Daybreak

Changing Lives Creating Futures

Year One Process Evaluation

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Community Research Partners (CRP) is a unique nonprofit research center that aims to strengthen communities through data, information, and knowledge. CRP undertakes applied and policy research, community data, and program evaluation projects, within and outside of Central Ohio, and works in a wide range of fields, including human services, education, health, housing, employment, poverty, community development, and race and diversity. CRP is a partnership of the City of Columbus, United Way of Central Ohio, The Ohio State University, and the Franklin County Board of Commissioners.

Daybreak's mission is to eliminate youth homelessness in the Miami Valley through comprehensive and result-oriented programs that provide safety and stability for runaway, troubled, and homeless youth ages 10-21.

Strengthening Ohio communities through data, information, and knowledge.

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Preface

Daybreak, located in the City of Dayton in Montgomery County, Ohio, has a mission to eliminate youth homelessness in the Miami Valley through comprehensive and results-oriented programs that provide safety and stability for runaway, troubled, and homeless youth. Daybreak began as an emergency shelter for runaway and homeless youth in 1975. Since that time, the agency has grown and evolved to meet the changing needs of area youth, culminating with the opening of Opportunity House in May 2008. Today, Daybreak provides 24-hour services including street outreach, emergency shelter, 24 highly supervised on-site transitional housing units, and 30 community-based apartments with support services.

The Daybreak evaluation project is a 27-month project that will identify emerging best practices for developing and implementing a comprehensive housing program for homeless and transitioning youth ages 18 to 21. Major funding for the project was granted to Daybreak by the Ohio Housing Finance Agency Housing Investment Fund. The Ohio Housing Finance Agency (OHFA) facilitates the development, rehabilitation and financing of low- to moderate-income housing and is the state agency responsible for allocating Ohio's Low Income Housing Tax Credits program (see Terms and Definitions, below). Additional support was provided by the Iddings Foundation (Dayton, OH) and the George Gund Foundation (Cleveland, OH). Community Research Partners (Columbus, OH) has been contracted as the independent evaluator for the project and is responsible for the project design, process, and all deliverables.

This report, *Daybreak: Year One Process Evaluation,* constitutes the conclusion of 12 months of data collection in the form of document review, literature review, focus groups, electronic surveys, telephone interviews, group interviews, and individual interviews. The process evaluation documents and describes in detail the development and implementation of Daybreak including its mission, goals and objectives, and program strategies. The Daybreak impact evaluation, which will continue through March 2013, focuses on two components of Daybreak's overall program: Daybreak clients, age 18, served in Daybreak's emergency shelter (who are on on-track for housing) and clients ages 18 to 21 who are in housing.

Over the course of this report, the reader will learn about the history and organizational structure of Daybreak, the core programs that define it, the numerous services it provides (both on-site and in partnership with local providers), and how staff and stakeholders feel about Daybreak and about the needs facing homeless youth in Montgomery County today. The primary finding of the Daybreak process evaluation is that Daybreak's services for youth are grounded in evidence-based practices that are tailored to meet the specific needs of young adults experiencing homelessness, multiple losses, trauma, and very often, mental illness. The Daybreak model is premised on a belief that when runaway, troubled, and homeless youth are provided with decent, safe, and affordable rental housing, along with access to an array of relevant, flexible, and responsive services, they can begin to heal past traumas, create community, and build the skills needed to live more stable, productive lives.

Terms and definitions

Throughout this report the reader may encounter terms related to evaluation and to youth housing programs that are new or unfamiliar. Key terms and definitions are provided below.

Evaluation terms

Process Evaluation. Process evaluations, also called *formative evaluations*, document and describe in detail the development and implementation of a program, including its mission, goals and objectives, and program strategies. Process evaluations explain the needs addressed by a program, expected outcomes of program activities and strategies, and

available resources. They are useful for monitoring program implementation and documenting whether (and how) a program is operating as planned.

Impact Evaluation. Impact evaluations assess changes that can be attributed to a particular intervention, such as a project, program, or policy. Impact evaluations go beyond monitoring outcomes (i.e., assessing whether goals and objectives were achieved) by examining how interventions (or what mix of interventions) resulted in observed outcomes. For practical and ethical reasons, the Daybreak impact evaluation does not reflect a true experimental design, in which a treatment and control group are randomly selected, the control group is isolated from the intervention, and both groups are isolated (to the extent possible) from any variables that may affect desired outcomes. Rather, Daybreak's impact evaluation will reflect a quasi-experimental design in which Daybreak clients will be compared against one another before and after intervention using a common set of outcome variables.

Outputs. Outputs are units of services (i.e., measures) that gauge a program's processes and describe a program's activities (e.g. how many nights of shelter were provided, how many hours of counseling a client received, etc.).

Outcomes. Outcomes are the actual impacts, benefits, or changes that participants experience during or after a program. In the Daybreak impact evaluation, for example, an outcome would be "client maintained permanent housing," or "client obtained employment that pays a living wage."

Logic Model. A logic model graphically depicts the assumptions, inputs (resources), activities (interventions), outputs, and outcomes (short and long term) for a program. A logic model is used to demonstrate how an activity or combination of activities is expected to result in a desired outcome(s).

