

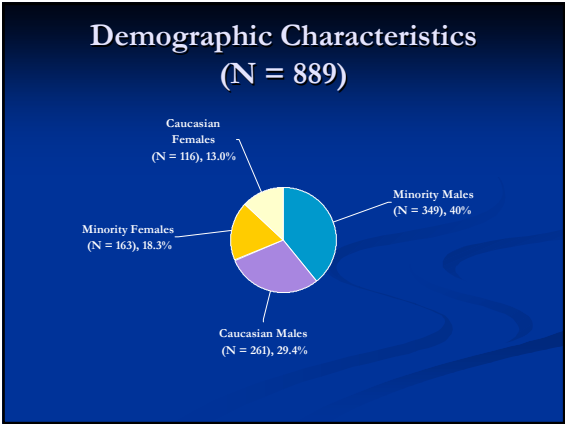
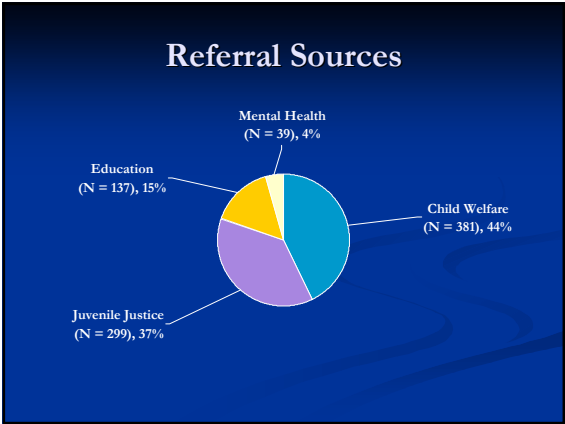
# The Link Between Process and Outcomes: The Dawn Project Experience

17<sup>th</sup> Annual Research and Training Conference  
March 1, 2004

# Background on the Dawn Project

- ### Dawn Project Eligibility Criteria
- Being a resident of Marion County, Indiana (which includes the city of Indianapolis).
  - Being between 5 and 17 years of age.
  - Having a DSM-IV diagnosis or special education label
  - Having functional impairments in at least two of the following domains: social, family, community, or school

- ### Eligibility Criteria Cont.
- Being involved in two or more child service systems (i.e., mental health, child welfare, juvenile justice, special education)
  - Being at risk for or already in a residential placement (Indiana Division of Mental Health, 1999).



