability?”

6.3.4 Advocate Conditions

A number of Advocates across the regions who participated in the first round of focus groups in 2011 articulated some dissatisfaction with the contract conditions of their role. Describing how they are limited to a six month fixed purpose contract and if an appropriate match is found, have further cases for up to two years, some Advocates expressed concern that valuable experience was being lost. Some conveyed an interest in remaining with YAP and exploring opportunities for career development. This concern also extended to the irregularity of hours worked. Advocates are paid for time spent with the young person and Advocates described how this would vary from young person to young person, with some having as little as two contact hours per week.

“If you gave me another [case] I would snatch your hand off but I can’t. So they are losing all this experience.”

“I don’t work at my best when I don’t know where the next euro is coming from.”

“Also, I think even though it is quite layered, I don’t feel that people are inaccessible.”

“There is a sense that we are all working from the same model.”
Case Managers also provided feedback on the working conditions of Advocates, reporting that Advocates are made aware of the nature of the work during the recruitment and training stages and are advised that it should not be a sole source of income. Case Managers also identified that Advocates may take a break if they have worked with individual young people over a 2 year period and return to the programme, with some instances of this occurring. It was also identified that the nature of the work may impact on social welfare payments, where this was relevant for an Advocate.

“We are very clear about [pay] at recruitment stage. It is not the type of role that you look for if you have a mortgage...people work for us as a stepping stone.”

“They are advised that it shouldn’t be their sole source of income.”

“We have Advocates who work for two years, take a break and come back to us again.”

“But it can affect their social welfare, if they only work two hours a day, their day is gone.”

Opportunities for career development were also identified for Advocates, with an overhaul of the supervision process credited as encouraging Case Managers to support the professional development of Advocates on their teams. Further, a bursary system supporting Advocates with a percentage of their college fees was described.

“[The new supervision process] prompts you to ask an Advocate where they are going in their career, to try to support them to go on to other things.”

“We have a bursary system that helps Advocates get a percentage of their college fees.”

*We have had positive outcomes from that, we supported two Advocates around getting bursaries.*

**Conclusion**

The focus group data provides insight into the perspectives of Advocates, Case Service Managers in the different programme regions and those of the Advocates working with the young people. This analysis reveals the breadth of issues facing young people on the programme in their day to day lives, including lack of
engagement in community and school, feelings of isolation, mental health issues, exposure to alcohol and drug abuse and lack of adequate coping skills. The focus group data also shows how the Managers and Advocates were dealing with these issues, and the additional supports and services they might need to improve their work and manage the day-to-day workload.

In general, participants expressed satisfaction with the YAP model in supporting and empowering young people and their families. While there was some acknowledgement that the six month period of intervention is short, the consensus was that it was a sufficient period to achieve results. Focus group participants also described the matching process as typically working well.

The implications of these findings will be returned to in the context of the full body of research data in *Chapter 9: Conclusion & Recommendations*
Chapter 7: Training Observation

7.1 Introduction

The evaluation of Youth Advocate Programmes Ireland included research observation of YAP training sessions. YAP Ireland provides ongoing training for all staff and matched Advocates. Sessions for Case Managers include wraparound and advanced wraparound training, focusing on application of the YAP model, along with specialist training sessions ensuring that the programme meets the needs of specific groups of young people. Potential Advocate training includes a series of Core Modules, concentrating on the role of YAP and the YAP model, boundaries of the YAP model, report writing and crisis intervention; child protection training; and specialised training sessions on particular topics such as mental health. Recent specialist training provided by YAP Inc. included a 2 day course focusing on young people with a diagnosis on the autism spectrum. Advocate training is facilitated and delivered by Managers. For the purposes of this study, four Core Module sessions have been observed, along with child protection training, mental health training, and advanced wraparound training.

7.2 Advocate Training & Core Module Training

Core Module 1:

Core Module 1 training focuses on introducing YAP Ireland, including the organisation structure, the YAP programme, intensive support model, wraparound model, and the Individualised Service Plan (ISP). The session also includes a discussion on the concept of advocacy and the expectations of an Advocate in their role.

Core Module 2:

Potential Advocates are introduced to various aspects of their role, including the importance of building a rapport with the family and identifying community connections. YAP’s Code of Conduct is discussed, highlighting the need to act appropriately, set boundaries and maintain professional detachment.
Core Module 3:
During this session on report writing, procedures for completing and submitting reports are explained. Participants are shown examples of the online paperwork they are expected to complete, including weekly summary sheets and incident reports. The use of language in report writing is discussed, as well as the obligation to remain clear and objective and the difference between opinion and fact.

Core Module 4:
The session on behaviour support management supports Advocates to recognise potentially difficult situations before they occur. The Advocates are also provided with knowledge and skills to ensure that they are prepared, and capable of accessing support, should they be confronted with a difficult situation.

Specific Training: Child Protection Training:
In collaboration with the National Youth Council of Ireland (NYCI), YAP Ireland introduced a modified Child Protection Awareness Training programme in late 2012. The programme is closely aligned to NYCI Child Protection training in line with Children First. The session covers definitions and examples of child abuse, discussion of factors in relation to child abuse and other forms of inappropriate behaviour and best practice in child protection.

Specific Training: Mental Health Training
Mental health training for matched Advocates involved an exploration of a variety of mental health issues, attitudes to mental health and identifying and working with mental health issues in young people. The group discussed antecedents and triggers to mental health problems, as well as physical and emotional signs to be aware of. During this session, the group is also introduced to theory around engagement, including the need to focus on confidence, enjoyment and the importance of the activity.
7.2.1 Participants
The majority of participants at training sessions we observed were potential Advocates who have to complete four days Core Module training and one and a half days Child Protection Awareness Training prior to being considered for a match. A small number of participants were matched Advocates retaking individual modules. Across all sessions the groups comprised of a diverse range of participants. Group demographics and backgrounds vary, with many participants having some experience of youth or community work. Examples include social workers and social care workers, youth workers, teachers, a juvenile liaison officer, a barrister and occasionally, third level students.

7.2.2 Facilitation
The Advocate training sessions are facilitated by Case Managers and Service Managers. Facilitation aids include PowerPoint presentations, handouts, flip charts for group breakout sessions. The training approach is semi-formal, including presentations, group work, activities and discussions. The trainers frequently draw on professional experience and working knowledge of the YAP model, undoubtedly beneficial for those present.

The trainers also frequently provide participants with opportunities to ask questions or receive feedback. Specific queries related to the role and remit of the on-call Manager and how often the on-call service is used, in addition to practical and logistical queries relating to working as an Advocate. The queries are comprehensively answered by the trainers across all sessions, with responses often contextualised with detailed examples.

7.2.3 Activities & Exercises
Group activities, exercises and discussions are completed across all training sessions, during which participants are asked to consider, reflect upon and discuss various aspects of the YAP programme. Typically each session commences with a group contract or ice-breaking exercise, followed by a recap of any materials covered in previous modules. For example, Core Module 2
commences with the group asked to reflect on what they learned from Core Module 1. As content is introduced, it is often accompanied by an activity or exercise, completed individually or as part of a group.

Exercises focused on the YAP clients, their circumstances and the potential of the YAP programme. During Core Module 1 training, the participants are asked to discuss the types of issues that might result in referral to the YAP programme. The group presents a variety of responses, including behavioural issues, lack of available services, child protection issues, school absenteeism, bullying, self-harm, alcohol abuse, anger issues, long term illnesses, and crisis issues such as bereavement. The group is also challenged to further consider the issues that might affect referred young people. Responses include family and peer relationships, peer pressure, bullying and cyberbullying, physical change, sexuality and educational expectations and achievements. The exercise is supplemented by a discussion on resilience among young people, drawing on the trainers’ experiences.

Further exercises delivered at Core Module training require the participants to consider their roles as Advocates. These exercises are particularly important for contextualising the theory and information provided. In one example, the group is asked what skills would best support Advocates in their roles. A selection of responses draws on the group discussions and earlier training; these include patience, self-awareness, positivity, creativity, enthusiasm, reliability and commitment. A further exercise involving a mock case challenges the participants to consider a potential crisis scenario, from identifying antecedents and triggers to exploring the post-crisis and recovery phase. Participants are asked to discuss potential responses to the crisis case and create a family safety plan. Throughout this exercise, the trainers draw on a variety of cases for illustration and to provide discussion points.

Some exercises are completed in a traffic light format, with participants considering what would constitute bad practice, acceptable practice and examples of good practice. This system is particularly effective, allowing the
participants to consider their judgement and professionalism in a broad range of complex scenarios but also facilitating in-depth explanations by the trainers, who have the opportunity to draw on their considerable experience in the field.

Participants also completed exercises relating to practical aspects of their role. At Core Module 3, procedures for completing and submitting reports were explained, with detail provided around dates for submission and who will be subsequently reviewing and accessing the reports. Participants were shown examples of the online paperwork they would be expected to complete including weekly summary sheets and incident reports as part of the young person’s file. During child protection training, participants are encouraged to consider responses where a complaint has been made against an Advocate, and where an Advocate encounters circumstances in the home that may merit reporting, focusing on the supports available.

7.2.4 Participant Engagement & Outcomes
Throughout Core Module training, interaction and engagement levels among participants were observed as high, with participants encouraged to consider and challenge their own views, as well as consider alternative viewpoints. The participants were particularly responsive to group work and drew on earlier training in providing responses and generating discussion. The participants were enthusiastic, participative and engaging with the trainers. Group integration was encouraged and consequently high, and the group exercises were particularly effective in encouraging open dialogue. A positive rapport was observed across all sessions, both among the trainee Advocates and between the trainers and trainee Advocates.

7.3 Management Training: Advanced Wraparound Training

7.3.1 Training
The advanced wraparound training for Managers examined best practices for serving young people and their families through use of the YAP model. This includes an exploration of YAP’s planning process, culture of communication,
crisis and safety planning, effective partnership and engagement with families, working with individualised service plans and the successful transition and discharge of young people completing the YAP programme.

7.3.2 Participants and Facilitation
The observed YAP Advanced Wraparound Training for Managers was facilitated by staff from YAP Inc. The training was attended by all practice staff from across the YAP regions and was supported with a PowerPoint presentation, handouts detailing the resources to support the implementation of the YAP wraparound tools, group exercises and discussion.

7.3.3 Participant Activities & Exercises
Exercises and activities emphasise implementation of the YAP model. The exercises supported discussion and dialogue across the training sessions, with additional feedback and debate provided by the session trainers. The training emphasises the importance of the child, family and team meeting, where the family has ultimate control over their plan, focusing again on progress in a positive, strengths based way. The trainers focus on the need to prioritise ‘big needs’ and consider contingency planning for when a plan is not initially successful. The discussion is supported by an observation exercise. The group is then referred to Dr. Michael Mark’s theory of change, considering pathways to purposeful transitions, positioning the young person to transition and become successful without YAP.

The group also explores the function of the Individualised Service Plan (ISP) and associated purposeful activities. This includes a conversation around predictive behaviours in young people and patterns of challenging behaviour, from trigger phase (physiological, environmental, social) to escalation and finally crisis phase. The group is encouraged to discuss behaviour in the context of an Antecedent, Behaviour, Consequence (ABC) model and discuss an example of a young person at each stage. The group also examine the process of separating the young person from possible negative influences, and how this could be achieved in a
community and strengths based way through mentoring and supporting aspirations in the young person.

The group also completes an exercise around group transitions, identifying transition supports and setting goals for different stages of programme engagement. Upon identifying support tools collectively, the trainers introduce the group to tools to support the process of developing relationships with clients, including pre-meeting plans, bubble charts and strengths based surveys.

7.3.4 Participant Engagement and Outcomes
Participant engagement levels were high throughout the session, with those present frequently expressing belief in the strengths based approach of the YAP model. When asked to consider what conditions are necessary to achieve outcomes, staff highlighted support and guidance; community role models and people who believe in the young people; a non-judgemental approach; confidence and perseverance; and the space to make mistakes and the opportunity to consider resolutions and answers and an understanding of the circumstances they live within and obstacles they face. The group dynamic was positive, with participants responding well to and enthusiastic about the programme offered by the trainers. The training emphasised the strengths based model and the holistic wraparound approach favoured by YAP, concentrating on the young person, their guardians and family and the possibility for support within the local community. Staff were optimistic about the positive features of the model and the tools that would facilitate its practical application.