Roadmap. In the context of the Daybreak evaluation project, a roadmap is a plan or a set of guidelines and recommendations for effectively providing housing and intervention services to homeless and at-risk youth.

Housing program terms

Street Outreach. Street Outreach Programs (SOP) are designed to promote efforts to build relationships between street outreach workers and runaway, homeless, and street youth. Outreach workers also provide support services that aim to move youth into stable housing and prepare them for independence. The ultimate goal of street outreach programs is to prevent the sexual abuse and exploitation of young people living on the streets or in unstable housing. Services typically include street-based education; access to emergency shelter; survival aid (clothing, blankets, personal hygiene products, etc.); treatment and counseling; information and referrals; crisis intervention; and follow-up support.

Emergency Shelter. Emergency shelters for youth are sometimes referred to as Basic Center Programs (BCP). They provide short-term shelter and support services such as food, clothing, counseling, referrals, and aftercare and seek to either reunite youth with their families or arrange appropriate alternative placements.

Transitional Housing. Transitional housing programs, also referred to as Transitional Living Programs (TLP), provide homeless youth with time-limited housing and a variety of support services designed to move (transition) youth to independence and permanent housing. Services typically include but are not limited to life skills training, counseling, and education and employment support. There two distinct types of TLPs: (1) facility-based models, in which tenants are expected to move out at the end of the program, and (2) transition-in-place models, in which tenants may remain in their housing unit after completing the program. Depending on the specific population served, TLPs may be structured as a collection of scattered site apartments, grouped apartments, a single room occupancy

congregate care facility, a shared home, etc. and may or may not provide 24-hour supervision.

Permanent Supportive Housing. Permanent Supportive Housing (PSH) is affordable housing that is coupled with support services. This type of housing is typically reserved for those who face complex and persistent challenges that inhibit their ability to live independently, including chronic homelessness, substance abuse, addiction, mental illness, serious physical illness, and disability. Supportive housing may be coupled with social services such as case management, job training, life skills training, and alcohol and drug abuse programs.

Housing First. Housing First, also known as rapid re-housing, is a housing model that provides an alternative to a "traditional" housing continuum model that moves homeless individuals through different "levels" of housing, whereby each level moves them closer to independent housing (e.g., from an emergency shelter to transitional housing, then from transitional housing to their own apartment in the community). Housing First moves the homeless individual immediately from the streets or homeless shelter into an apartment. Once stabilized, the individual then begins to receive necessary support services. Housing First programs funded by HUD provide tenants with "wraparound" case management services that link tenants to services, including mental and physical health, substance abuse treatment, and employment.

Continuum of Care. A Continuum of Care (CoC) is a geographical administrative unit through which federal homeless assistance funds are distributed. Homeless assistance providers within a CoC work together to apply for federal funding. The Department of Housing and Urban Development (HUD) ranks applications and provides funding based on the quality of the application, the performance of the local homeless assistance system, the need for homeless assistance, and the local rankings of individual programs. Funding can be used for permanent and supportive housing, transitional housing, and services. Some funding is also distributed to communities through HUD's Emergency Shelter Grant (ESG) program.

Low-Income Housing Tax Credit. The federal Low-Income Housing Tax Credit (LIHTC) program provides funding for the development of low-income rental housing by allowing an investor (usually the partners of a partnership that owns the housing) to take a federal tax credit equal to a percentage of the cost incurred to develop the rental units. Ohio, like all states, receives a fixed allocation of credits annually based on its population. Ohio's LIHTC program is administered by OHFA, which awards credits to projects through an annual competitive application process. There are income, rent, and occupancy restrictions associated with LIHTC units. Tenants' household incomes may not exceed 30% of the area median income, rent may not exceed 30% of tenants' income, and the units must be maintained as low-income rental housing for a minimum of 30 years.

1.0 The Daybreak Evaluation

In February 2010, Community Research Partners (CRP) traveled to Dayton, Ohio, (Montgomery County) to meet with staff from Daybreak and to discuss the agency's plan to conduct a comprehensive evaluation of its program. Daybreak operates a street outreach, emergency shelter, and transitional housing program for runaway, troubled, and homeless youth ages 10 to 21 in the Dayton/Miami Valley area. Community Research Partners, located in Columbus, Ohio, is a unique nonprofit research center that designs and conducts program evaluation and applied research to address local, state, and national programs and issues. CRP helps to connect theory with practice; bring clarity to complex issues; and create high-quality products and resources for funders, clients, and communities. The organization is a partnership of the City of Columbus, United Way of Central Ohio, the Franklin County Commissioners, and the John Glenn School of Public Affairs at The Ohio State University.

In the spring of 2010, Daybreak applied to the Ohio Housing Finance Agency (OHFA) for funding to support its "Roadmap" project—a 27-month evaluation project that will analyze Daybreak processes and client outcomes to identify emerging best practices for developing and implementing a comprehensive housing program for homeless and transitioning youth. On June 30, 2010, OHFA notified Daybreak that funding was approved and the actual funding contract was signed in December 2010. The official grant period began in January 2011, at which time Daybreak entered into a formal contract with CRP to conduct the evaluation.

