Exploring the Impact of Delivering Mental Health Services in NYC After-School Programs

Gerald Landsberg, DSW, MPA
Stephanie-Smith Waterman, MSW, MS
Ana Maria Pinter, M.A.

Focus of Today’s Presentation

- The 2006-2007 NYU evaluation of the Partners in Healing (PIH) program are now available
- The presentation will explore the program history and evaluation overview, including the most recent design enhancements and key results
  - Including the effects on pro-social attitudes and behaviors as well as mental health benefits for participating youth

Partners in Healing: Background

- Developed Post- 9/11 in NYC
- The overall goal of Partners in Healing is to increase the capacity of youth practitioners and agencies to work with young people in an emotionally responsive way
- PIH uses a complex intervention model based on the theoretical framework provided by the convergence of positive youth development and prevention services
- Youth are in great need of mental health services and do not generally get the services they need.
- After-schools offer a unique environment to address the emotional well-being of children and adolescents

Partners in Healing Model

- PIH provides agencies, staff and interns with mental health training, on-site technical assistance and community networking with mental health providers.
- The program reach has expanded over the five years since its inception and to date, over 15,000 youth and families at 54 sites have been served, primarily through group and individual counseling
- 52 social work interns have participated in the program and almost 200 program directors and staff have received training
- From September 2006 through April 2007, a total of 1,070 youth and families received services directly from New York University (NYU) Social Work Interns placed at 14 participating agencies.

Research Design

- The NYU evaluation design embraced a mixed model of quantitative and qualitative data
- Pre-post test evaluation of students receiving counseling services
  - Students’ beliefs about participation in PIH assessed by:
    - Surveys and focus groups
  - The impact on students’ mental health ascertained by:
    - Subjective measures of self-report
    - Objective ratings of improvement completed by the social work interns: intake and exit assessments
- Qualitative Data Collection:
  - Interns and staff provided qualitative responses regarding the impact of the program
  - Feedback from key stakeholders
  - Reflection meetings and ongoing communication with participants

Data Collection Tools

- **Demographic and Service Provision Tools**
  - Monthly Tracking Forms
  - Initial Intake Assessment Form
  - Client Services Exit/Summary Assessment

- **Youth Data Collection Tools**
  - Youth Pre- and Post- Program Survey Instrument
  - Strengths and Difficulties Questionnaire (SDQ)
### Research Sample

**In-Depth Research Study Sample**
- 420 youth who participated in "ongoing" counseling, defined as three or more sessions.
- This was a large increase from the sample size from the previous year (82 youth).
- The social work intern assessed their ongoing clients both before and after treatment, and provided all youth 4th grade and older with a pre-and post survey.

**Exclusions/Limitations**
- Students seen on a drop-in basis (fewer than three times).
- 3rd grade or below.
- Teens with visual impairments.
- Students with language barriers, limited literacy skills and more serious behavioral problems.

### Sample Demographics

<table>
<thead>
<tr>
<th>Age</th>
<th>Race/Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>7-14: 71%</td>
<td>Latino: 37%</td>
</tr>
<tr>
<td>15-18: 26%</td>
<td>Black: 39%</td>
</tr>
<tr>
<td>Above 18: 1%</td>
<td>White: 1%</td>
</tr>
<tr>
<td></td>
<td>Asian: 19%</td>
</tr>
<tr>
<td></td>
<td>Mixed: 4%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Free lunch: 67%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male: 40%</td>
<td></td>
</tr>
<tr>
<td>Female: 60%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 – 7: 44%</td>
</tr>
<tr>
<td>8 - 12: 44%</td>
</tr>
</tbody>
</table>

### Participants’ Profile

**Referral Source:**
- Professional (social worker, teacher): 74%
- Self: 16%
- Word of mouth: 8%
- Friend: 2%

Already receiving MH services in community clinics: 9%

### Participants’ Profile – Presenting Problems

**Emotional**: 59%
- Peer Relationships: 48%
- Conduct: 40%
- Academic: 31%
- Adult Relationships: 26%
- Health/Physical: 9%
- Multiple Problems: 94%

Duration of the problem: 81% chronic (onset more than six month prior to PIH intervention)

Frequency of manifestation: 17% daily display of emotional or behavioral problem

### Participants’ Profile – Environmental Stressors

- Community: 56%
- Family: 41%
- Financial: 20%
- Housing: 8%
- Legal: 5%
- **Multiple Stressors: 29%**