7.4 Conclusion:
As part of the evaluation of Youth Advocate Programmes Ireland, a number of training sessions have been observed. Group dynamics observed were positive across the training sessions, with beneficial levels of group interaction, and opportunity for questions and feedback. The trainers drew on direct professional experience and knowledge of YAP and related work. At sessions for potential Advocates, questions and queries arose around logistics and practical aspects of
the work as an Advocate including travel and payments. Although the questions were capably answered by the trainers present, they were not always related to the content of the training and so may provide an opportunity for further training materials or information provision on those aspects of the programme. Mental health training was positively received by matched Advocates, highlighting the perceived benefits of providing training on particular aspects of the complex needs of the young people on the YAP programmes. Staff training was positively received by those present, with the trainers from YAP Inc. providing insights from their experience working with YAP internationally and emphasising the value of the YAP model, in both theory and practice.
Chapter 8: Survey of Advocates

8.1 Introduction

As part of the evaluation of YAP Ireland, a survey of matched Advocates was administered in May and June 2013. The survey comprised a series of demographic questions, along with questions about the Advocates’ experiences of working with YAP and YAP young people, as well as their perceptions of the YAP model. All survey data has been anonymised. Where responses are qualitative in nature, indicative responses and examples are used. A summary of the preliminary findings follows. A total of 81 Advocates responded to the survey.

8.2 Demographic Data

8.2.1 Gender of Respondents:

Of the respondents, a total of 61.7% (n=50) were female, with 38.3% (n= 31) male.

![Gender of Respondents](image)

*Figure 8.1 Gender of Respondents*

8.2.2 Age Range of Respondents:

One third of respondents were in the 25-34 age category (33.3%, n=27), with 35-44 year olds accounting for 28.4% (n=23). A further 21.5% of respondents were 45+ (n=19), with the fewest number of respondents in the 18-24 year old category (n=12).
8.2.3 YAP Area of Respondents

The survey area with most respondents was the Dublin North City Region (17.3%, n=14), closely followed by Meath (12.4%, n=10), Cavan/Monaghan (12.4%, n=10), Dublin North County (12.4%, n=10) and Kildare/Wicklow (11.1%, n=9). While the figures broadly reflect different case numbers across regions, they are not strictly proportionate.

**Figure 8.3 Region of Respondents**

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**Figure 8.2 Age Range of Respondents**
8.2.4 Area Type
Just over two in five respondents were currently working in a city/urban area, (43.2%, n=35), with 21% (n=17) working in large towns, a further 24.7% (n=20) working in small towns, and a smaller number of Advocates (11.1%, n=9) working in rural/ village areas.

Figure 8.4 Area Type of Respondents

8.2.5 Highest Level of Education Completed

Figure 8.5 Highest Level of Education of Respondents
The highest qualification of more than one third of survey respondents was a FETAC/HETAC/Diploma (35.8%, \( n=29 \)). 32.1% (\( n=26 \)) of respondents held a bachelor’s degree, with a further 18.5% (\( n=15 \)) possessing a postgraduate qualification.

### 8.2.6 Previous Work Experience

Respondents were asked to select areas of employment history, indicating fields of previous work experience.

![Previous Work Experience](image)

**Figure 8.6 Previous Work Experience of Respondents**

Of those who responded, community and youth work presented as the most popular work background for Advocates (28.1%, \( n=59 \)), followed by education (10.5%, \( n=22 \)). Of those who selected “Other” (9.05%, \( n=19 \)), responses included military, volunteering, disability support, addition counselling and social care work. The broad range of Advocate backgrounds reflects YAP Ireland’s policy of emphasising local community for Advocate recruitment. The total number of responses (\( n=210 \)) indicates that respondents have selected more than one field of previous work experience, suggesting that while on the whole the group is varied, there is also variety within the work history of individual Advocates.
8.2.7 Respondents with a Second Job

Of the 81 survey respondents, 51.9% (n=42) are currently working in a second job, apart from their work as a YAP Advocate. While 42 respondents declared working a second job, 55 responses were selected for “job type”, indicating that a number of respondents are working in more than two jobs. Education was the most popular response (20%, n=1), followed by community and youth work (18.8%, n=10), followed by social services (10.9%, n=6) and health (10.9%, n=6). Of those who selected ‘Other’ (10.9%, n=6), responses included psychotherapy, counselling and care work.

![Second Job Area of Respondents](image)

**Figure 8.7 Second Job Area of Respondents**

8.3 Working with YAP Ireland

8.3.1 Number of Young People Advocate is Currently Working With

When asked how many young people they are currently working with, the largest number of Advocates (48.2%, n=39) reported working with one young person, with a further 32 Advocates (39.5%) working with two young people. Four Advocates (4.9%) reported not currently working with any young person, possibly having completed a case or awaiting assignment, with a further four
Advocates (4.9%) currently working with three young people. Two Advocates (2.5%) reported working with more than three young people.

![Graph showing the number of young people currently working with Advocates.](image)

**Figure 8.8 Number of Young People of Respondents**

8.3.2 Hours Per Week Spent with Young Person
The majority of survey respondents reported spending from 6-10 hours per week with their young person (60.5%, n=49), while a smaller number (17.3%, n=14) indicated working with their young person for between 0-5 hours in a week. 18 (22.2%) respondents reported spending from 11-15 hours with their young person.

![Pie chart showing hours per week spent with young person.](image)

**Figure 8.9 Hours Spent with Young Person**
8.3.3 Kinds of Activities Carried out with Young Person

Respondents reported undertaking a variety of activities with their young people. Popular responses were food/drink based activities, including going for a coffee (23.3%, n=64), excursions, including going for a drive or a walk (23.6%, n=65) and entertainment, including cinema visits (20.4%, n=56). Education, including homework, was the least popular activity (13.45%, n=37). Despite this, it is worth noting that 37 out of 81 respondents (rather than responses, since multiple selections were possible for each individual) is a high proportion of Advocates spending time on education with their young person. Where ‘Other’ was selected, responses included going to the local library, cooking and arts and crafts.

![Kinds of Activities With Young Person](image)

*Figure 8.10 Kinds of Activities Carried out with Young Person*

8.3.4 Activities That Advocate Would Like to Have Been Able to Do

Advocates were also asked whether there were activities that they would like to have been able to do but could not. 23.5% (n=19) indicated that they would like to have done other activities. Qualitative data collected for this response throws light on the types of activities Advocates would like to have been able to do but could not. Responses range from case specific scenarios that present challenges, such as where the young person is in foster care, while also highlighting
prohibitive factors in pursuing some activities, notably issues with limited expenditure and the logistical issues arising from living in rural areas.

8.3.5 Aspects of the YAP Programme that Work Well

The Advocates were asked to comment on aspects of the YAP programme that worked well. Indicative responses include ‘one-to-one interaction’ with the young people, ‘the strengths based approach’, ‘focusing on positives’, providing ‘a support network’ for the young person, and YAP’s ‘no reject, no eject’ policy. The responses are in keeping with YAP’s strengths based wraparound model.

“Interaction with the young person on a one-to-one basis [has] created some really positive experiences.”

“The knowledge for the young person that a support network exists around him/her. The one to one nature of the work, the promotion of self esteem within the young person.”

“The one-to-one approach and also the no reject no eject policy.”

Also frequently acknowledged was team communication and relationships with Managers, indicating a sense of organisational support.

“Liaising with Managers and other professionals in the wraparound setting.”

“The constant communication between Advocate and Line Manager.”

Such responses are broadly in line with YAP’s logic model, demonstrating an understanding of the approach and overall model on the part of the Advocates.

8.3.6 Main Challenges Faced by Advocates

Advocates were afforded the opportunity to highlight some of the main challenges they are faced with in their roles. A variety of responses presented, and frequently mentioned were difficulties dealing with a young person’s family or parents in particular circumstances, difficulty in meeting with or engaging their young person and conflicting personal views or beliefs.

“Young person/parent not keeping appointments or cancelling at short notice.”
“Getting a young person to engage when they don’t want to.”

“Working with the young person’s parents has been difficult as they have not been as likely to embrace any changes that have been suggested.”

“Not getting support from the parents when they have exhausted themselves with trying to work through the system. Sometimes they are so sick of new faces coming through their door that they are sick of cooperating and you may get resistance.”

“The main challenges are being aware of my own personal issues and not letting them affect my role.”

Also highlighted were logistical concerns relating to the distance travelled to meet a young person and associated distance from amenities or spaces where activities could be carried out, a problem likely to be more relevant to rural areas.

“The distance of travel from the young person’s housed to bigger towns or city.”

“Being 45km away from office as this could be used for a lot of activities free of charge.”

In contrast to those who emphasised organisational support in describing aspects of the programme that work well, a small number of respondents expressed an interest in increased training or supervision.

“There is little or no supervision...as an Advocate for young people [...] we give them a voice, but as an Advocate we have little or no voice at all.”

“Not being able to contact my Case Manager because they are so busy.”

8.3.7 Aspects of the Programme that Could Work Better

The Advocates were also asked to consider aspects of the programme that would work better if they were different. Advocates provided a variety of responses, with some expressing an interest in permanent employment as Advocate with YAP Ireland.

“A full-time position as a youth Advocate. It would allow a greater flow of knowledge and understanding to occur in the job...Consistency of the position of youth Advocate could only make the work better.”
“There is a lot of recruitment for Advocates with YAP, it’s a pity that present staff can’t be kept on as full time Advocates and given a salary.”

A small number of respondents expressed an interest in increased supervision within their roles, and occasionally further training to support their work with young people.

“More supervision and more regular contact with other Advocates so as to organise group activities etc.”

“I feel that I should have more regular feedback from my Manager, and more input from them.”

“I feel it is very important to have a co worker to link in with, and more supervision.”

“In the initial training, I think more education is needed on mental health as it may be new to some Advocates the challenges that young people are facing every day.”

Again, the request for increased supervision may reflect varying practices across the regions or an individual issue, when put in the context of the number of survey respondents who expressed feeling confident and supported in their roles.

**8.3.8 Important Aspects of Work**

The Advocates were asked to identify what they considered to be the most important aspects of their work, rated on a three point Likert scale, comprised of ‘Not Important’, ‘Somewhat Important’ and ‘Very Important’. The aspects deemed ‘Very Important’ by the largest numbers of respondents were “supporting the young person to achieve their goals” (n=80), “listening to what the young person has to say” (n=80) and “building confidence and self-esteem in the young person” (n=79). Also scoring highly were “encouraging the young person to take responsibility” (n=74), “giving the young person a voice in their life” (n=73) and “developing the young person’s social skills” (n=73). The responses emphasise the importance of improving the social skills and confidence of the young people, supporting YAP’s model of empowering young people with a wraparound approach. Lower average scores presented for other
statements, including “enhancing the young person’s role as an active citizen” (n=50) and “helping the young person with their education” (n=49), in line with the types of activities Advocates reporting doing with their young people. Although these responses scored lower, all of the statements averaged a positive score, reflecting the broad expectations of the Advocates in their roles.

![Important Aspects of Work](chart)

**Figure 8.11 Important Aspects of Work with Young Person**

**8.3.9 Working as an Advocate**

The respondents were also asked to identify how they feel about their work as an Advocate, rated on a three point Likert scale, comprised of ‘Not True’, ‘Somewhat True’ and ‘Certainly True’. The responses indicate that Advocates are confident in their roles (n=67 for ‘Certainly True’) and feel that their work with
YAP Ireland contributes to their professional development (n=64). Also scoring highly, the results indicate that Advocates feel that they are well matched with their young people (n=63 for ‘Certainly True’), as well as feeling supported in their roles (n=64). The number responding that it is ‘Certainly True’ that they are given adequate feedback about their performance is lower (n=48, with a further 30 saying it is ‘Somewhat True’). The lowest scoring item related to pay, with an equal number of respondents (n=34) saying it is ‘Somewhat True’ and ‘Certainly True’ that they are paid fairly for the work they do. This statement also yielded the highest number of negative responses, with 13 respondents reported that it is ‘Not True’ that they are paid fairly for the work that they do.

![Figure 8.12 Advocate Work Satisfaction](image-url)
8.3.10 Effectiveness of YAP Model

Respondents were asked to comment on the effectiveness of the YAP model. The majority of respondents gave positive accounts of their experiences with the YAP model, emphasising the ways in which the model links in with the local community, provides a voice for the young people and builds confidence and self-esteem, as revealed by this selection of indicative responses;

“I believe so, meeting young people at their level, giving them a voice for probably the first time ever, getting them involved in activities that they never would have the opportunity to do outside of YAP are all effective to their needs.”

“Yes the YAP model helps me to help the young person reach their goals.”

“Yes, I think it can help to build confidence, self-esteem and practical skills.”

“The YAP programme is effective when you see the goals achieved by the young person.”