1.1 Evaluation Parameters

CRP's approach to the Daybreak evaluation project is outlined in detail in the Daybreak Evaluation Plan,[1] which was finalized and approved by Daybreak and OHFA in August 2011. The plan includes (1) a description of the project and evaluation objectives, (2) evaluation parameters (Table 1), (3) six evaluation questions that guide data collection and analysis, (4) a timeline of evaluation activities, and (5) a Daybreak logic model that identifies specific output and outcome measures for the evaluation (Appendix A).

The following table outlines the parameters that frame the evaluation project. Daybreak clients for whom output and outcome data will be tracked includes clients ages 18 in emergency shelter who are on track for housing and clients ages 18-21 who are in housing.

Table 1. Evaluation parameters

PARAMETER	DEFINITION
Evaluation timeframe	Phase 1: Startup Activities, Jan. 1, 2011 – Jul. 31, 2011 Phase 2: Process Evaluation, Aug. 1, 2011 – Dec. 31, 2011 Phase 3: Impact Evaluation, Aug. 1, 2011 – Dec. 31, 2012 Phase 4: Final Evaluation Report and Roadmap, Jan. 1, 2012 – Mar. 31, 2013
Population	Daybreak clients, ages 18-21, served in Daybreak's emergency shelter (who are on on-track for housing) and in transitional housing programs from Aug. 1, 2011 to Dec. 31, 2012)
Client-level data collection timeframe	Aug. 1, 2011 – Dec. 31, 2012 (17 months)
Deliverables	Daybreak Evaluation Plan: August 2011 Daybreak Client Data Flowcharts: August 2011 Year One Process Evaluation Report: December 2011 Final Evaluation Report and Roadmap: March 2013

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[1] The Daybreak Evaluation Plan is available on CRP's website:
http://communityresearchpartners.org/14651.cfm?action=detail&id=168

1.2 Evaluation Questions

Six primary evaluation questions, many with their own subset of questions, guide data collection and analysis for the Daybreak evaluation project.

Evaluation Question 1. *What is the current status of youth in the Dayton area? And what is the profile of youth that Daybreak serves, including their risk factors for being homeless?*

Evaluation Question 2. *How is the Daybreak youth shelter and transitional housing program being implemented?*

a. *What are Daybreak's mission and goals, and how do Daybreak's policies and procedures help to meet its mission and goals?*

b. *What factors have had an impact on how the Daybreak program is implemented? What decisions have led to important benchmarks in the development and evolution of the program?*

c. *What barriers and challenges does Daybreak face in serving youth and achieving its program goals and outcomes?*

d. *How are community service organizations partnered with Daybreak to provide support services to Daybreak clients?*

e. *What data do Daybreak collect, how are they used to monitor program operation effectiveness, and what additional types of data need to be collected?*

Evaluation Question 3. *What lessons have been learned by Daybreak staff and other stakeholders about providing emergency shelter, transitional housing, and other support services to runaway, troubled, and homeless youth?*

Evaluation Question 4. *What is the impact of the Daybreak program on providing safety and stability for runaway, troubled, and homeless youth ages 18 to 21?*

a. *How many youth per year receive emergency shelter, transitional housing, and other support services provided by Daybreak?*

b. *How have Daybreak's outcomes differed by participant characteristics, participant risk factors, and intervention strategies?*

c. *What support services are most effective in helping youth to succeed in housing (e.g., mental health treatment, alcohol/substance abuse treatment, employment services, medical referrals, positive youth development activities, etc.)?*

d. *What is the impact of the Daybreak Dollars contingency management program, specifically, on helping youth to succeed in housing?*

e. *What resources are required to achieve program outcomes, and what is the estimated return on investment?*

f. *To what extent are assessment scores, administered through various client assessment tools (Ansell Casey Life Skills, 40 Developmental Assets, etc.) linked to, or predictive of, client success in housing and other areas?*

Evaluation Question 5. *What are best practices in providing emergency shelter and transitional housing to runaway, troubled, and homeless youth ages 18 to 21?*

a. *What does the research literature indicate are best practices?*

b. *What are examples of other programs that serve runaway, troubled, and homeless youth ages 18 to 21? What services do they provide and what outcomes do they achieve?*

c. *What best practices is Daybreak currently demonstrating?*

d. *What are some promising practices associated with Daybreak's program model?*

Evaluation Question 6. *What are local, state, and national policy recommendations for providing safety and stability for runaway, troubled, and homeless youth ages 18 to 21?*

1.3 Phases of the Evaluation

In the evaluation plan, evaluation activities are grouped in four phases, described below.