# Predicting Success in a System of Care

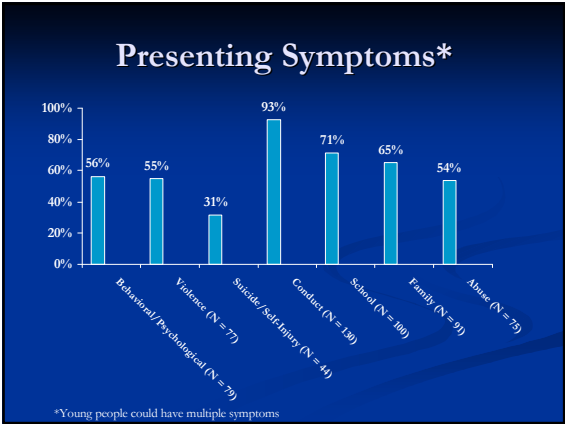
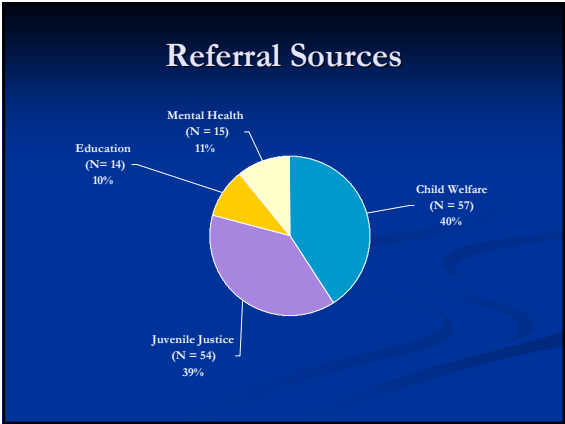
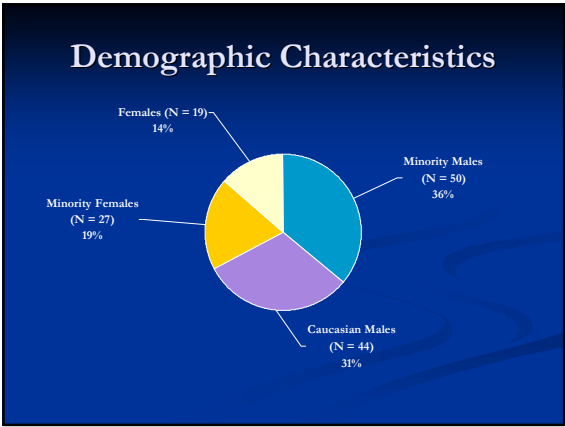
Eric R. Wright, Ph.D.,  
Harold E. Kooreman, M.A.,  
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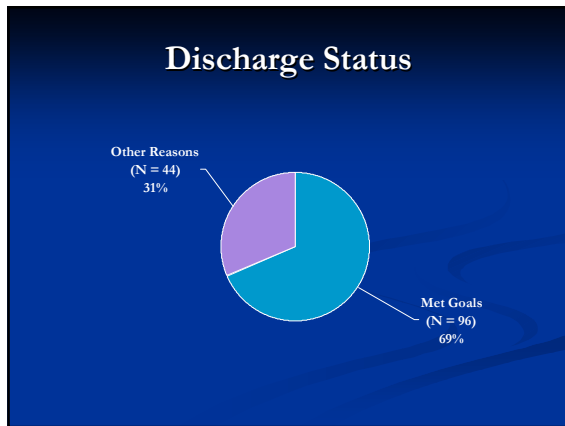
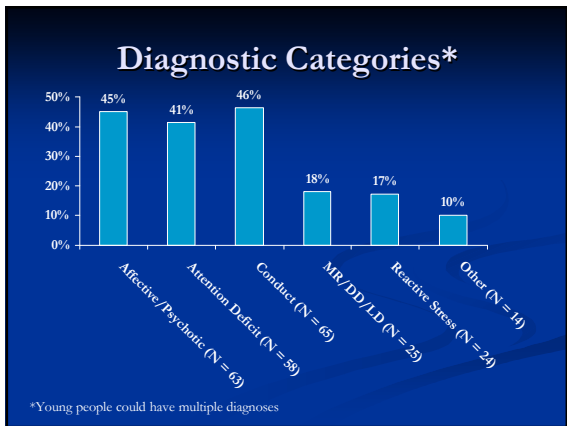
## Purpose

- A major question is whether the Dawn Project is appropriate and effective for all groups of young people referred.
- The purpose of this study was to examine the influence demographic, clinical, and referral source information would have on the likelihood of successful completion.

## Methods

- Subjects are 140 youth who have both interview data and discharge information.
- Coded demographic information, referral source, presenting symptoms, diagnoses, and final outcome
- Outcome was coded as discharge by meeting treatment goals or discharge for any other reason





- ### Logistic Regression of Outcomes\*
- Younger youth are more likely to leave having reached their treatment goals
  - Young people referred from education and juvenile justice were less likely to leave having reached their treatment goals
  - Young people with a MR/DD/LD diagnosis were more likely to leave having reached their treatment goals
  - Young people with an Attention Deficit or Other diagnosis were less likely to leave having reached their treatment goals.
- \*See Table 2 of handout

### Predicted Probabilities of Success by Age

Age at Enrollment	Probability of Success
5	96.7%
7	94.2%
9	89.9%
11	82.9%
13	72.7%
15	59.3%
17	44.4%

## Exploring How Systems of Care Influence a Community's Children's Social Services

Jeffrey A. Anderson, Ph.D. & Eric R. Wright, Ph.D.

### Purpose

To explore how the implementation of a system of care influences children's services within a community

## Methods

- Grounded theory: collecting data through interviews, looking for patterns and themes
- Constant comparison: supporting and refuting emergent themes, and gradually drawing conclusions from and about the connections among the data.