While the number of positive responses was greater, a small number of respondents suggested areas where they faced challenges, identifying the possible limits of the six month placement with the young person.

“The model is effective on paper but in practice there are many challenges such as a better support system for the Advocate.”

“Some goals take up a lot of time and six months go very quickly.”

“I don’t agree that giving a young person six months of positive input should be so starkly removed.”

“...[T]he six month cut-off seems too short as it can take two of those months for the young person to have any kind of relationship with you.”

8.3.11 Beyond YAP Ireland:

Advocates were asked about the types of work they might pursue after their work as an Advocate. Respondents indicated preferences for similar community-based work in care professions or working with young people, as well as in the related fields of health and mental health. Some respondents expressed plans to complete or return to third level education, while others were not sure what they would do next.
“I will see myself working with young people again.”

“I am finishing a [related course] in [University], I hope to get work either as a youth worker or community worker.”

“I certainly enjoyed working with young people and hope to continue this in some capacity, even in a voluntary way.”

“To continue working with young people who are in need of help.”

“Looking for full time work in this sector.”

8.3.12 Additional Comments
Advocates were given the opportunity to impart additional feedback in the form of any further comments they wished to make about their experiences working with YAP Ireland. Responses were generally positive, with Advocates expressing support for the YAP model and the work of YAP Ireland, as well as enthusiasm for their experiences and the opportunity to work for YAP Ireland.

“I firmly believe this project works very effective in helping the young people and their families with the correct supports in helping them change their lives for the better in the future.”

“Working with YAP has been very rewarding for me as an Advocate all of the young people that I have worked with now have a lot more confidence in themselves and everything they do.”

“[It has been a] great experience and fulfilling to see the young people that I have worked with improve their own personal situations as a result of the support we have been able to give them.”

A small number of Advocates also took the opportunity to describe the levels of support they receive within the organisation.

“My only negative comment about YAP is that communication could be a whole lot better. Being an Advocate is an important role, and there have been too many instances where I have not felt supported in that role.”

“My work with the young people has been a privilege, but I feel my voice is not heard and undervalued.”

“I love working for the company and feel very supported and confident in my abilities here.”

“Good organisation - Managers [name], [name] and [name] are all very good at what they do.”
8.4 Conclusion

The survey findings presented in this chapter provide an insight into the experiences of a sample of Advocates working for YAP Ireland at a specific time. Respondents were from diverse backgrounds, with a significant proportion having previous work experience in the youth and community work sector. Just over half of respondents were currently working in a second job. The majority of respondents were working with one or two young people, with 60% spending between 6-10 hours a week with their young person. Advocates reported carrying out a broad range of activities with their young person, in line with YAP’s individualised service. The activities listed as most popular were general excursions including going for a drive, and food or drink based activities.

Advocates reported positive experiences of the YAP programme, including the one-to-one interaction, the strengths based approach and working with families. Advocates also commented positively on the effectiveness of the YAP model, emphasising the importance of improving the young person’s confidence, and highlighting the benefits of the community support approach. Advocates identified important aspects of their work, with ‘supporting the young person to achieve their goals’, ‘listening to what the young person has to say’ and ‘building confidence’ ranking highest.

In identifying aspects of the programme that would work better if they were different, Advocates expressed an interest in sustained employment, beyond a fixed purpose contract. Advocates also identified challenges faced within their roles, including difficulties maintaining programme engagement with some young people and their families; and logistical concerns with travel and associated costs. Reports of the experience of working as an Advocate were generally positive, with 63% (n=51) of respondents claiming that it is ‘Certainly True’ that they are ‘very satisfied with their work as an Advocate’. A further 31% (n=25) found this statement to be ‘Somewhat True’. Responses to the statement ‘I am paid fairly for the work that I do’, were 42% (n=34) ‘Certainly True’, a
further 42% (n=34) 'Somewhat True', and the remainder 16% (n=13) 'Not True'. These responses would indicate that pay is a concern for some YAP Advocates.

Despite this, Advocates report feeling confident and supported in their roles, and survey respondents perceived their work for YAP Ireland as contributing to their professional development.

The findings presented here will be revisited in the context of other research findings, in *Chapter 9: Conclusion & Recommendations*. 
Chapter 9: Discussion & Recommendations

9.1 Introduction
This longitudinal evaluation of YAP Ireland set out to evaluate the effectiveness of the model in an Irish context, exploring whether the needs-led wraparound approach leads to positive outcomes for young people, their families, their communities and referral agents. A mixed methods approach was adopted, incorporating qualitative and quasi-experimental quantitative components. The following research questions were addressed:

1. Is the YAP model effective in an Irish context?
2. Are the YAP programmes contributing to positive outcomes for young people and their families?

This chapter provides an overview of data from all strands of the research and makes a number of recommendations arising from the evaluation.

9.2 YAP Advocates: Experiences and Observations

9.2.1 The YAP Model
Advocates currently employed by YAP Ireland come from a variety of work backgrounds, including community and youth work, social care work, education, retail and sports/recreation. This reflects YAP Ireland’s policy of recruiting people with the necessary aptitudes, and ideally living in the local community, rather than having specific qualifications. The majority of matched Advocates were working with one or two young people at the time of this research, typically spending 6-10 hours with their young person.

YAP Advocates were by and large well-informed of the YAP model and conscious of the need to apply the model in practice. Advocates identified positive features of the model, including ‘one-to-one interaction’ with the young people, ‘the strengths based approach’, ‘focusing on positives’, providing ‘a support network’ for the young person, and YAP’s ‘no reject, no eject’ policy. The responses are in keeping with YAP’s strengths based wraparound model.
YAP Advocates also identified the aspects of their role they perceived as most important, including “supporting the young person to achieve their goals”, “listening to what the young person has to say” and “building confidence and self-esteem in the young person”, aligning to YAP’s core value of empowerment and core principles of individualised service planning and focusing on strengths.

Advocates interviewed were conscious of the complex needs of the young people with whom they were working, as well as discussing and reflecting on how the YAP model and the activities they engaged in met those needs. While describing the young people, the Advocates focused on strengths, aligning to the YAP model and drawing on their Advocate training.

YAP young people interviewed described beneficial experiences of working with YAP Advocates. The young people interviewed on the whole reported positive experiences of their YAP Advocate, including references to the Advocates’ interests and hobbies, their ability to listen and offer advice, as well as their abilities to engage the young people by ‘telling stories’, encouraging and joining in activities including supporting school work and, drawing on the YAP model, avoiding judgment and focusing on the strengths of the young person, while listening to their points of view. The approach is consistent with the ‘one good adult’ ethos adopted by YAP Ireland, drawing on the Headstrong My World Survey (2012), which finds that the presence of ‘one good adult’ makes it more likely that a young person will be connected, self-confident, future looking and able to cope with problems (Headstrong, 2013). Similarly, the importance of a mentor as a role-model in youth development is identified in Erikson’s life-stage psychosocial development theory (1959), while Bandura’s social learning model holds that a young person will reproduce observed behaviours and, if feeling motivated, will continue to engage with positive behaviours.

Correspondingly, the parents/guardians of young people participating in the YAP evaluation interview series predominantly spoke positively about their experiences of YAP Advocates, discussing the benefits of having the additional
support of the YAP worker, which was having a positive effect on the young person’s home life; and also providing support to the guardian in motivating or encouraging the young person, in line with the YAP’s core principle of partnering with parents.

9.2.2 Working for YAP Ireland

In reporting on their experiences of working as an Advocate for YAP Ireland, responses varied. Survey results show that Advocates are confident in their roles and feel well-matched with their young people. Substantial majorities of Advocates surveyed feel confident and supported in their roles and agree that their work with YAP Ireland contributes to their professional development. Responses are also positive, but less decisively so, regarding the adequacy of feedback received (59% (n=48) think it is ‘Certainly True’ they are given adequate feedback and 37% (n=30) think it is ‘Somewhat True’).

The Advocates reported facing challenges in their roles. Advocates identified difficulties in motivating their young person to engage in activities, and apprehension in dealing with complex cases, particularly where the young person has exhibited or threatened violent behaviour. In some instances, it was reported that further training, or the selection of an Advocate with specific experience would benefit a challenging or crisis situation.

Of the survey respondents, 51.9% are currently working in a second job, apart from their work as a YAP Advocate. It is acknowledged that YAP Advocates are advised not to treat their employment with YAP Ireland as their sole source of income. However, a considerable number of Advocates are not satisfied with the pay they receive for the work that they do. Among Advocates surveyed, a lower score presented for fair remuneration, with 58% of respondents reporting this to be ‘Somewhat True’ (n=34) or ‘Not True’ (n=13).

This concern also extended to the irregularity of hours worked. Advocates are paid for time spent with the young person and Advocates described how this
would vary from young person to young person, and from week to week. Managers participating in the focus groups reported that Advocates are advised of the pay and conditions of their employment, and acknowledged that hours worked can also have an effect on social welfare payments. Advocates also described the challenge of working within the allocated YAP budget for activities. A view was offered by two Advocates that the budget applied solely to the young person, necessitating the Advocate to contribute from their own income if they wish to partake in activities, such as visiting the cinema. However, YAP Ireland informed the researchers that it provides an additional budget for activities that are needs-led or goals focused. While the perception of the two Advocates in question may be isolated, better communication of this additional budget should be considered for potential Advocates prior to commencing their work with YAP Ireland. Also highlighted were logistical concerns relating to the distance travelled to meet a young person and associated distance from amenities or spaces where activities could be carried out, more relevant to rural areas.

Advocates also described the challenge of a fixed purpose contract, recommending opportunities for increased support in career progression for Advocates coming to the end of their contracts with YAP, in addition to the possibility of ongoing employment as an Advocate with YAP Ireland. It is acknowledged that as the data is longitudinal, some data was collected two years ago and a number of changes have been made to recruitment and selection, training and supervision policies and procedures in this time. A large number of Advocates surveyed in May and June 2013 found it to be ‘Certainly True’ (79%) that their work as an Advocate contributes to their professional development. Further, Managers outlined schemes administered by YAP Ireland to support Advocate career development, including a study grant scheme. Managers also identified that occasionally, Advocates who have worked with a number of young people for up to two years will take a break and can reapply if they wish to work as an Advocate again. In the qualitative responses to the survey, a small number of Advocates identified the need for increased training or supervision, which could indicate differences in the levels of supervision received by Advocates. The
varied responses may point to different experiences, possibly within different YAP regions but also possibly to changes within the organisation over time.

9.3 YAP Management: Perceptions and Practice

9.3.1 The YAP Model
SERVICE and Case Managers working with YAP Ireland described the young people on the YAP programme, often in terms of the challenges faced and how these could be overcome utilising the YAP model. They described young people on the YAP programme as lacking a sense of contribution to society and community, manifesting in a sense of being mistreated or let down, as well as isolated. They also highlighted the prevalence of drug and alcohol abuse among YAP clients, emphasising the ‘at-risk’ nature of the young people on the programme. Family and home circumstances were also reported as potentially contributing to problems, with accounts that some young people may be responding to behaviours witnessed in their home environment.

Staff were positive about the YAP model in responding to the needs of vulnerable young people and young people with complex needs, in keeping with the evidence in the literature which reports that mentoring relationships produce more marked outcomes and are most effective where the participating young people have either had pre-existing difficulties or been exposed to significant levels of environmental risk (DuBois et al., 2011).

Staff addressed YAP’s core principle of ‘cultural competence’, reporting instances of some schools’ ‘negativity’ towards young people, with negative perceptions based on their address, family name or family reputation. This was particularly relevant to young people from the Travelling community. Staff highlighted a need for supplementary support to deal with such situations within schools in marginalised areas, often dealing with large numbers of young people with complex issues.
Staff commended the YAP model and programme for achieving outcomes, and for empowering young people and their families through a respectful and non-judgemental, strengths based model.

### 9.3.2 Working for YAP Ireland

Case and Service Managers described their roles working for Ireland during the focus group sessions. Roles and responsibilities included direct contact with families; Managing Advocates by providing supervision, and related administration; recruitment and training; fundraising, networking, and communications; and liaising with external services.

Managers occasionally expressed concern at their workload and the associated expectations, describing how they often balanced a variety of competing tasks, while continuing to remain as involved as possible with their cases. Some Managers also described finding on-call time daunting, emphasising the level of commitment and responsibility associated with the 24-7 service provided by YAP. A number of Case Managers expressed an interest in career development opportunities within YAP, potentially through up-skilling, or taking responsibility for different aspects of the programme.