Phase 1: Start-up activities

Phase 1 began January 1, 2011, and was completed when the Daybreak Evaluation Plan was finalized and approved by Daybreak and OHFA in August 2011. Data collection under Phase 1 provided CRP with a wealth of background information and internal and external stakeholder input necessary to write an accurate and comprehensive evaluation plan. Specific activities under Phase 1 included the following:

- A **literature review** focused on issues facing transitioning and homeless youth, policy recommendations, and best practices in serving this population

- A **document review** focused on Daybreak's history, mission, structure, processes, rules, partnerships, programs, and clinical intervention models

- A **web-based survey** of nonprofit and public agency service providers in the Dayton area that explored issues facing Dayton-area youth, demand for and gaps in services, Daybreak's role in the community, and appropriate measures of Daybreak's impact

- An **email survey** of Daybreak staff that explored the issues facing Daybreak youth and the challenges and barriers to serving Daybreak youth

- **Focus groups** with (1) representatives from city and county government, including members of the Montgomery County Homeless Solutions Policy Board;[2] (2) Daybreak youth; (3) Daybreak funders; and (4) Daybreak board members that focused on needs and priorities for serving transitioning and homeless youth in the community, Daybreak's role in the community, and appropriate measures of Daybreak's impact

- A series of **group discussions** with Daybreak management and data administration staff focused on identifying appropriate output and outcomes measures for the Daybreak Evaluation Plan, identifying assessment tools and other instruments that would be used to collect client data, and adding to or refining these instruments where necessary

- **Telephone interviews** with state and federal homeless and housing policy experts— including representatives from OHFA, Ohio Capital Corporation for Housing, Corporation for Supportive Housing, National Alliance to End Homelessness (NAEH), U.S. Department of Housing and Urban Development (HUD), Runaway and Homeless Youth Training and Technical Assistance Center (RHYTTAC), and the U.S. Interagency Council on Homelessness (USICH)—focused on external stakeholders' data and evaluation needs that might be addressed through the Daybreak evaluation

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[2] The Homeless Solutions Policy Board (HSPB) serves as the Dayton-Montgomery County Continuum of Care and the Montgomery County Office of Family and Children First.

Daybreak Logic Model

Phase 1 also included development of the Daybreak logic model (Appendix A), which CRP created with extensive input from Daybreak staff. The logic model identifies specific output measures and outcomes that will allow CRP, at the conclusion of the evaluation project, to describe the impact of Daybreak's program on the population of youth it serves. In the logic model, outputs and outcomes are defined across five domains, which represent the five areas of focus on which Daybreak's interventions and support services are based.

1. Housing
2. Physical and mental health
3. Life skills
4. Income and employment
5. Education

Phase 2: Process evaluation

Phase 2 of the evaluation project consists of a process evaluation, which culminates with the production of this report, *Daybreak: Year One Process Evaluation*. The following activities have been part of the process evaluation:

- A continued **literature review**

- A continued **document review**

- **Analysis** of findings from Phase 1 start-up activities

- **Telephone interviews** with external Daybreak stakeholders (long-time funders, board members, and partner agencies) and different groups of Daybreak staff (management and senior staff, direct service staff, and data and evaluation staff) focused on the history of Daybreak; challenges and barriers to serving homeless youth; how Daybreak partners with area service providers; critical services, rules, and expectations that are part of Daybreak programs; how Daybreak has learned and evolved over time; and the challenges and opportunities associated with preparing for and implementing the Daybreak evaluation project

Phase 3: Impact evaluation

Phase 3 of the evaluation project is primarily a period of data collection and monitoring for the impact evaluation. On August 1, 2011, Daybreak formally began collecting client-level data across the five outcome domains defined in the Daybreak logic model and will continue to collect through December 31, 2012. Other activities that will be incorporated into the final evaluation report and Roadmap will also begin during Phase 3, including focus groups with Daybreak youth and a return-on-investment analysis of Daybreak's housing programs.

Phase 4: Final evaluation report and Roadmap

Phase 4 will commence in January 2013 with analysis of client-level data collected over the previous 17-month period. Statistical models will be created to examine the relationship(s) that exist among youth characteristics (i.e., age, race, gender, personal history, etc.); youth participation in Daybreak's programs (hours in therapy, hours in counseling, etc.); and youth outcomes. The model will also examine metrics associated with the Daybreak Dollars program and the extent to which those are related to youth outcomes. Phase 4 will culminate with a final evaluation report and "Roadmap" for providing youth housing. The Roadmap is intended to provide these recommendations to other youth housing providers:

- How to develop youth housing (building community support, physical design, etc.)

- How to operate youth housing (staffing, supervision, house rules, etc.)

- What programs and services have been shown to have a positive effect on client success

- What assessment tools and data elements are useful, based on their "predictive capacity" for linking youth clients to needed services

- Policy recommendations for local, state, and national youth housing policy experts and lawmakers

1.4 Structure of the Report

The Year One Process Evaluation is intentionally designed to address the following evaluation questions: 1, 2 (and all of it sub-questions), 3, 4a, 5a, and 5c (page 4 and 5).[3] Highly detailed summaries of how Daybreak is structured, how it operates, and what services it delivers and to whom are included in Sections 2, 5, 6, and 7.

Contextual information including characteristics of homeless youth in America, in Montgomery County, and of those served by Daybreak are provided in Sections 3 and 4. Section 4 also includes a discussion of stakeholders' perceptions of service gaps in Montgomery County.

Sections 8 and 9 provide stakeholder and staff perspectives about how Daybreak's program has evolved and changed over time, challenges and barriers to serving Daybreak's target population, and lessons learned.

Section 10 concludes with a discussion of data collection instruments and methods that began in August 2011 and will continue through December 2012. These data represent the source data for the Daybreak impact evaluation.