### Treatment Goals

- Improve emotional functioning: 65%
- Improve peer relationships: 56%
- Improve conduct: 44%
- Improve coping skills: 39%
Service profile

- **Type of treatment**
  - Group: 79%
  - Individual: 34%
  - Crisis intervention: 9%
  - Family: 3%

- **Frequency of treatment**
  - Once weekly: 85%
  - Greater than once a week: 10%
  - Drop-in as needed: 3%

- **Treatment duration**
  - Greater than 3 months: 64%
  - One to three months: 32%
  - One month or less: 4%

Program Impact: Youth Survey Results

**Research Questions**

- What was the impact of *Partners in Healing* on the pro-social attitudes and behaviors of students receiving services?
- What were students’ perceptions of the quality of the helping relationship with PIH staff?
- Does the quality of the helping relationship with the PIH staff predict pro-social attitudes and behavior changes in students?

Instruments

- Interns administered a pre- and post-survey that included demographic information (i.e., age, gender, grade, race/ethnicity, and living arrangement), and questions designed to elucidate thought patterns and behavioral norms.
- All items were rated on Likert-type rating scales (e.g., strongly agree, agree, disagree, and strongly disagree).

Scales - Prosocial Attitudes and Behaviors

- Peer Support Beliefs and Behaviors
- Participation in *Partners in Healing* Activities Behaviors
- Conflict Resolution Scale
- Normative Beliefs about Aggression Scale (NORBAGS)
- Quality of the Helping Relationship

Findings: Impact of *PIH* on students’ pro-social attitudes and behaviors

- **Middle-School Students**
  - Were able to learn more adaptive, pro-social conflict resolution strategies, such as:
    - Walking away
    - Ignoring the source of conflict
    - Asking help from an authority
  - More likely to encourage their peers to utilize non-aggressive conflict resolution skills

- **High-School Students**
  - Significant reduction in physical aggression and antisocial acts, such as stealing and cheating
  - Internalization of concrete strategies to avoid conflict, such a walking away
Students’ perceptions of the quality of the helping relationship with PIH staff

- Both middle and high-school students reported having a very good relationship with PIH staff
  - Strong emotional bond
  - Positive role models
  - Reliable sources for advice and guidance

Students Agreed that PIH Staff:

- Cared about their feelings: 90%
- Understood them: 81%
- Gave good advice and guidance: 77%
- Helped them with ideas: 79%
- Were easy to talk to about difficult things or fights: 69%
- Were good role models: 81%

In addition, students:

- Trusted the PIH staff: 84%
- Thought about what staff would say: 72%
- Were inclined to act in a way that PIH staff would respect: 88%

How the Helping Relationship impacts students’ beliefs and behaviors

**Middle-school students**
- Students’ beliefs and behaviors were determined by the quality of the helping relationship with the PIH staff
- Positive associations between relationship with PIH staff and:
  - Academic behaviors, such as completion of homework on time and studying for tests
  - Conflict resolution strategies, such as walking away and encouraging peers to solve conflicts without fighting

**High-school students**
- Students’ beliefs were determined by the quality of the helping relationship with the PIH staff
- Quality of the helping relationship predicted:
  - Reduction in physical aggression, antisocial activities, and total aggression
  - Walking away as a conflict resolution strategy

Youth Mental Health Self-Report

- Did participation in the after-school program have a positive impact on students’ mental health?
**Instrument: Strengths and Difficulties Questionnaire (SDQ)**

- Brief behavioral screening used as an Strengths and Difficulties Questionnaire (SDQ) a brief behavioral screening questionnaire
- Has been used as an outcome measure in a child and adolescent mental health service
- Asks about 25 attributes, some positive and others negative. These 25 items are divided between 5 scales:
  - Emotional Symptoms: depression, anxiety, attachment, fears, somatic complaints
  - Conduct Problems: ODD and CD behaviors
  - Hyperactivity/Inattention: ADHD symptoms
  - Peer Relationship Problems: loneliness, bullying, popularity, difficult relations
  - Prosocial Behavior: sharing, empathy, helping behavior

**Findings: Mental Health Benefits – Middle-School Students**

- Intensive services provided by social work interns led to numerous mental health benefits and a significant reduction in their emotional and behavioral difficulties
- Specifically, youth were more likely to:
  - Manage their anger more effectively
  - Get along better with their peers
  - Worry less about stressors in their lives

**Partners in Healing: Mental Health Benefits – High-School Students**

- Significant reduction in their emotional and behavioral difficulties
  - Emotional
  - Peer Problems
  - Total difficulties
- Specifically, youth were more likely to:
  - Display more confidence and self-efficacy
  - Be less affected by bullying
  - Be less impulsive
  - Display less antisocial behaviors

**Lessons from PIH Research**

- PIH provides opportunities for participating students to develop coping abilities as well as more adaptive social skills
- PIH develops interpersonal skills that foster and maintain positive relationships
- PIH has the potential to contribute significantly to students’ sense of empowerment, as well as their self-esteem and self-efficacy when grounded by positive relationships

**Qualitative Results: Focus Groups**

- A series of focus groups were held in this spring to obtain feedback from a range of participants, including: agency staff, social work interns and youth involved in the Partners in Healing program.