Managers also highlighted their relationships with external services, including formal external services. Some services were subject to criticism, with relationships with social workers identified as difficult by a number of Case Managers. Correspondingly, Case Managers identified existing family relationships with external services as occasionally problematic. YAP’s wraparound team-based model of community care necessitates relationships with related services, and the findings highlight a perception among Case Managers that relationships with some external services could be improved.
9.4 YAP Young People: Insights and Outcomes

9.4.1 Improved Outcomes for Young People
Qualitative data gathered during the interview series strand of the research indicates that young people on the YAP programme find the experience predominantly positive, reporting improved confidence and increased participation in activities and improved community engagement. Young people also reported improvements in their mental health, leading to decreased stress, in addition to increased self-esteem and resilience, and increased ability to cope with challenges. These protective factors are noted as important to a young person’s self-worth, self-efficacy and mental health, particularly within ‘at risk’ families (Children’s Mental Health Coalition, 2013).

Parents/guardians also report positive outcomes for their young people, including improved communication and social skills, and increased confidence and community engagement. The responses are by and large in line with YAP’s core principles, including ‘partnership with parents’ and a ‘focus on strengths’ approach. Parents also identified improvements that met the specific needs of their young person, aligning to YAP’s ‘individualised service planning’ approach.

9.4.1.1 Strengths and Difficulties Questionnaires (SDQs)
The quantitative component of the research also yielded predominantly positive results for young people engaged in the programme. SDQ total difficulties scores decreased from baseline to mid-point, and again to end-point for both parents/guardians and young people’s self-reports. The mean score for YAP young people’s self-reports moved from the ‘borderline’ category to the ‘average’ category for total difficulties. Similarly, the mean score for parents decreased, moving from ‘at risk’ to the lower end of the ‘borderline’ category. Parent/guardian scores show markedly higher improvements. Parents’ perceptions of difficulties were higher than self-reported at baseline. The changes were found to be statistically significant between the baseline and end-point for both young people and their parents/guardians reports. A smaller drop was recorded in the mean score of the comparator group, but this change was
not found to be statistically significant. The figures indicate that there was an overall perceived improvement in difficulties for respondents who took part in the programme.

Looking at individual scales, improvements were reported across time over the emotional scale, hyperactivity scale and conduct problems scale for young people and parents/guardians. The scale which showed the most perceived improvement in the young person’s self-report was the hyperactivity scale, with parents/guardians reporting emotional symptoms and conduct problems as most improved. For the pro-social scale, the parent score showed a slight improvement, while the self-report showed a small disimprovement, but neither change was statistically significant and scores remained in the ‘average’ category for both young people’s and parents’/guardians’ reports over the duration of the programme. The impact factor questions also reported decreases over time in the self-reports and parent/guardian reports. The parent version saw the impact score drop from an average score in the ‘at risk’ category to the ‘borderline’ category, dropping more than the self-report group.

Comparing the end of programme score to the three month post-programme scores reveals that there is no significant change in the self-report scores, which suggests that the improvements made were sustained after the programme ended. This is true for four sub-scales, as well as for the total difficulties score. Of note, the pro-social scores improved significantly for self-reports in the post-programme findings, previously remaining statistically unchanged during the programme, possibly suggesting that benefits relating to this aspect of young people’s behaviour had accrued over time.

However, in the parent/guardian post-programme scores for total difficulties, a disimprovement can be reported, with the young people moving to the ‘at risk’ category. However, when outliers (extreme cases) are removed, this change is smaller. Given the relatively smaller number of responses at the three month post-programme phase, sufficient cases were not available to test significance of variance, and thus all of these findings need to be interpreted with caution. A
further caveat is that parent/guardian perceptions and apprehensions regarding disengagement from the programme, as expressed in the qualitative strand of the research, may have influenced responses to this item.

The reported improvements as evidenced by the qualitative data and quantitative SDQ findings represent important positive outcomes for the young people participating in the YAP programme. The outcomes show improvements in factors which enhance wellbeing, as described in the literature. Happiness and health are associated with physical participation in life, spending time with friends and a sense of belonging within families and communities (De Róiste & Devlin, 2007). Correspondingly, resilience and the maintenance of wellbeing in the presence of adversity have been linked to individual factors such as self-esteem and leisure interests; social factors such a sense of belonging and a pro-social peer group; and community factors such as attachment to community networks and access to support services (National Youth Health Programme, 2004). These reported findings in relation to wellbeing suggest that there are clear positive outcomes for young people who participate in the YAP programme.

9.4.2. The Matching Process
Experiences of the matching process were predominantly positive, with young people and parents/guardians largely reporting positive relationships based on shared interest and tailored to the specific needs of the young person. One contrasting view arose in the interview series, where a guardian and their young person describing the matched Advocate as unsuitable. Findings from the survey of Advocates concur that the process is largely positive, with the majority of Advocates giving an account of positive matches. The process of matching was also described by Managers, with reports that the process typically works very well, with the variety of Advocates providing a pool from which appropriate matches can be drawn. Again, a view was expressed that in some regions, it is not always possible to produce an ideal match, with logistical difficulties presenting. It may be the case that in some circumstances, other variables such as
availability and proximity may also be important. This may be a result of the expansion of the YAP programme into new regions. Reports on the matching process were largely positive and in line with YAP’s core principle of ‘individualised service planning’. This is in line with the literature, which holds that positive outcomes are more likely to be reported where the background characteristics of the mentor are considered and the mentor and young person have been paired based on similarities of interest (DuBois et al, 2002).

### 9.4.3 Activities and Community Engagement

The young people participating in the interview series acknowledged changes in their level of community participation since joining the YAP programme. Those interviewed described their experiences before YAP, including a lack of social outlets and limited participation in community. The young people also described negative experiences of, and a lack of interest in education. Occasionally, the young people told of becoming involved in activities that may warrant concern for their safety, including staying out ‘all night in the streets’ and self-harming. Young people reported poor coping skills, with Advocates also indicating that young people were ill-equipped to cope in certain situations. This highlights a lack of resilience in young people prior to joining the YAP programme.

The young people on the YAP programme described a range of activities undertaken with their Advocates, including dining out, going to the cinema, going bowling, taking walks and taking horse-riding lessons. Those interviewed were for the most part satisfied with the range of activities they were experiencing on the YAP programme. Advocates also identified many of the same activities undertaken with their young person, including food and drink based activities, excursions and entertainment activities including cinema visits. Advocates reported engaging in educational activities as less popular, while correspondingly identifying this to be of lesser importance than other activities. Many of the activities undertaken facilitated improved community engagement, considering the young person’s environmental context (Bruns, 2004), while others were more focused on the Advocate and young person having more time
to communicate. During the interview series, Advocates often provided supplementary detail justifying the choice of activity and explaining why it was appropriate for their young person and how it met their specific needs. This process of service individualisation is vital to the wraparound process, particularly where the young person has complex needs (Bruns, 2004). Further, mentoring programmes driven by the needs of the youth are more likely to succeed (Moore et al., 2002).

Just under a quarter of Advocates indicated that they would like to have done other activities, with prohibitive factors including logistical and budget constraints, as well as differing levels of engagement of their young person. The views of parents/guardians were largely positive. The young people taking part in the interview series also identified some challenges encountered while participating in the YAP programme. The young people reported finding budget constraints prohibitive, and those in rural areas expressed interest in improved dedicated facilities. It is acknowledged that YAP Ireland impose the weekly budget limit of 15 Euro per week with a view to encouraging participation in activities that can be sustained by the family after the disengagement process, and that an additional budget is available for activities that are needs-led and goals driven.

Parents and guardians discussed the prospect of their young person continuing to engage in the activities undertaken on the YAP programme. Responses varied, with some indicating that their young person would maintain levels of engagement, with others reporting that their young person would be less likely to maintain activity levels after the disengagement process, especially where activities were dependent on the company of the Advocate, or would likely present a financial burden. Similarly, not all young people agreed that they had made lasting community connections, with two responses of ‘no’ and ‘no not really’ when asked if they had found a ‘role model’ or ‘adult’ in the community to work with after the programme. The literature highlights the value of community engagement, aligning to YAP’s core value of ‘empowerment’ and producing outcomes of improved resilience in young people. Consequently, it is
important that sustainable community engagement is emphasised as vital to the YAP process and visited and revisited at wrap meetings throughout the young person’s participation on the programme.

9.5 Length of Programme

Evidence indicates that the longevity of relationships impacts on youth outcomes in mentoring programmes (DuBois et al., 2002, Moore et al., 2002). It has also been reported that young people in programmes that terminated within six months reported disimprovements in several areas (Grossman & Rhodes, 2002), and that young people in relationships that lasted over a year reported greater improvements (Tierney et al., 1995).

While there was some acknowledgement that the six month period of intervention is short, the consensus among focus group participants was that this was a sufficient period to achieve results and improve the life of the young person. This is reflected in the statistical data collected for this study, with positive outcomes found. Managers conveyed the need to empower not just the young person, but also the parents or guardians, while also facilitating community engagement during this time. Advocates expressed differing views on whether the six month time-frame allocated by YAP is sufficient, possibly reflecting the different needs of the young people with whom they are working. Some Advocates reported finding the six months too brief, with extensions providing extra time with the young person. Some Advocates also expressed an interest in a phased wind down of the service, with some limited opportunities for contact between the Advocate and young person after the programme has ended.

Despite this, longitudinal evidence from this study reports positive outcomes for young people participating in the programme over the six month period. The post-programme scores reveal no significant change in self-report scores, across sub-scales and the total difficulties score. However, looking at the parent/guardian post-programme scores for total difficulties, a disimprovement can be
reported, with the young people moving to the ‘at risk’ category. As explained in Chapter 4, the post-programme scores should be interpreted with caution.

9.6 The Disengagement Process

Case Managers reported positively on the disengagement process, describing how the young person is prepared for the service wind down during wrap meetings and during their time spent with their Advocate. Managers also described YAP’s extension policy, indicating that occasionally the request for an extension may come from an external service. Advocates also commented on the disengagement process with the young people, recording the importance of openness and clarity when working with the young people and drawing on their training, to avoid attachment or dependence. Advocates reported preparing their young person(s) for life after YAP.

However, a disparity presented between the views of the Managers on the disengagement process and those of the young people and their families interviewed. The main concern reported focused on perceptions of preparedness for the disengagement process, with parents expressing fear that their young person would return to exhibiting previous challenging behaviours, while others expressed concerns about managing once services were withdrawn. This data indicates a concern among some parents/guardians, understandable perhaps given their positive assessment of the programme, about ‘life after YAP’ and support without the programme.

It is clear that YAP Managers and Advocates are conscious of the importance of the disengagement process and the needs of the young people engaged with the service at a vulnerable time. However, the disparity between their views and those of some young people and their families on this matter may present an opportunity for learning.
9.7 Training

The characteristics of an effective mentoring relationship have been identified in the literature, with studies emphasising the importance of mentor recruitment and training. Moreover, positive outcomes have been deemed to be dependent on, and moderated by, measures such as guidelines for practice in the field and the screening and training of mentors (Du Bois et al., 2002). Findings from the observation of YAP training and from focus groups and the survey of Advocates suggest that participants have had positive experiences and have benefited from the training provided.

Group dynamics were positive across the training sessions, with good levels of group interaction, and opportunity for questions and feedback. The trainers frequently drew on professional experience and knowledge of YAP and related work, a process that was undoubtedly beneficial for those present. At potential Advocate training sessions, questions and queries arose around logistics and practical aspects of the work as an Advocate including travel and payment, indicating an opportunity for improved communication on work conditions prior to training. Dedicated training, including mental health training, was particularly well-received by matched Advocates, highlighting the perceived benefits of providing training on particular aspects of the complex needs of the young people on the YAP programmes. Almost three quarters of Advocates surveyed reported the statement ‘I receive the training I need to do my job well’ to be ‘Certainly True’. Just under a quarter of respondents said this was ‘Somewhat True’. During the interview series, a small number of Advocates expressed an interest in further advanced dedicated training for certain risk factors, when dealing with particularly challenging cases.

Managers discussed the provision of training for new and continuing Advocates on the YAP programmes, describing how they had recently overhauled the training to provide an Irish context, as well as the advantages of providing training to a diverse range of potential Advocates, selected at the recruitment stages. When describing the training provided, responses were consistently
positive. The opportunity for accreditation of the current training was also identified.

During training observations, staff training was positively received by those present, with the trainers from YAP Inc. providing insights from their experience working with YAP internationally and emphasising the value of the YAP model, in both theory and practice. While focus group responses were also positive, a small number of Managers identified the need for improved induction or training for Case Managers, with an emphasis on opportunities to share experience and learn from one another. The possibility of additional training in particular contexts was identified; one participant identified opportunities to expand and diversify programme offerings to the disability sector, indicating that this may require additional training.