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[3] The remaining evaluation questions will be addressed at the end of the project with the production of a final evaluation report and Roadmap for providing youth housing (see Phase 4 description).

2.0 Daybreak Overview

Evaluation questions addressed

- *What are Daybreak's mission and goals? (Question 2a)*
- *How many youth per year receive emergency shelter, transitional housing, and other support services provided by Daybreak? (Question 4a)*

2.1 Origins and organizational structure

Daybreak opened its doors as an emergency shelter for runaway and homeless youth in 1975. Its very grassroots origins began about two years before that, when a group of concerned and civically-minded individuals from the Dayton Metropolitan Housing Authority, Family and Youth Services Bureau, Dayton Federation of Women's Clubs, and other local organizations came together to create the Multi-Agency Committee for Residential Adolescent Care (MACRAC). The group secured funding from the Junior League of Dayton, Montgomery County, and two private foundations and with it purchased a house on Lower Wayne Avenue that became Daybreak. At the time, the Daybreak shelter contained 10 beds for minor girls and boys. Daybreak's staff consisted of an Executive Director, two counselors, four youth leaders, and many committed volunteers. The agency's annual operating budget was approximately $85,000.

Today, Daybreak employs 63 full- and part-time staff, 10 to15 university interns[4], and more than 30 volunteers. The agency's programs and services have grown to include street outreach, prevention, transitional housing, case management, counseling, therapy, life skills education, and other services for runaway, "throwaway," transitional, and homeless youth in the Miami Valley—a four-county geographic region that encompasses Dayton, Kettering, Huber Heights, and other surrounding suburbs. Daybreak also operates Miami Valley's only 24-hour crisis hotline and emergency youth shelter.

In fiscal year (FY) 2011, Daybreak's operating budget from all revenue sources was $3,420,613 (Figure 1). Public sources include Department of Health and Human Services (HHS) funds under the Runaway and Homeless Youth Act; HUD funds through ESG and McKinney-Vento Homeless Assistance grants and the HOME Investment Partnership Program; Federal Emergency Management Agency; Medicaid; Ohio Department of Development Homeless Assistance funds; Alcohol, Drug Addiction and Mental Health Services (ADAMHS); Ohio Department of Education; Montgomery County; and income from contracts with Montgomery County Children Services and Juvenile Court.

Figure 1: Daybreak Operating Revenue, FY 2011*

United Way $118,908
Local $355,459
State $437,954
Federal $1,392,053
Donations and private grants $1,090,723
Investment interest $25,516
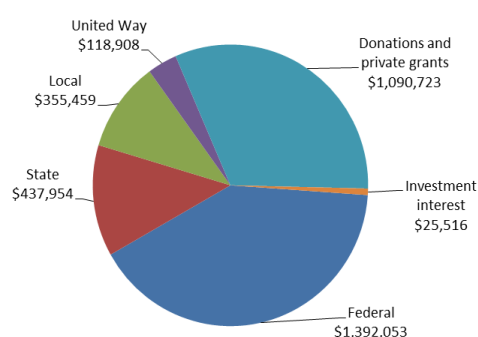
Figure 2: Daybreak Operating Expenses, FY 2011*

Housing program 1,361,458
Emergency shelter $887,221
Group home $185,416
Street outreach program $192,298
Administration $402,632
Fundraising $282,286
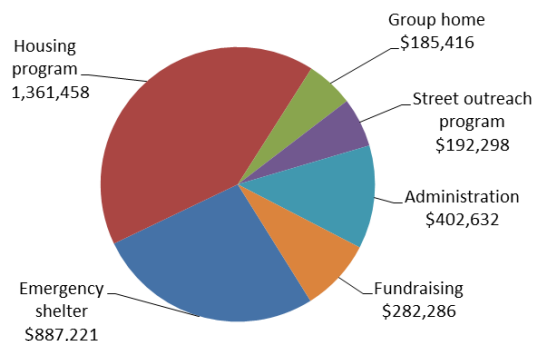
* Figures do not include non-cash investment gains/losses or depreciation.

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[4] Interns include both undergraduate and graduate students from local colleges and universities. Disciplines of study vary (counseling, political science, education, rehabilitation services, social work, etc.), Internships range in length from one semester (undergraduates) to two years (graduate level students).

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Table 2. Daybreak staff

PROGRAM/ROLE	NUMBER FULL-TIME	NUMBER PART-TIME
Youth Services Department (Prevention and Group Home)		
Youth Services Director	1	
Intervention Specialist	2	
Residential Specialist	4	7
Licensed Social Worker (LSW)	1	
Shelter		
Shelter Director	1	
Shelter Social Worker	1	
Residential Intervention Supervisor	3	
Residential Specialist	8	10
Case Manager	1	
Cook	1	
Housing		
Housing Director	1	
Housing Manager (community housing)	1	
Intervention Specialist	1	
Case Manager	1	
Housing Placement Coordinator	1	
Outreach Specialist	1	
Operations Assistant	1	
Facilities		
Facilities Manager	1	
Facilities Maintenance	1	
Custodian	1	
Development Department		
Chief Development Officer	1	
Development Associate		1
Administration		
Chief Operating Executive	1	
Chief Program Officer/Clinical Director	1	
Chief Operating Officer/Human Resources	1	
Chief Financial Officer	1	
Performance Quality Improvement Coordinator	1	
Manager of Volunteer Resources		1
Data Evaluation Specialist		2
Accounting Specialist		2
Administrative Assistant	1	
TOTAL	40	23