**Agency Benefits of Involvement in Partners in Healing**

- Agencies were able to serve additional youth
  - Higher Risk Students were also able to stay in the program when traditionally they may have been expelled
- New Services and Structures
  - Such as: Policy Manuals, Clinical Meetings, Alternative Discipline Plans, Mental Health Trainings
- Social Work Interns focused on the emotional well-being of youth
  - Youth’s needs were identified and addressed
- Additional attention brought to mental health overall
The Impact of Partners in Healing on Agency Staff

Agency staff expressed the following changes as a result of their participation in the program:
- Increased sensitivity to the issues youth in the program experience
- Improved ability to explore more fully the “why” behind problem behaviors
- New techniques for day-to-day practice and ideas to share with colleagues

Benefits to Youth from an Agency, Staff and Social Work Intern Perspective

Agencies and Interns agreed that Partners in Healing primarily allowed youth to
- Explore their feelings in a safe space
- Social Work Interns offer a new perspective with special training to help young people
- Learn new skills and foster positive relationships
- Youth obtained an outlet to develop leadership skills, build self-esteem and communicate in new ways

Improvements in Youth Behavior

- The extra support and attention both one-on-one and in small groups made the youth feel good about themselves and offered additional support within the programs
- One agency recalled a youth who had previously been unable to express his feelings, and often there would be calls made home to his parents, because of the disruptions. After meeting regularly with the social work intern, the child began successfully participating in the program overall.

Youth Focus Group Themes

- Youth themselves also expressed that they need to
  - feel safe
  - learn new skills
  - socialize with friends
  - connect with a caring adult

Socializing Teaches Youth

- The high school girls talked about the power of friendship, and how “girls group” is where they learned new strategies to use in their own life.
- Some girls mentioned hearing new ideas about how to act, such as learning how to let small things go, or not to be so shy about having an opinion
- The girls felt that because of the feeling connected in girls group they could more effectively cope with change and deal with peer pressure, especially when it came to having an unpopular opinion, or asking for something you need

Youth feel connected to Caring Adults

- Social work interns were seen as positive role models
- Different youth appreciated a variety of qualities about the individual person, such as the way they spoke, or dressed, or what they cared about or taught them, but many youth expressed admiring or looking up to them
- Youth expressed satisfaction about being involved with leaders were creative and let the youth make choices about the activities
- The relationships allowed youth to be seen and heard and to feel special
Next Steps Mental Health Initiatives

- #1 Raise Mental Health Awareness
  - Most people do not have enough information about mental health and could benefit from more education and training

- #2 Strengthen Leadership Commitment
  - This could be about becoming a leader in a mental health initiative, or seeking additional support from leaders

- #3 Build Customized, Internal Support Systems
  - Every agency is different and should create what works for them

- #4 Invest in Wider Community Efforts
  - If you can’t offer a particular service or support, partnering with others can be very effective

Future Recommendations

- After-school programs need to hire on-site social workers and other mental health professionals to assist in developing and strengthening appropriate support structures and services.

- Mental health funding streams must expand to include progressive youth-development frameworks.

- Experts within the fields of education, mental health, after-school, policy experts, and other stakeholders need to connect strategically to spearhead the national after-school mental health movement.

Future Recommendations (continued)

- A formal advocacy campaign is necessary to promote this promising area of practice.

- In addition, social work schools need to enhance their training in the area of youth development and addressing the social and emotional needs of young people.

- All of these efforts should be complemented by ongoing evaluations that assist in documenting best practices, clarifying effective models and pushing for larger-scale change.

Presentation Conclusion

- After-schools are increasingly viewed as safe havens for youth who are vulnerable to a wide variety of pressures that negatively impact their development.
  - The climate is informal and offers reduced stigma

- There have been a variety of lessons learned from youth-serving agencies about effective treatment, which will be shared by a participating agency, Groundwork, Inc.