## Setting and Sampling

- Setting: Marion County & The Dawn Project
- Sampling procedures
  - Purposeful
  - System level leaders
- Participants: 20 in-depth interviews

## Data Collection

- Semi-structured interviews
- Audio taping & transcription
- Checking
- Coding process
  - Reliability checks: .78 - .94
- Outside reader

## Findings

- Positive Impact at the Community Level
- Challenges to Implementation
- Ambivalent Findings

## Positive Findings

- Increased collaboration and service coordination
- Loosening fiscal constraints
- Importance of family involvement
- Enhancing strengths approaches
- Ecological responses

## Positive Impact at the Community Level

- Increased collaboration and service coordination

“This project has encouraged us all to find new and better ways to do business.”

### Positive Impact at the Community Level

- Loosening fiscal constraints

“I think [Dawn has] contributed to bringing down residential costs in the community and supported community-based work.”

### Positive Impact at the Community Level

- Importance of family involvement

“I think there is a big push to make sure that we have the families involved from the front end. Where before Dawn and the changes that that brought about, it was kind of an afterthought to make sure the families were included.”

### Positive Impact at the Community Level

- Enhancing strengths approaches

“When I first got into social work...there was an attitude that we were expected to tell families what they needed...Certainly [practitioners] assess the situation, but asking people what they need is clearly a positive trend...”

### Positive Impact at the Community Level

- Ecological responses

“...so often systems do this: you commit a child to the department or agency, you treat *the child*, then you have a *cured* child and you place them in the same environment....there has been no change in that, then we all look back and amazingly the child fails. I think Dawn looks at the concept of working with the child’s environment as well as the child.”

### Challenges to Implementation

- Elitism
- Enabling parents
- Urban legends
  
- Resistance

### Challenges to Implementation

- Elitism

“Maverick”

“They’re out there doing their own thing.”

“Dawn Project leaders need to spend time sitting, talking, listening with the community providers. Because that breakdown...of being seen as elitist and the golden child...”

## Challenges to Implementation

- Enabling parents

“There’s a difference between teaching people how to fish and fishing for them”.

## Challenges to Implementation

- Urban legends

“The perception was, you want a new house, you want new carpet, you want new something, just get into the Dawn Project. They’ll buy you whatever you want -- that’s exaggerated; that was not even true.”

## Challenges to Implementation

- Resistance

“It is important for us to be fair...I think there is resistance.”

“There are some systems that are very resistant to [Dawn].”

Resistance is “somewhat personality issues...but it’s also legislative issues, rules and regulation issues.”

## Ambivalent Themes

- Issues that appeared to be beyond the capacity of the Dawn Project

- Not doing more

- Reducing the use of residential
- Blending funding

- Comments directed to the children’s services arena

- Moving away from a failure based systems

## Ambivalent Themes

“In spite of the Dawn model, the overall system continues to be failure-based and not enough focus is being given to prevention.”

“It’s a worthy project but it doesn’t do enough for prevention.”

## Discussion

- Multiple and varied impact
- Climate for change
- Continued resistance at multiple levels
- The importance of building trust
- Emergence of the system of care principles