2.2 Vision, mission, and strategy

Daybreak's vision is a *Safe Home for Every Child*. The agency's mission is to eliminate youth homelessness in the Miami Valley through comprehensive and results-oriented programs that provide safety and stability for runaway, troubled, and homeless youth ages 10 to 21. There are five core values upon which the agency bases its programs and its interactions with clients, other staff, and partners in the community:

1. Commitment to young people
2. Respect
3. Integrity
4. Empathy
5. Teamwork

Daybreak provides three core programs to serve youth and young adults in crisis in the Dayton region. These are **emergency shelter**, **transitional housing** (both on-site and within the community), and **street outreach**. These core programs provide the foundation of Daybreak's "SOS" strategy, which is to provide at-risk youth with the following:

Safe shelter: Daybreak operates the region's only emergency shelter for youth ages 10 to 18. Through the shelter, Daybreak provides shelter, food, clothing, counseling, and safety to approximately 200 youth every year.

Outreach: and prevention Daybreak's street outreach program makes contact with more than 1,500youth every year who are "couch hopping" or living on the street and looking for help. Daybreak provides these youth with basic necessities and help in finding a safe place to live.

Self-sufficiency: Daybreak's housing program is designed to move homeless youth ages 18 to 21 out of homelessness and into housing, financial independence, educational achievement, and self-sufficiency. It includes a supervised, on-site (i.e., facility-based) component for youth who need structure and intensive support, and a community-based (i.e., scattered site) transition-in-place component for youth who require less structure and support.

2.3 Number of youth served

Table 3 provides a snapshot of Daybreak clients served over the course of a three-year period, from fiscal year 2009 to 2011.

Table 3. Youth served across Daybreak's core programs, FY 2009–2011*

PROGRAM/SERVICE	FY 2009	FY 2010	FY 2011
Emergency shelter			
Maximum capacity = 18 shelter beds			
Maximum stay = 14 days for minors, 90 days for 18-year olds			
Youth served	206	203	195
Bednights	4,479	4,813	4,837
Percentage male	37	42	46
Percentage female	63	58	54
Average daily census, minors	3	4	3
Average daily census, 18-year-olds	8	9	10
Average length of stay, minors	12 days	14 days	13 days
Average length of stay, 18-year-olds	38 days	34 days	36 days
Housing			
Maximum capacity = 54 apartments			
Youth served	83	92	97
Housing nights, on-site transitional housing	6,088	7,242	7,854
Housing nights, community housing	7,256	9,706	10,788
Percentage male	28	30	40
Percentage female	72	70	60
Average daily census	37	46	51
Street outreach			
Number of contacts	1,962	2,017	1,556
Total material distribution	5,136 items	4,074 items	6,007 items
Number of contacts who came into shelter	32	76	75

* Does not include service statistics for Alma's Place, Daybreak's group home which opened in April 2011. Also does not include the number of children of young parents served by Daybreak's housing programs.

3.0 Characteristics of Homeless Youth

Evaluation questions addressed

- *What is the profile of youth that Daybreak serves, including their risk factors for being homeless? (Question 1)*

America's homeless youth population is heterogeneous, characterized by a wide spectrum of experiences, backgrounds, and trajectories. Researchers have developed a significant amount of information to describe who homeless youth are and how they experience homelessness. Researchers have also tried to quantify the extent of the youth homelessness problem and have explored pathways that lead to youth homelessness, although there are challenges to this. Homeless youth are a transient and highly mobile population. Many youth move in and out of periods of homelessness, and untold numbers of homeless youth are not connected to any shelter or system of services (USICH, 2010, p.15). Despite its complexity and the episodic nature of youth homelessness, existing research provides insight into several important aspects of this population.

3.1 Defining youth homelessness

Defining youth homelessness is neither easy nor straightforward. It involves multiple considerations, including age, length of time living on the street or without a supervised adult caregiver, and the circumstances that led the youth to be living on his or her own without permanent and/or safe housing. In research, terms that attempt to group homeless youth are often based on a categorization of how the youth came to be separated from his or her familial or guardian home (HHS, 2007; Toro, Lesperance, & Braciszewski, 2011). Common terms include *runaways*, youth who have left the home, sometimes because of neglect or abuse; *throwaways*, youth who have been kicked of the home, often because of parental dysfunction and/or youth behavior problems; *street youth*, who may be found in various settings and may engage in dangerous or criminal activities including prostitution, drug dealing, violence, or theft; and *systems youth*, who, after spending time in foster care or another formal system of care, "fall through the cracks" and end up homeless (Toro et al., 2011).

Different federal agencies and programs also define youth homelessness differently. Three major definitions of homelessness in use by federal agencies are the Department of Education's definition, contained in Subtitle VII-B of the McKinney-Vento Act, and HUD's, HHS's definition, contained within the Runaway and Homeless Youth Act, and HUD's definition, found in Section 103 of Subtitle I of the McKinney-Vento Act.