9.8 Strengths, Challenges and Recommendations

9.8.1. Strengths of the YAP Programme

Based on the findings of this research, it is possible to identify a number of strengths of the YAP programme in practice.

- Young people participating in the YAP Ireland programme have positive outcomes, as measured statistically through the Strengths and Difficulties questionnaire. Young people’s self-report scores for total difficulties improved significantly across the six month time frame. Participants also perceived positive outcomes on a range of sub-scales across the six month time frame, including the emotional symptoms, conduct problems and hyperactivity scales. While young people showed a small improvement on the peer problems scale and a small increase in risk on the pro-social scale, these were not deemed to be statistically significant. Overall the findings signify improved wellbeing for young people participating in the programme.
• Parents/guardians of young people participating in the YAP Ireland programme perceived positive outcomes for their young people, in addition to highlighting the benefits of YAP’s programme to the family, particularly in terms of support provision. This is in line with YAP’s core principle of ‘partnership with parents’. Parents/guardians of participants also recorded positive outcomes through the Strength and Difficulties Questionnaire. Scores for total difficulties improved significantly across the six month time frame. Parent/guardian reports also showed significant improvements across a range of sub-scales, including the emotional symptoms, conduct problems, hyperactivity and peer problems scales.

• Young people engaged in the YAP Ireland programme typically reported beneficial experiences of participation, including improved community engagement and the benefits of new experiences in their day-to-day lives. Young people also perceived improved confidence and self-esteem, which are qualities linked to resilience in young people, and of particular importance to at risk groups.

• The YAP programme is implemented as intended, with treatment fidelity scores consistently positive, from the perspectives of the young people and their parents/guardians. Young people were particularly positive about feeling heard, understood and respected on the YAP programme, while parents/guardians reported particular satisfaction with the matching process.

• YAP’s matching process is predominantly effective, drawing on a variety of Advocates and implementing YAP’s core principle of ‘individualised service planning’.

• Managers and Advocates working for YAP Ireland believe in the YAP model, including features of the model aligning to YAP’s core principles,
notably the strengths based wraparound approach and the core principle of empowerment. Managers and Advocates were also positive about the application of the YAP model in practice, and the benefits for the young people participating in the programme, with shared understandings of positive outcomes achieved for participants and their families.

- The training provided by YAP Ireland is well-received by potential and matched Advocates and staff, with particularly positive responses to specialised training relating to specific risk factors for young people participating in the programme.

9.8.2 Challenges
A number of challenges have been identified through the research, highlighting opportunities for learning for YAP Ireland.

- Some Advocates identified difficulties in motivating their young person to engage in activities, and apprehension in dealing with complex cases, particularly where the young person has exhibited or threatened violent behaviour. It may be possible to address this through further training, with training relating to specific risk factors particularly well-received by Advocates.

- In a small number of cases, where a match is not successful, the programme may not be as effective in supporting the young person to achieve positive outcomes.

- Managers also identified challenges faced in dealing with some cases, sometimes linked to external services, including social work services and in some cases, treatment of the young person in the school environment.

- Some Advocates are not satisfied with the pay they receive for the work that they do. When asked if they were paid fairly for the work that they
do, 42\% (n=34) found this to be ‘Somewhat True’, with 16\% (n=13) finding this to be ‘Not True’.

- A small number of Managers participating in focus groups occasionally expressed frustration at their workload and the associated expectations, describing how they often balanced a variety of competing tasks, while continuing to remain as involved as possible with their cases. For a small number of new Case Managers the on-call time was challenging.

- Parents expressed concern about ‘life after YAP’ and losing the support provided by YAP Ireland. Consequently, it is important that sustainable community engagement is emphasised as vital to the YAP process and visited and revisited at meetings throughout the young person’s participation in the programme.

- While Case Managers and Advocates were well-informed of the disengagement process, some parents expressed fear that their young person would return to exhibiting previous challenging behaviours, while others expressed concerns about managing once services were withdrawn. This data further highlights a perceived concern among some parents/guardians about ‘life after YAP’ and support without the programme.

- The administration of the research was resource-intensive, requiring ongoing organisational support for staff and young people. It is important that YAP staff have an understanding of the research process and handling of research material but also of the value of the research within the context of the overall work of the organisation.

**9.8.3 Recommendations**

Based on the strengths and challenges identified here, the following recommendations can be made:
• It may be possible to address more challenging cases through further training, with current training relating to specific risk factors particularly well-received by Advocates. The opportunity for accreditation of the current training was also identified.

• The issues of Advocates’ pay and conditions merit further consideration. While acknowledging severe financial constraints, it is recommended that YAP Ireland considers a review of the overall package provided to Advocates.

• In consideration of Managers’ workloads, YAP should review the support and training for staff providing the on-call service and strengthen induction for new staff.

• The perceived concern among some parents/guardians about ‘life after YAP’ and sustained support without the programme could be further addressed throughout programme engagement, including at wraparound meetings, for young people and their families. YAP Ireland should consider the option of a phased aftercare plan to support families and young people participating in the programme. This would help to alleviate apprehension around the disengagement process, while facilitating sustained community engagement and supporting sustained outcomes for young people.

• YAP Ireland should consider what more could be done to encourage related organisations to work in a strengths based, youth-friendly way, promoting advocacy within the youth sector, and influencing change more broadly.
Based on analysis of the data collected through this longitudinal evaluation, it can confidently be concluded that the YAP model is effective in an Irish context and the YAP programme contributes to positive outcomes for young people and their families.

The YAP programme is implemented as intended, with treatment fidelity. Service Managers, Case Managers and Advocates working for YAP Ireland believe in the YAP model, and are also positive about the application of the YAP model in practice, and the benefits for the young people and families participating in the programme. Staff were positive about the YAP model in responding to the needs of vulnerable young people and young people with complex needs, in keeping with the evidence in the literature which reports that mentoring relationships are most effective where the participating young people have either had pre-existing difficulties (DuBois et al., 2011).

Staff, young people and parents/guardians were positive about the matching process and working with Advocates, in line with the literature, which holds that positive outcomes are more likely to be reported where the mentor and young person have been paired based on similarities of interest (DuBois et al, 2002). The ‘one good adult’ ethos adopted by YAP Ireland aligns to the Headstrong My World Survey (2012), which finds that the presence of ‘one good adult’ makes it more likely that a young person will be connected, self-confident, future looking and able to cope with problems (Headstrong, 2013). Similarly, the importance of a mentor as a role-model in youth development is identified in Erikson’s life-stage psychosocial development theory (1959), while Bandura’s social learning model holds that a young person will reproduce observed behaviours and, if feeling motivated, will continue to engage with positive behaviours.

Young people participating in the programme have positive outcomes, as measured statistically through the Strengths and Difficulties Questionnaire. Overall, the findings signify improved wellbeing for young people participating in the YAP programme. Parents/guardians of participants also recorded positive outcomes overall through the Strength and Difficulties Questionnaire. The
reported improvements as evidenced by the qualitative data and quantitative SDQ findings represent important positive outcomes for the young people participating in the YAP programme. The outcomes show improvements in factors which enhance wellbeing, as described in the literature. Happiness and health are associated with physical participation in life, spending time with friends and a sense of belonging within families and communities (De Róiste & Devlin, 2007). Correspondingly, resilience and the maintenance of wellbeing in the presence of adversity have been linked to individual factors such as self-esteem and leisure interests; social factors such a sense of belonging and a pro-social peer group; and community factors such as attachment to community networks and access to support services (National Youth Health Programme, 2004). These reported findings in relation to wellbeing suggest that there are clear positive outcomes for young people who participate in the YAP programme.

Based on analysis of the data collected through this longitudinal evaluation, it can confidently be concluded that the YAP model is effective in an Irish context and the YAP programme contributes to positive outcomes for young people and their families.
Bibliography:


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Appendices
Appendix 1: Demographic Information on YAP Cohort and Comparator Cohort

A1.1 Gender
Within the programme group, there were 126 males (59.2%) and 87 females (40.8%). Within the comparison group, there were 81 males (61.4%) and 51 females (38.6%). Pearson's Chi squared test with Yates' continuity correction resulted in a value of 0.086, with significance of p=0.769, meaning there was no significant difference between the groups and thus they are comparable across gender without adjustment.

![Gender of Respondents](image.png)

Figure A1-1 Gender of Respondents

A1.2 Age

<table>
<thead>
<tr>
<th>Age Category</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 to 12</td>
<td>44 (20.7%)</td>
<td>7 (5.3%)</td>
</tr>
<tr>
<td>13 to 15</td>
<td>122 (57.3%)</td>
<td>50 (37.9%)</td>
</tr>
<tr>
<td>16 to 18+</td>
<td>47 (22.1%)</td>
<td>75 (56.8%)</td>
</tr>
</tbody>
</table>

With a Pearson's Chi-squared value of 46.981 and a p-value of <0.001, the age categories of both groups is statistically different. The comparator group are significantly older than the programme group; age standardisation may be required for comparison of SDQ scores, as it is known that age is a related factor.
to the SDQ score. The mean age for the programme group at baseline was 13.99 with 95% confidence interval of (13.75, 14.24) and for the comparator group is 15.83 with 95% confidence interval of (15.45, 16.21). As the ages for each stage of the research was calculated using the start date, these results are statistically different at each time point.

**Figure A1-2 Age of Respondents**

<table>
<thead>
<tr>
<th>Area</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cavan/Monaghan</td>
<td>22 (10.3%)</td>
<td>7 (5.3%)</td>
</tr>
<tr>
<td>Cork</td>
<td>13 (6.1%)</td>
<td>9 (6.8%)</td>
</tr>
<tr>
<td>Dublin</td>
<td>78 (36.6%)</td>
<td>70 (53.0%)</td>
</tr>
<tr>
<td>Galway/Roscommon</td>
<td>15 (7.0%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td>Kildare/Wicklow</td>
<td>7 (3.3%)</td>
<td>6 (4.5%)</td>
</tr>
<tr>
<td>Limerick</td>
<td>19 (8.9%)</td>
<td>10 (7.6%)</td>
</tr>
<tr>
<td>Louth</td>
<td>16 (7.5%)</td>
<td>13 (9.8%)</td>
</tr>
<tr>
<td>Meath</td>
<td>38 (17.8%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td>Kerry</td>
<td>1 (0.5%)</td>
<td>0 (0.0%)</td>
</tr>
</tbody>
</table>
Westmeath 3 (1.4%) 17 (12.9%)
Offaly 1 (0.5%) 0 (0.0%)

Pearson's Chi-Squared test had a value of 61.258 with a p-value of <0.001, showing a significant difference in the spread of areas between the two groups. It should also be noted that these locations are for the start point only, and there is no information on whether participants moved at all through their nine month period in the research.

Figure A1-3 Area of Respondents
The two groups remain statistically different when area is reduced to province, with a Pearson’s Chi-squared value of 13.767 and p-value of 0.003. Again, there is no information available on whether participants remained in the same geographical area throughout the study.

![Figure A1-4 Province of Respondents](image)

**A1.4 Education / Work Status**

<table>
<thead>
<tr>
<th>Current Status</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td>School</td>
<td>171 (80.3%)</td>
<td>80 (61.5%)</td>
</tr>
<tr>
<td>Alternative Education</td>
<td>12 (5.6%)</td>
<td>2 (1.5%)</td>
</tr>
<tr>
<td>Training Course</td>
<td>3 (1.4%)</td>
<td>8 (6.2%)</td>
</tr>
<tr>
<td>Employment</td>
<td>0 (0.0%)</td>
<td>2 (1.5%)</td>
</tr>
<tr>
<td>Not in Ed/Em/Tr</td>
<td>26 (12.2%)</td>
<td>17 (13.1%)</td>
</tr>
<tr>
<td>Unemployed</td>
<td>1 (0.5%)</td>
<td>18 (13.8%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>0 (0.0%)</td>
<td>3 (2.3%)</td>
</tr>
</tbody>
</table>
Pearson's Chi-squared test resulted in a value of 47.180 with a p-value of <0.001, meaning there is a statistically significant difference in the spread of status between the two groups; this may be reduced if categories are taken together and thus make the groups comparable over this category.

![Education Status of Respondents](image)

**Figure A1-5 Education Status of Respondents**

<table>
<thead>
<tr>
<th>Education Status of Respondents</th>
<th>In Education/Employment/Training</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>166 (87.3%)</td>
<td>92 (72.4%)</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>27 (12.7%)</td>
<td>35 (27.6%)</td>
<td></td>
</tr>
</tbody>
</table>

A Pearson's Chi-squared value with Yates' continuity correction was 10.843 with significance of p=0.001. There was a statistically significant difference between the groups in terms of the education/employment status. This is likely due to the age differences between the groups.