# Service Utilization, Costs, and Success in the Dawn Project

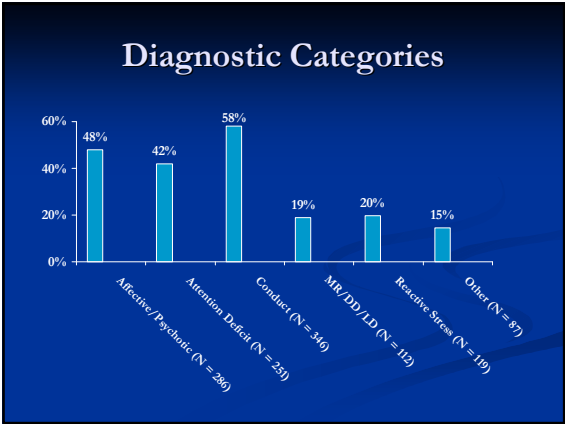
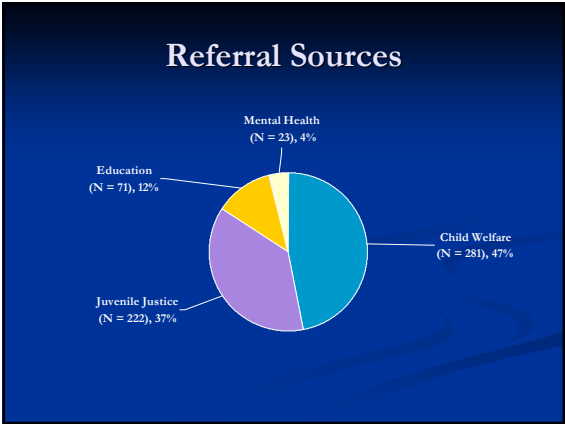
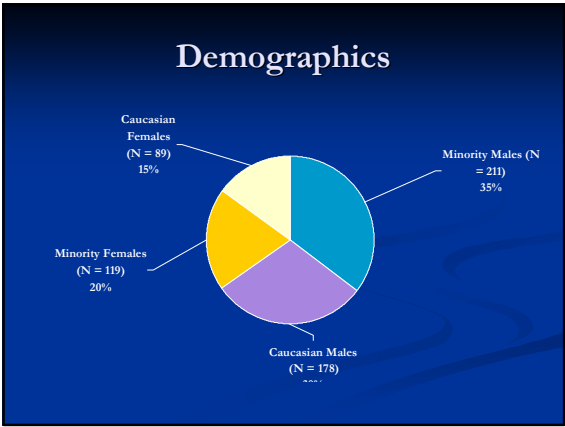
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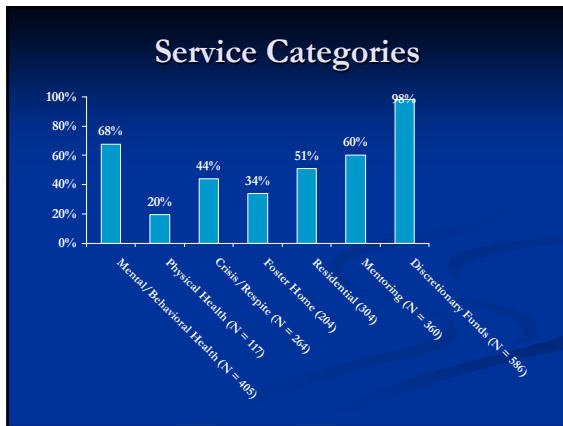
## Background

- The Dawn Project is a system of care for youth and their families in Indianapolis, Indiana.
- Funds are provided by the referring agencies of child welfare, juvenile justice, education, and mental health.
- The aim of this study is to describe the overall patterns of service use and costs and examine their association with successful treatment outcomes.

## Methods

- Analyzed 597 discharge episodes between May 1, 1997 and October 18, 2003.
- Demographic, clinical, service, and cost information was obtained from The Clinical Manager
- Services were collapsed into 8 categories
- For some analyses cost was collapsed into 3 categories based on the 33<sup>rd</sup> and 66<sup>th</sup> percentile
- Outcomes were collapsed into 2 categories: discharged by meeting treatment goals and discharged for any other reason