- **U.S. Department of Education, Education for Homeless Children and Youth Program.** Under guidance provided by the Department, homeless children and youth are those who "lack a fixed, regular, and adequate nighttime residence" which includes those sharing the housing of other persons because of loss of housing, economic hardship, or similar reason (i.e., those living in "doubled up" situations), children or youth who have run away from home and live in runaway shelters, abandoned buildings, the streets, or other inadequate accommodations (even if their parents have provided and are willing to provide a home for them). (National Center for Homeless Education at SERVE, 2004).

- **U.S. Department of Health and Human Services, Runaway and Homeless Youth Act.** The Runaway and Homeless Youth Act (RHYA) authorizes funding for programs that provide a range of supports and services for runaway and homeless youth, including pregnant and parenting teens. The RHYA program defines a homeless youth as "an individual for whom it is not possible to live in a safe environment with a relative, and who has no other safe alternative living arrangement" (HHS, 2008). The Act also defines the age of

youth eligible to receive services under RHYA-funded programs as ages 16 to 21 for transitional housing program, and under age 18 for short-term emergency shelter (HHS, 2008).

- **U.S. Department of Housing and Urban Development, McKinney Vento Homeless Assistance Act.** The McKinney Vento Homeless Assistance Act defines a homeless person as one who "lacks a fixed, regular, and adequate nighttime residence," including a primary nighttime residence that is "a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground." A homeless person may also be "living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by … government programs or by charitable organizations" (HUD 2012).

    The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 amended McKinney-Vento in ways that broadened the definition of homelessness and also defined unaccompanied youth and homeless families with children and youth as those who are defined as homeless under other federal statutes (such as RHYA) who (a) "have experienced a long-term period without living independently in permanent housing,"(b) have experienced persistent instability as measured by frequent moves over such period," and (c) can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health condition, substance addiction, histories of domestic violence or childhood abuse, the presence of a child or youth with a disability, or multiple barriers to employment" (HUD 2012).

    In a final rule published in December 2011, HUD defines "youth" under the HEARTH Act as a person who is less than 25 years of age in "the hope that programs authorized by the HEARTH Act amendments to the McKinney-Vento Act will be able to adequately and appropriately address the unique needs of transition-aged youth, including youth exiting foster care systems to become stable in permanent housing" (Federal Register Vol. 76, No. 233, p. 75996)

3.2 Counting homeless youth

Estimates of the magnitude of the homeless youth population in America vary widely, again because of the transient, even hidden nature of the population and because researchers use different ages and definitions of homelessness to derive their measures.

> Homelessness among youth is a problem defined by a constellation of constantly changing variables in the lives of youth—where they live, the status of their relationship with caregivers, and their age. In the course of a year, a single youth might be asked to leave home by a parent, spend time in a shelter, return home, run away from home, and end up on the street. Depending on when a research interacted with this young person, he or she might be classified as homeless or housed, runaway or "thrown away," or a street youth. If he or she were age 21 and turned 22 during the course of the year, some researchers might include this person within the population of homeless youth, while others would not. (HHS, 2007, p. 17)

Homeless minors nationwide

In 2009, HUD estimated that unaccompanied minors represented 2.2% of the sheltered homeless population, or about 22,700 (HUD, 2009). Within the field, this number is considered to be a "serious undercount of youth experiencing any kind of homelessness, including youth living in unsheltered and doubled up arrangements" (USICH, 2010, p.15).

In 2009, the National Alliance to End Homelessness estimated that more than two million youth experience at least one night of homelessness each year and that approximately 110,000 youth ages 12 to 24 live day-to-day on the streets and in other public places, in cars, and in abandoned buildings (National Alliance to End Homelessness, 2009).

The Substance Abuse and Mental Health Services Administration (SAMHSA), Office of Applied Statistics reported that in 2002, 1.6 million youth, or 7% of 12- to 17-year-olds, ran away from home and slept in exposed or poorly sheltered locations.

Estimates published by the National Coalition for the Homeless suggest that in 2002, there were close to 1.7 million homeless and runaway youth, the majority being between the ages of 15 and 17 (Molino, 2007).

Homeless young adults nationwide

The estimated numbers of young adults ages 18 to 24 who experience an episode of homelessness each year range from approximately 750,000 to 2 million and are believed to be increasing (National Health Care for the Homeless Council, 2004). Burt et al. (2002) estimated that in 1999, individuals age 18 to 24 made up 13% of the adult homeless population and 26% of homeless families.

3.3 Paths to youth homelessness

There is no typical cause for a young person to become homeless, although research tends to group the reasons that homeless youth give into three broad categories: (1) family problems, (2) economic problems, and (3) residential instability (Moore, 2005; National Coalition for the Homeless, 2008).

Family problems

Many homeless youth leave home because of severe family conflict, which may include physical or sexual abuse, strained relationships, or parental neglect. In fact, according to the National Coalition for the Homeless (2008), disruptive family conditions are the principal reason that young people leave home. Evidence for this is provided by the high proportion of homeless youth—nearly twice as many as homeless adults—who report "family conflict" (including abuse and neglect) as their reason for being homeless (Burt, 2007).