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A1.5 Education Welfare

This question was only asked of the programme group who were still engaged in education, with 182 responses in total. Of those 182, 34 (18.7%) were involved with an EWO and 148 (81.3%) were not. As this question was not asked of the comparator group, there is no comparison available.
**A1.6 Child Protection**

Within the programme group, 38 young people (17.8%) were in care at the start of the programme. Within the comparator group, this figure is 9 (6.9%), which is a statistically significant difference (Pearson’s Chi-squared test value of 9.627 and p-value = 0.008).

![Figure A1-8 Care Status of Respondents](chart.png)

**A1.7 Current Placement**

<table>
<thead>
<tr>
<th>Placement</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>At home</em></td>
<td>164 (77.0%)</td>
<td>114 (87.7%)</td>
</tr>
<tr>
<td><em>Living with extended family</em></td>
<td>25 (11.7%)</td>
<td>12 (9.2%)</td>
</tr>
<tr>
<td><em>Foster Care</em></td>
<td>22 (10.3%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td><em>Residential Care</em></td>
<td>1 (0.5%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td><em>Supported Lodgings</em></td>
<td>1 (0.5%)</td>
<td>1 (0.8%)</td>
</tr>
<tr>
<td><em>Other</em></td>
<td>0 (0.0%)</td>
<td>1 (0.8%)</td>
</tr>
<tr>
<td><em>Unknown</em></td>
<td>0 (0.0%)</td>
<td>2 (1.5%)</td>
</tr>
</tbody>
</table>

Pearson’s Chi-squared test returned a value of 20.687 with a p-value of 0.002, which shows there is a statistically significant difference in the spread of placements between the programme and comparator groups.
Figure A1-9 Placement of Respondents

<table>
<thead>
<tr>
<th>Placement</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td>With family</td>
<td>189 (88.7%)</td>
<td>126 (99.2%)</td>
</tr>
<tr>
<td>In Care</td>
<td>24 (11.3%)</td>
<td>1 (0.8%)</td>
</tr>
</tbody>
</table>

Pearson's Chi-squared value with Yates' continuity correction was 11.335, with a p-value of 0.001, showing a statistically significant difference between the two groups.
A1.8 Legal Status

<table>
<thead>
<tr>
<th>Legal Status</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td>No care order</td>
<td>163 (76.5%)</td>
<td>112 (86.8%)</td>
</tr>
<tr>
<td>Voluntary care order</td>
<td>20 (9.4%)</td>
<td>7 (5.4%)</td>
</tr>
<tr>
<td>Full care order</td>
<td>17 (8.0%)</td>
<td>2 (1.6%)</td>
</tr>
<tr>
<td>Supervision order</td>
<td>4 (1.9%)</td>
<td>1 (0.8%)</td>
</tr>
<tr>
<td>Special care order</td>
<td>1 (0.5%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td>Family support case</td>
<td>6 (2.8%)</td>
<td>6 (4.7%)</td>
</tr>
<tr>
<td>Other</td>
<td>2 (0.9%)</td>
<td>1 (0.8%)</td>
</tr>
</tbody>
</table>

When the groups were compared, a Pearson's Chi-squared value of 10.707 resulted, with a p-value of 0.098, meaning there is no statistical difference between the groups in terms of legal status. This means the groups were comparable over this variable.
Figure A1-11 Legal Status of Respondents

A1.9 Care History / Risk
Within the programme group 23.0% (49 young people) had a history of care, compared to 13.2% (17 young people) in the comparator group. This gave a Pearson's Chi-squared value of 11.081 with a p-value of 0.004, meaning there was a statistical difference between these groups.

Figure A1-12 Care History Status of Respondents
For those at risk of care, 27.5% (49 young people) of a total of 178 in the programme group and 17.4% (21 young people) of a total of 121 in the comparator group were at risk. This resulted in a Pearson’s Chi-squared value of 7.592 with a p-value of 0.055, meaning there was no statistical difference between these groups.¹

Figure A1-13 Respondents Risk of Care Status

Note: It should be noted that a standard measure of risk of care was not employed across both groups, while YAP draws on specific risk of care measures (Hardiker scale), the measure of risk of care applied to the comparator group who are not engaged with a service are therefore not subject to standardised scales in this regard and may be based on the subjective perceptions of gatekeepers.

A1.10 Current Household Circumstances

<table>
<thead>
<tr>
<th>Household</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two parent household</td>
<td>62 (31.5%)</td>
<td>62(49.2%)</td>
</tr>
<tr>
<td>Single parent household</td>
<td>109 (55.3%)</td>
<td>53(42.1%)</td>
</tr>
<tr>
<td>Living with extended family</td>
<td>14 (7.1%)</td>
<td>10(7.9%)</td>
</tr>
<tr>
<td>Living with partner</td>
<td>11 (5.6%)</td>
<td>1(0.8%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>1 (0.5%)</td>
<td>0(0.0%)</td>
</tr>
</tbody>
</table>

There is a statistically significant difference between the two groups in terms of the type of household they resided in at the start of the study, with a Pearson’s Chi-squared value of 14.449 and associated p-value of 0.006. Thus the groups
may need adjustment by this variable when it comes to analysis of SDQs across the two groups.

![Current Household Circumstances of Respondents](image)

**Figure A1-14 House Circumstances of Respondents**

### A1.11 Primary Carer Employment

<table>
<thead>
<tr>
<th>Employment Status</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Carer/Domiciliary Carer</em></td>
<td>5 (2.6%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td><em>Employee (inc. Apprenticeship)</em></td>
<td>30 (15.3%)</td>
<td>47 (37.3%)</td>
</tr>
<tr>
<td><em>Home duties/Looking after family</em></td>
<td>112 (57.1%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td><em>Long term sick or disability</em></td>
<td>11 (5.6%)</td>
<td>3 (2.4%)</td>
</tr>
<tr>
<td><em>On state training scheme (inc. CE)</em></td>
<td>1 (0.5%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td><em>Retired</em></td>
<td>3 (1.5%)</td>
<td>1 (0.8%)</td>
</tr>
<tr>
<td><em>Self employed</em></td>
<td>3 (1.5%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td><em>Student (full time)</em></td>
<td>2 (1.0%)</td>
<td>1 (0.8%)</td>
</tr>
<tr>
<td><em>Unemployed – actively seeking work</em></td>
<td>14 (7.1%)</td>
<td>72 (57.1%)</td>
</tr>
<tr>
<td><em>Other</em></td>
<td>15 (7.7%)</td>
<td>1 (0.8%)</td>
</tr>
<tr>
<td><em>Unknown</em></td>
<td>0 (0.0%)</td>
<td>1 (0.8%)</td>
</tr>
</tbody>
</table>

Although there is a statistically significant difference between the groups (Pearson’s Chi-squared value of 176.131 and p-value <0.001), this may be due to
the answering of the question in relation to unemployment (could be answered as ‘home duties/looking after family’ or ‘unemployed – actively seeking work’).

![Employment Status: Primary Carer](image)

**Figure A1-15 Employment Status of Primary Carers**

<table>
<thead>
<tr>
<th>Employment status of Primary Carer of Respondent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main</td>
</tr>
<tr>
<td>Carer/Domiciliary Carer</td>
</tr>
<tr>
<td>38 (21.0%)</td>
</tr>
</tbody>
</table>
Pearson’s Chi-squared with Yates’ continuity correction returned a value of 9.642 with a p-value of 0.002, thus there is a statistically significant difference between the two groups in terms of the employment status of the primary carer of respondents.

![Figure A1-16 Employment Status of Primary Carer of Respondent](image)

### A1.12 Medical Card

<table>
<thead>
<tr>
<th>Primary Carer Status</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full medical card</td>
<td>104 (53.3%)</td>
<td>104 (81.3%)</td>
</tr>
<tr>
<td>GP only card</td>
<td>19 (9.7%)</td>
<td>3 (2.3%)</td>
</tr>
<tr>
<td>None</td>
<td>10 (5.1%)</td>
<td>9 (7.0%)</td>
</tr>
<tr>
<td>Do not wish to specify</td>
<td>62 (31.8%)</td>
<td>10 (7.8%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>0 (0.0%)</td>
<td>2 (1.6%)</td>
</tr>
</tbody>
</table>

With a Pearson’s Chi-squared value of 39.026 and a p-value of <0.001, there is a statistically significant difference between the groups. However, this may be due to the large proportion of the programme group who did not wish to answer this question, thus the full picture on medical cards cannot be known without knowing the reasons behind a non-response.
A1.13 Conviction History

40 (19.1%) of the young people in the programme group reported a family member with a conviction, compared to 77 (59.2%) of the comparator group. However, 93 (44.5%) young people in the programme group and 7 (5.4%) of the comparator group had not responded to this question. Thus, the Pearson's Chi-squared value of 78.913 with p-value <0.001 must be interpreted with caution, as the high level of non-response may have caused bias.
A1.14 Substance Abuse History

84 (40.2%) of the programme group reported a family member with history of substance abuse, in comparison to 79 (60.8%) of the comparator group. Although there is a statistically significant difference in the spread of responses between the groups, there is a high level of non-response within the programme group (35.4%). As with conviction history above, there may be a large bias due to non-responses, leading to the Pearson’s Chi-squared value of 47.296 and a p-value of <0.001, which both lead to the conclusion that there is a statistically significant difference between the groups in response to this question.

Figure A1-19 Substance Abuse History of Respondents

A1.15 Health Issues

29.6% (63) of the young people in the programme group had a diagnosis of disability or mental health issue, with 4.2% (9) awaiting assessment at the beginning of the study. In the comparator group, 16.2% (20) of the young people had a diagnosis, with 0.8% (1) awaiting assessment and 12.2% (15) with an unknown status. With a Pearson’s Chi-squared value of 34.861 and p-value of <0.001, there is a statistically significant difference between the rate of diagnosed illness between the groups, although the large number of unknowns in the comparator group may have biased this result.
<table>
<thead>
<tr>
<th>Specific Diagnosis</th>
<th>Programme</th>
<th>Comparator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sensory impairment</td>
<td>0 (0.0%)</td>
<td>1 (4.2%)</td>
</tr>
<tr>
<td>Dyslexia</td>
<td>6 (9.7%)</td>
<td>4 (16.7%)</td>
</tr>
<tr>
<td>ADD/ADHD</td>
<td>18 (29.0%)</td>
<td>10 (41.7%)</td>
</tr>
<tr>
<td>Autism/Aspergers</td>
<td>6 (9.7%)</td>
<td>3 (12.5%)</td>
</tr>
<tr>
<td>Other mental health impairment</td>
<td>12 (19.4%)</td>
<td>1 (4.2%)</td>
</tr>
<tr>
<td>Intellectual disability</td>
<td>10 (16.1%)</td>
<td>1 (4.2%)</td>
</tr>
<tr>
<td>Other</td>
<td>9 (14.5%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>0 (0.0%)</td>
<td>4 (16.7%)</td>
</tr>
</tbody>
</table>

With a Pearson’s Chi-squared value of 23.071 and a p-value of 0.003, there is a statistically significant difference in the spread of diagnosed illness across the groups.

*Figure A1-20 Mental Health/ Disability Diagnosis of Respondents*
A1.16 Service Utilisation

This question only pertained to the programme group, so no comparisons were carried out. Within the programme group, 98 young people (46.0%) engaged at least once per week in other services.

<table>
<thead>
<tr>
<th>Service Used</th>
<th>Programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAMHS</td>
<td>21 (21.4%)</td>
</tr>
<tr>
<td>Counselling/Psychologist</td>
<td>14 (14.3%)</td>
</tr>
<tr>
<td>Family support case</td>
<td>2 (2.0%)</td>
</tr>
<tr>
<td>Family support worker</td>
<td>9 (9.2%)</td>
</tr>
<tr>
<td>Garda Youth Division</td>
<td>9 (9.2%)</td>
</tr>
<tr>
<td>Resource Centre</td>
<td>1 (1.0%)</td>
</tr>
<tr>
<td>Social Work</td>
<td>9 (9.2%)</td>
</tr>
<tr>
<td>Sports/social club</td>
<td>8 (8.2%)</td>
</tr>
</tbody>
</table>
Youth project 13 (13.3%)
Other agency 12 (12.2%)
Pearson's Chi-squared value of 17.823 and a p-value of <0.001, there is a statistically significant difference between the groups in terms of arrest history.