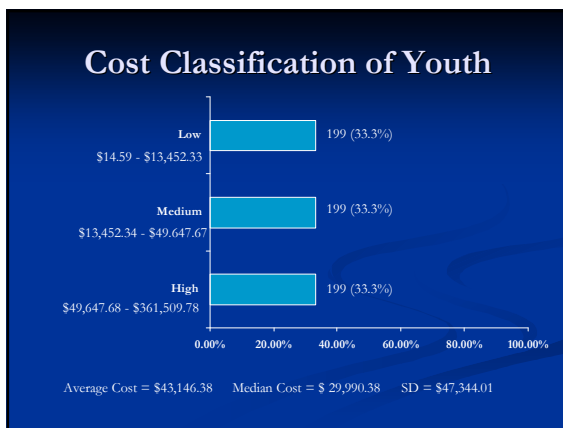




### Descriptive Statistics of Service and Cost Variables

Service Categories	Minimum	Maximum	Mean	Median	SD
Mental/Behavioral Health	0.0	58,137.50	3,548.301	1,198.00	5,595.44
Physical Health	0.0	3,923.95	47.66	0.0	223.07
Crisis/Respite	0.0	132,658.00	2,350.80	0.0	8,787.21
Foster Care	0.0	90,619.00	5,999.72	0.0	13,078.39
Residential	0.0	275,984.00	222,050.43	1,290.59	36,536.16
Mentoring	0.0	77,971.00	5,495.39	800.50	10,985.97
Discretionary Funds	0.0	22,214.82	2,100.27	1,065.81	2,817.32
Service Coordination*	0.0	21,741.40	1,823.82	562.50	3,088.04
Total Cost (in dollars)	14.59	361,509.80	43,416.38	29,990.38	47,344.01
Number of Service Categories			3.8		1.5
Number of Months in Dawn			14.2		8.7

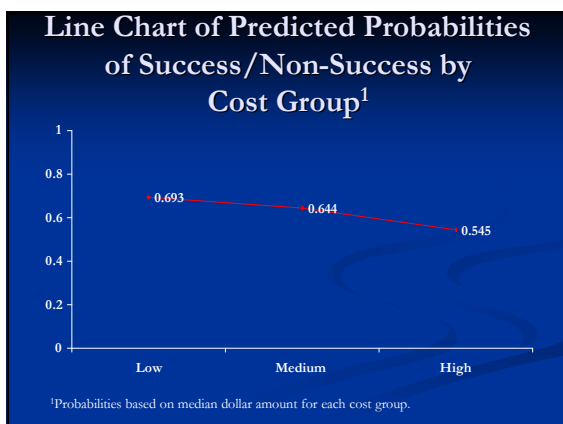
\*These costs represent service coordination activities not covered by Medicaid



### Logistic Regression of Low and High Cost Groups\*

- Young people in the low cost group are less likely to have long stays in the Dawn Project.
- Young people in the low cost group are less likely to receive foster care, residential treatment, mentoring, or discretionary funds.
- Young people in the high cost group are more likely to have longer lengths of stay
- Young people in the high cost group are less likely to have an affective/psychotic diagnosis and more likely to have a diagnosis of MR/DD/LD.
- Young people in the high cost group are more likely to receive residential treatment and less likely to receive discretionary funds.

\*See table 4 of handout

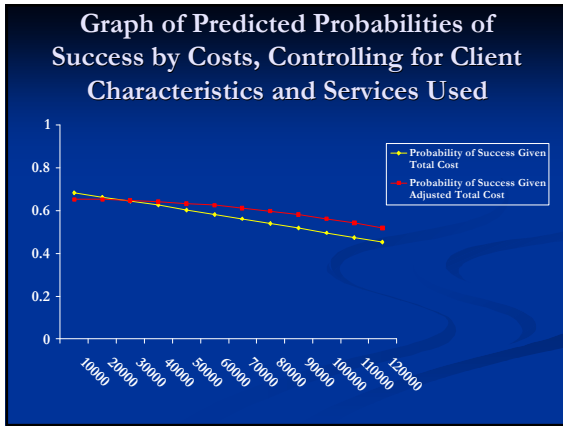


### Logistic Regression of Outcome Using Continuous Data on Costs\*

- Youth who were younger at enrollment were more likely to leave the program having successfully achieved their goals.
- Young people who had longer lengths of stay were more likely to leave the program having successfully achieved their goals.
- Youth from either education or juvenile justice were less likely to leave the program having met their treatment goals.
- Youth with a diagnosis of MR/DD/LD were more likely to leave the program having met their treatment goals.
- Receiving crisis/respite or residential treatment services was associated with a lower likelihood of meeting treatment goals.
- There is a trend for young people who receive discretionary funds to be more likely to leave the program having met their treatment goals.
- The more funds expended, the less likely the young person is to achieve his or her treatment goals.

\*See Table 5 in handout.





### Conclusions

- The cost of providing care to clients in the Dawn Project is influenced significantly by client and service related characteristics, in particular age, diagnosis, referral source, and receiving crisis and residential services.
- Overall, higher expenditures are associated with a lower probability of successful program outcomes, after controlling for client characteristics and services provided.
- The relationship between costs and the probability of success, however, is not linear .