Figure A1-24 Arrest History
Appendix 2: Comparator SDQ Scoring Data

This appendix presents scoring information from SDQ analysis. The presented scores include total difficulties scores, along with sub-scale scores at baseline and end-point for young people in the comparator group. A comparison over time is also presented for total difficulties and sub-scales. In addition, impact factor scoring is also presented for young people in the comparator group. ‘Average’ is defined as scores which are close to average – clinically significant problems in this area are unlikely; ‘borderline’ is defined as scores which are slightly raised/low – may reflect clinically significant problems; ‘at risk’ is defined as scores which are high/low – there is a substantial risk of clinically significant problems in this area.

<table>
<thead>
<tr>
<th>Self Completed Version</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Difficulties Score</td>
<td>0 – 15</td>
<td>16 – 19</td>
<td>20 – 40</td>
</tr>
<tr>
<td>Emotional Symptoms Score</td>
<td>0 – 5</td>
<td>6</td>
<td>7 – 10</td>
</tr>
<tr>
<td>Conduct Problem Score</td>
<td>0 – 3</td>
<td>4</td>
<td>5 – 10</td>
</tr>
<tr>
<td>Hyperactivity Score</td>
<td>0 – 5</td>
<td>6</td>
<td>7 – 10</td>
</tr>
<tr>
<td>Peer Problem Score</td>
<td>0 – 3</td>
<td>4 – 5</td>
<td>6 – 10</td>
</tr>
<tr>
<td>Prosocial Behaviour Score</td>
<td>6 – 10</td>
<td>5</td>
<td>0 – 4</td>
</tr>
</tbody>
</table>

Table A2-1 Scoring of Strengths and Difficulties Questionnaires

A2:1 Strengths and Difficulties Scores

Programme Baseline

This section presents the total difficulties composite scores for the baseline, in addition to the scores across sub-scales, for comparator young people. The results are presented as categorical (the number and percentage of valid cases per test) and scores (based on SDQ scoring and scales).

Total Difficulties Score

The baseline total difficulties scores for the comparator group are presented below. The mean score is 13.60, falling into the higher end of the ‘average’ category.

<table>
<thead>
<tr>
<th>Total Difficulties Score Categorical Results (Baseline)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
<td>89 (68.5%)</td>
<td>23 (17.7%)</td>
<td>18 (13.8%)</td>
</tr>
</tbody>
</table>
Total Difficulties Score (Baseline)

<table>
<thead>
<tr>
<th>Comparator (Self Complete)</th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>13.60</td>
<td>(12.56, 14.64)</td>
<td>6.124</td>
</tr>
</tbody>
</table>

*Table A2-2 Baseline Total Difficulties Scores*

**Emotional Symptoms Scale**

The baseline emotional symptoms scores for the comparator group are presented below. The mean score is 3.09, falling into the ‘average’ category.

<table>
<thead>
<tr>
<th>Comparator (Self Complete)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>107 (81.7%)</td>
<td>10 (7.6%)</td>
<td>14 (10.7%)</td>
</tr>
</tbody>
</table>

*Table A2-3 Baseline Emotional Symptoms Scores*

**Conduct Problem Scale**

The baseline conduct problems scores for the comparator group are presented below. The mean score is 3.39, falling into the ‘borderline’ category.

<table>
<thead>
<tr>
<th>Comparator (Self Complete)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>76 (58.0%)</td>
<td>18 (13.7%)</td>
<td>37 (28.2%)</td>
</tr>
</tbody>
</table>

*Table A2-4 Baseline Conduct Problem Scores*

**Hyperactivity Scale**

The baseline hyperactivity scores for the comparator group are presented below. The mean score is 5.11, falling into the ‘borderline’ category.

<table>
<thead>
<tr>
<th>Comparator (Self Complete)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>77 (59.2%)</td>
<td>15 (11.5%)</td>
<td>38 (29.2%)</td>
</tr>
</tbody>
</table>

*Table A2-5 Baseline Hyperactivity Scores*
Peer Problems Scale
The baseline peer problems scores for the comparator group are presented below. The mean score is 2.01, falling into the ‘average’ category.

<table>
<thead>
<tr>
<th>Peer Problem Score Categorical Results (Baseline)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
<td>112 (84.8%)</td>
<td>13 (9.8%)</td>
<td>7 (5.3%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Peer Problem Score (Baseline)</th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
<td>2.01</td>
<td>(1.72, 2.30)</td>
<td>1.680</td>
</tr>
</tbody>
</table>

*Table A2-6 Baseline Peer Problems Scores*

Pro-social Behaviour Scale
The baseline pro-social behaviour scores for the comparator group are presented below. The mean score is 13.60, falling into the ‘average’ category.

<table>
<thead>
<tr>
<th>Pro-social Behaviour Score Categorical Results (Baseline)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
<td>101 (76.5%)</td>
<td>12 (9.1%)</td>
<td>19 (14.4%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pro-social Behaviour Score (Baseline)</th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
<td>6.97</td>
<td>(6.63, 7.31)</td>
<td>1.991</td>
</tr>
</tbody>
</table>

*Table A2-7 Baseline Pro-social Behaviour Scores*

Programme End-Point
This section presents the total difficulties composite scores for the SDQ end-point, in addition to the scores across sub-scales, for comparator young people. The results are presented as categorical (the number and percentage of valid cases per test) and scores (based on SDQ scoring and scales).

Total Difficulties Score
The end-point total difficulties scores for the comparator group are presented below. The mean score is 11.66, remaining in the ‘average’ category.

<table>
<thead>
<tr>
<th>Total Difficulties Score Categorical Results (End-Point)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
<td>53 (76.8%)</td>
<td>9 (13.0%)</td>
<td>7 (10.1%)</td>
</tr>
</tbody>
</table>
Emotional Symptoms Scale

The end-point emotional symptoms scores for the comparator group are presented below. The mean score is 2.96, falling into the ‘average’ category.

<table>
<thead>
<tr>
<th>Emotional Symptoms Score Categorical Results (End-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Emotional Symptoms Score (End-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
</tr>
</tbody>
</table>

Conduct Problems Scale

The end-point conduct problem scores for the comparator group are presented below. The mean score is 2.68, falling into the ‘average’ category.

<table>
<thead>
<tr>
<th>Conduct Problem Score Categorical Results (End-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Conduct Problem Score (End-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
</tr>
</tbody>
</table>

Hyperactivity Scale

The end-point hyperactivity scores for the comparator group are presented below. The mean score is 4.17, falling into the ‘average’ category.

<table>
<thead>
<tr>
<th>Hyperactivity Score Categorical Results (End-Point)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
</tr>
</tbody>
</table>
### Hyperactivity Score (End-Point)

<table>
<thead>
<tr>
<th>Comparator (Self Complete)</th>
<th>Mean Score</th>
<th>95% Confidence Interval</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>4.17</td>
<td>(3.59, 4.75)</td>
<td>2.467</td>
</tr>
</tbody>
</table>

*Table A2-11 End-Point Hyperactivity Scores*

### Peer Problems Scale

The end-point peer problems scores for the comparator group are presented below. The mean score is 1.84, falling into the 'average' category.

<table>
<thead>
<tr>
<th>Peer Problem Score Categorical Results (End-Point)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
<td>60 (88.2%)</td>
<td>7 (10.3%)</td>
<td>1 (1.5%)</td>
</tr>
</tbody>
</table>

*Table A2-12 End-Point Peer Problems Scores*

### Pro-social Behaviour Scale

The end-point pro-social behaviour scores for the comparator group are presented below. The mean score is 7.5, falling into the ‘average’ category.

<table>
<thead>
<tr>
<th>Pro-social Behaviour Score Categorical Results (End-Point)</th>
<th>Average</th>
<th>Borderline</th>
<th>At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparator (Self Complete)</td>
<td>60 (87.0%)</td>
<td>5 (7.2%)</td>
<td>4 (5.8%)</td>
</tr>
</tbody>
</table>

*Table A2-13 End-Point Pro-social Behaviour Scores*
A2.2: Comparison over Time

As the scales/scores follow a normal distribution for each group, it was appropriate to compare means using paired-sample t-tests to evaluate the difference over time points. It should be noted that paired-sample t-tests require that the pair in question (e.g. total difficulties at baseline and total difficulties at end point) are non-missing. If either of the pair is missing for a respondent, it was not included in the calculation. Thus, some figures may not match with the figures above due to non-response.

Overall Score

Although the comparator group showed an average decrease over the same time period (baseline to end-point) of 1.181 \([-0.199, 2.561]\), \(t=1.708, p=0.092\), this was not found to be statistically significant.

![Figure A2-1 Comparison Over Time: Total Difficulties](image)

Emotional Symptoms Scale

While the comparator results showed an average decrease of 0.058 \([-0.455, 0.571]\), \(t=0.226, p=0.822\), this was not deemed to be statistically significant.
Although a small decrease of 0.406 $([-0.003, 0.815], t=1.980, p=0.052]$ was found for the comparator group over the same time period (baseline to end-point), this was not found to be statistically significant.

The comparator group showed a statistically significant change over the six month time period (baseline to end-point) with an average decrease of 0.750 $([0.104, 1.396], t=2.317, p=0.024]$. 

The comparator group showed a statistically significant change over the six month time period (baseline to end-point) with an average decrease of 0.750 $([0.104, 1.396], t=2.317, p=0.024]$. 
Although the comparator group average decrease of $0.083 \ [(-0.377, 0.544), t=0.361, p=0.719]$ over the same time period, this was not deemed to be statistically significant.

Interestingly, the comparator group showed a statistically significant change over the six month time period (baseline to end-point) with an average increase of $0.649 \ [(0.148, 1.149), t=2.584, p=0.012]$. 

Pro-social Behaviour Scale
Interestingly, the comparator group showed a statistically significant change over the six month time period (baseline to end-point) with an average increase of $0.649 \ [(0.148, 1.149), t=2.584, p=0.012]$. 

Figure A2-4 Comparison Over Time: Hyperactivity

Figure A2-5 Comparison Over Time: Peer Problems
4.5 Impact Factors

For the impact questions, a score of 0 is interpreted as ‘average’, a score of 1 is interpreted as ‘borderline’ and a score of between 2 and 10 is interpreted as ‘at risk’. The comparator group stayed within the ‘borderline’ category at all points through the study, showing no statistically significant differences.
Appendix 3:
Strengths and Difficulties Questionnaire I for Young Person

Strengths and Difficulties Questionnaire (for young people)

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of how things have been for you over the last six months.

Your Name................................................................................................... Male/Female

Date of Birth..........................................................

|                                                                                   | Not True | Somewhat True | Certainly True |
| Adam                                                                                   |         |              |               |
| I try to be nice to other people. I care about their feelings                        |         |              |               |
| I am restless, I cannot stay still for long                                           |         |              |               |
| I get a lot of headaches, stomach-aches or sickness                                  |         |              |               |
| I usually share with others (food, games, pens etc.)                                 |         |              |               |
| I get very angry and often lose my temper                                            |         |              |               |
| I am usually on my own. I generally play alone or keep to myself                    |         |              |               |
| I usually do as I am told                                                            |         |              |               |
| I worry a lot                                                                         |         |              |               |
| I am helpful if someone is hurt, upset or feeling ill                                |         |              |               |
| I am constantly fidgeting or squirming                                              |         |              |               |
| I have one good friend or more                                                       |         |              |               |
| I fight a lot. I can make other people do what I want                                 |         |              |               |
| I am often unhappy, down-hearted or tearful                                          |         |              |               |
| Other people my age generally like me                                               |         |              |               |
| I am easily distracted, I find it difficult to concentrate                           |         |              |               |
| I am nervous in new situations. I easily lose confidence                              |         |              |               |
| I am kind to younger children                                                        |         |              |               |
| I am often accused of lying or cheating                                              |         |              |               |
| Other children or young people pick on me or bully me                                 |         |              |               |
| I often volunteer to help others (parents, teachers, children)                      |         |              |               |
| I think before I do things                                                           |         |              |               |
| I take things that are not mine from home, school or elsewhere                       |         |              |               |
| I get on better with adults than with people my own age                               |         |              |               |
| I have many fears, I am easily scared                                               |         |              |               |
| I finish the work I’m doing. My attention is good                                    |         |              |               |

Overall, do you think that you have difficulties in one or more of the following areas: emotions, concentration, behaviour or being able to get on with other people?
If you have answered "Yes", please answer the following questions about these difficulties:

- **How long have these difficulties been present?**
<table>
<thead>
<tr>
<th>Less than a month</th>
<th>1-5 months</th>
<th>6-12 months</th>
<th>Over a year</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

- **Do the difficulties upset or distress you?**
<table>
<thead>
<tr>
<th>Not at all</th>
<th>Only a little</th>
<th>Quite a lot</th>
<th>A great deal</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

- **Do the difficulties interfere with your everyday life in the following areas?**
<table>
<thead>
<tr>
<th>HOME LIFE</th>
<th>FRIENDSHIPS</th>
<th>CLASSROOM LEARNING</th>
<th>LEISURE ACTIVITIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

- **Do the difficulties make it harder for those around you (family, friends, teachers, etc.)?**
<table>
<thead>
<tr>
<th>Not at all</th>
<th>Only a little</th>
<th>Quite a lot</th>
<th>A great deal</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

Thank you very much for your help

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Appendix 4:
Guiding Questions for Interview Series

**Questions for Young Person**

Tell me about your experience since being on the YAP programme?

And can you tell me about your experience of having a YAP Advocate?

How many hours each week did you spend with your Advocate, on average? Was that enough time?

Do you think you will keep up the activities you did with your Advocate?

Did you meet new people in the community that you will keep in touch with?

Is there anything you would like to do but were not able to do? If so, why?

How do you feel now that your time with the Advocate is at an end? Were you prepared for the disengagement process?

What did you enjoy most about the programme?

What did you least enjoy about the programme?

Do you think you have changed since being on the YAP programme? (Peer and family relationships, school)

**Questions for Advocate**

Do you think your young person was a good match do you? Why?

How many hours did you spend with your young person each week (average)?

Is there anything else that you would like to have been able to do but were not? Why?

What challenges did you face in your role?

What did you enjoy most about working with the young person?

What did you least enjoy about working with the young person?

Do you think your young person will keep up these activities now that the programme has ended?
Who are the community role models for young person?

Do you think your young person has changed since joining the programme? If so, how?

Was the young person prepared for the disengagement process?

How did you find the disengagement process?

Did you feel supported in your role as Advocate?

Is there anything else you would change or you think would have worked better if it were different [in relation to the time spent with young person]?

Reflecting on the overall experience, what are your thoughts on the YAP programme in relation to this young person?

Questions for Parent/Guardian

Do you think your Advocate was a good match for your young person?

How many hours a week did your young person spend on average with their Advocate?

Do you think that was sufficient? Why?

Were you happy with the activities your person did with their Advocate?

Do you think your young person will keep those activities up now that the programme has ended?

Was the young person prepared for the disengagement process? How did that go?

What did your young person get out the YAP programme?

Do you think your young person has changed since joining the programme? If so, how?

Is your young person engaged with any other groups or similar services within the community now?

Has your young person made any contacts or role models in the community?

What did you get from the YAP programme?
What did you like most about the YAP programme?

What did you like least about the YAP programme?

Did you feel supported?

Is there anything you would change or prefer to see done differently?
Appendix 5:
Focus Groups Guide

Focus Group Guide
The purpose of the Focus groups is to record reflections of middle management on their work within the organisation and the YAP intervention model with Young people and their families.

The content of the Focus Groups will cover two main areas:

The relationship between YAP (the Organisation) and the roles and responsibilities of Case Managers.
The Programme effectiveness, strengths and weaknesses.

This will cover:
The relationship between YAP (the Organisation) and Case Managers.

• How would you describe a Case Managers’ role and responsibilities?
• What from your experience and background, that you brought to your role as Case Manager have you, or do you, find the most useful?
• What are the main organisational policies that govern your work? How effective / supportive do you find these policies?
• Any reflections / comments on your Induction and/or professional development for the role?
• What Support and Supervision is available to you and is it effective?
• What accountability processes and structures are in place and how effective are they?

ANY OTHER ISSUES YOU CONSIDER IMPORTANT IN THIS AREA?

The Programme effectiveness, strengths and weaknesses.

• In your opinion how appropriate is the training for Advocates? In what ways do you notice it is effective / not effective?
• In regard to the Intervention, how appropriate and effective is the following: length; different stages; matching; time in the young person's life / stage of development; disengagement processes?
• In your opinion what are the strengths and weaknesses of Advocate’s Reporting and accountability requirements?
• In your opinion what ‘type’ of young person is best suited / least suited to the YAP intervention?

ANY OTHER ISSUES YOU CONSIDER IMPORTANT IN THIS AREA?
Appendix 6:
Survey of Advocates

Survey of Advocates

Description:
As part of our evaluation of YAP Ireland, we are inviting all Advocates to complete a short survey focusing on their experiences of working with YAP Ireland. This survey is designed to gather some information about you, your work as an Advocate and the time you spend with your young person(s).

We would encourage all Advocates to complete this short survey, as it will provide important information for the evaluation.

All information collected is anonymous and will be kept confidential and secure (in a locked cabinet or in password protected computer files). If you would like to contact the research team (Maurice, Kathryn or Nuala), you can phone or text Maurice Devlin at 087 9693793 or email maurice.devlin@nuim.ie Thank you for your help with the research.

Section A: Background Information
This section provides us with background information about Advocates working with YAP.

1. Gender
   - Male ☐
   - Female ☐

2. Age Range
   - 20-29 ☐
   - 30-39 ☐
   - 40+ ☐

3. Your Area:
   - Cavan/Monaghan ☐
   - Cork ☐
   - Dublin ☐
Galway/ Roscommon ☐
Kildare/ Wicklow ☐
Limerick ☐
Louth ☐
Meath ☐

4. Community:
- Urban ☐
- Suburban ☐
- Rural/ Small Town ☐

5. Previous Work Experience:
- Community/ Youth Work ☐
- Social Services ☐
- Health ☐
- Sports & Recreation ☐
- Education ☐
- Childcare ☐
- Arts ☐
- Technology ☐
- Retail ☐
- Food/ Drink ☐
- Other ☐

6. What is your highest level of education you have completed?
- Leaving Certificate ☐
- FETAC, HETAC, Diploma ☐
- Bachelor's Degree ☐
- Postgraduate Diploma/ Degree ☐
- Postgraduate Research Degree (Mlitt, PhD) ☐
7. Do you have a second job, apart from your work as an Advocate?

Yes ☐
No ☐

8. What area is this job in?

Community/ Youth Work ☐
Social Services ☐
Health ☐
Sports & Recreation ☐
Education ☐
Childcare ☐
Arts ☐
Technology ☐
Retail ☐
Food/ Drink ☐
Other ☐

Section B: Working with YAP
This section provides us with information about your role as an Advocate.

9. How many young people are you currently working with?

1 ☐
2 ☐
3 ☐
More than 3 ☐

10. How many hours a week do you typically spend with your young person?

0-5 hours ☐
11. What kinds of activities do you do with your young person? Please tick as many boxes as apply:

- Sports (soccer, tennis etc.)
- Entertainment (Cinema etc.)
- Food/ Drink (Coffee etc.)
- Education (Homework etc.)
- Other

If ‘Other’, please specify:

_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

12. Are there any activities that you would like to do, but have not been able to do? If so, please elaborate:

_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

13. What aspects of the YAP programme work well. Please rank in order of significance (1 = works best, and so forth).

_______________________________________________________________________________________________
_______________________________________________________________________________________________

221
14. What are the main challenges you are faced with in your role? Please rank in order of significance (1 = main challenge, and so forth).

_________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

15. Are there things you think would work better if they were different? If so, please elaborate:

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

How important are the following aspects of your work? Please tick one box for each of the following statements:

<table>
<thead>
<tr>
<th></th>
<th>Not Important</th>
<th>Somewhat Important</th>
<th>Very Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building confidence/ self-esteem in the young person</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Develop young person’s social skills</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Offering the young person new and worthwhile experiences</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Helping the young person with their education</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Helping young person to gain practical skills</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Encouraging the young person to take responsibility</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Giving the young person a voice in their life</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Enhancing the young person’s role as an active citizen</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Listening to what the young person has to say</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

How do you feel about your work as an Advocate? Please tick one box for each of the following statements:
I feel confident in my role
☐ ☐ ☐
I feel supported in my role
☐ ☐ ☐
I am a good match for my young person(s)
☐ ☐ ☐
I receive the training I need to do my job well
☐ ☐ ☐
I am given adequate feedback about my performance
☐ ☐ ☐
I am paid fairly for the work that I do
☐ ☐ ☐
I am very satisfied with my work as an Advocate
☐ ☐ ☐

16. Have you any further comments about your work as a youth Advocate?

_______________________________________________________________________________________________
_______________________________________________________________________________________________

*Thank you for taking the time to complete this survey*
Appendix 7:
2012 Outcomes and Cohort Document

**Youth Advocate Programmes Ireland** is a leading provider of intensive support programmes for young people and families. YAP Ireland uses a strengths based, family focused approach for young people with complex needs, leading to positive outcomes for the young people, their families and referral agents.

**Youth Advocate Programmes Ireland** was established in Ireland in 2002 in the areas of North Dublin, Galway, Roscommon and Mayo using a US based support model, YAP Inc. We are a registered charity and in 2012, we worked with 528 young people and their families across 16 counties.

**Unique features of YAP Model**

- Strengths based, needs led, wraparound, intensive support model with proven success.
- The flexibility of the service – “no eject, no reject policy” and never give-up approach.
- The ability to take in emergency cases and respond rapidly - e.g. Crisis Intervention Service.
- Six month model with Advocates dedicated to one case. The model means that new referrals are matched regularly without the service becoming blocked with long term cases.
- Ability to provide service in both urban and rural areas where there are fewer services for young people, families and other services to rely on when children are at risk.
- On-call service 24 hours a day, 7 days a week, 52 weeks a year.
- Recruit, train and employ Advocates from local communities on a fixed term basis.
- Outcomes measurement systems in place measuring the impact of the YAP service on young people and families.
- YAP Ireland carries out monitoring of the service twice during the lifetime of the case to ensure that parents/carers are happy with the service.
Can use existing management structures to set up services in new areas. We will invest in new areas and payment will only be necessary for places that are used.

**Cost Effectiveness**

YAP Ireland is an extremely cost-effective alternative to the high financial and emotional costs of care placements while achieving good outcomes for young people and families thereby reducing pressure on a range of services including HSE social work services, youth justice, education and child and adolescent mental health. For example, an average YAP place for 6 months costs approximately €10,000 – €11,000 in comparison to approximately €80k per year for foster care and at least €4k per week for private residential placements. The cost per place is tailored to meet the exact needs of the referral agency and the referrer will only be charged for the actual expenditure on the case.

**About the Model**

The YAP Model is a unique way of providing intensive, focused support to children, young people and families with a range of needs. The YAP model is based upon the development of a trust relationship built between a supportive, trained, skilled adult Advocate, the young person and their family. An individual service plan based on the strengths of the young person and their family is developed and offers a wraparound approach to address all aspects of the needs of the young person within their family and local community. YAP’s goal is to empower young people and their families with supports that will remain in place after programme involvement has ended. The model is flexible and can be adapted to meet the needs of a wide range of client groups.

**YAP Programmes**

We have developed programmes using the YAP model to address a range of service needs in partnership with the Irish State Health and Social Services (HSE). The programmes can be provided to a range of client groups including young people at risk of care or custody, young people with mild learning difficulties, mental health issues, drug misuse or those in custody moving to independent living.

- **Intensive Support Programme** is provided to young people aged 10-18 years at high risk of placement in care, secure care and custody (Level 3
and 4 on the Hardiker Scale). It provides intensive support of up to 15 hours a week for 6 months for the young person and family.

- **Family Support Programme** is provided to families in need of time-limited, focused support (Level 3 and 4 on the Hardiker Scale). The service provides support of 8 hours a week for 4 months focusing on goals set with the family.

- **Aftercare Support Programme** is provided to young people aged between 17 and 19 years who meet HSE criteria for Aftercare support. It provides support of 8 hours a week for 6 months to support the transition from care to independent living.

- **Access Support Programme** facilitates transport and support for children and families who are involved in access arrangements as agreed with the HSE.

- **Crisis Intervention Service** aims to provide a rapid response to a young person aged 8-18 years in crisis for a specific time period.

**Participation, Group Activities and Events**

Young people and parents/carers are involved in a range of groups and activities. The YAP Ireland Participation Strategy ensures that the voices of young people and families are able to influence YAP services and social policy issues that directly affect them such as Education, Drugs and Alcohol and Mental Health. See [www.yapireland.ie](http://www.yapireland.ie) and our Facebook page for reports, photos, music, drama, artwork and poetry by the young people and families or Follow @YAPIreland on Twitter.

To discuss the provision of a YAP programme within your area please contact CEO, Siobhán O’Dwyer on 01 8689180 or 087 2927994 or by email sodwyer@yapireland.ie