Economic problems

For some youth, economic problems may lead to homelessness (Moore, 2005). Within some families, there may be high rates of parental unemployment (Hagan & McCarthy, 1997); within others, high rates of receiving public assistance or living in public housing (Greene, Ringwalt, Kelly, Iachan, & Cohen, 1995).

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Residential instability

Residential instability, characterized especially by a history of institutional care including foster care and juvenile correctional care, also contributes to homelessness among youth. Courtney et al. (2010), in *Midwest Evaluation of the Adult Functioning of Former Foster Youth*, affirm that foster care youth in particular are at high risk of homelessness. The study followed a sample of young people from Iowa, Wisconsin, and Illinois as they transitioned out of foster care into adulthood. Baseline interviews were conducted with a total of 732 foster youth between May 2002 and March 2003 when the youth were ages 17 or 18; 82% (n=603) were interviewed again at the age of 19, again at age 21 (n=590), and a fourth time at age 23 or 24 (n=602). By the fourth interview, these young adults had been out of foster care for an average of four years. By that time, 37% reported having been homeless or having couch surfed since exiting foster care. One-half who had been homeless had been homeless more than once. Repeated episodes of couch surfing were more common, with two-thirds of the young people who had couch surfed having done so on more than one occasion (Courtney et al., 2010).

A history of foster care also correlates with becoming homeless at an earlier age and remaining homeless for a longer period of time (Roman & Wolfe, 1995). One national study reported that each year, more than 30,000 youth ages 16 and older transition from foster care to legal emancipation or "age out" of the system. Nationally, one-quarter of former foster youth experience homelessness within four years of exiting foster care (Cook, 1991).

3.4 Characteristics of homeless youth in America

Research suggests a number of characteristics and risk factors that are linked to higher rates of homelessness among youth. These include the following:

Sexual minority status. Research findings on the proportion of homeless youth who are gay, lesbian, or bisexual vary, from a low of about 6% from youth-services-center samples to as high as 11% to 35% in street samples. Sexual minority status is a powerful risk factor for youth homelessness because disclosure to a parent or a parent's discovery of that status may lead to a youth being thrown out or running away (Burt, 2007).

Pregnancy. Homeless youth are three times as likely as national samples of youth to be pregnant, to have impregnated someone, or to already be a parent. Pregnancy may be the result of having no way to obtain money other than through prostitution (survival sex) when already homeless or ejection from home because of the pregnancy. This trend continues for homeless young adults ages 18 to 24 (Burt, 2007).

Length of time homeless. Youth using runaway and homeless youth shelters tend to have been homeless only once and for a short period of time. National Survey of Homeless Assistance Providers and Clients data on young adults show that more than half had been homeless for two to nine years. Two-thirds of youth ages 18 to 19 had first become homeless before they were 18; the same was true for a third of youth ages 20 to 24 (Burt, 2007).

School difficulties. A majority of homeless youth have histories of being suspended or expelled from school (HHS, 2007). About half of homeless youth have not finished high school (Burt, 2007).

Mental health. There are high rates of psychiatric disorders among homeless youth, including depression, anxiety, ideas of suicide, conduct disorders, and other mental health disorders (MacLean, Embry, & Cauce, 1999). According to Burt (2007), 45% of homeless youth report having mental health problems in the previous year, and 50 to 56% report having mental health problems over their lifetime.

Physical health. Runaway youth do not have reliable access to health care and are at greater risk of some health problems than non–runaway youth (Benoit-Bryan, 2011). A survey of youth in shelters and on the street found that half of street youth and 36% of shelter youth had no regular source of health care. In addition, the study found that 25% of street youth and 18% of shelter youth reported having had serious health problems in the past 12 months (Klein et al., 2000). Many of the physical health issues faced by homeless youth are similar to those faced by anyone experiencing homelessness. Because homeless youth are more likely to engage in high-risk behaviors such as unprotected sex with multiple partners, drug use, and exposure to and participation in violence, their physical health is jeopardized. In addition, homeless youth face a number of barriers accessing health care, including lack of insurance, a need for parental consent, and difficulty navigating the health system (HHS, 2010).

Substance abuse. Homeless youth exhibit high rates of substance use disorders, including alcohol abuse or dependence and drug abuse or dependence (Toro, Dworsky, & Fowler, 2007). Approximately 30% to 40% of homeless youth report alcohol problems in their lifetime, and 40% to 50% report drug problems. (Burt, 2007).

Deviant or criminal behavior. Homeless youth may engage in risky behaviors including selling drugs, panhandling, stealing, and prostitution or "survival sex" (Whitbeck, Hoyt, & Ackley, 1997). Youth who engage in these "deviant" behaviors often report that they do so to obtain money, food, or shelter (Toro et al., 2007; van Leeuwen, 2002). Therefore, it is likely that youth engage in these behaviors as part of a survival strategy (Robertson & Toro, 1998).

3.5 Characteristics of Daybreak youth

In the words of Daybreak's Clinical Director and Chief Program Officer,

> Most youth requesting services [from Daybreak] have experienced complex trauma and multiple disadvantages and are therefore developmentally immature, have under-developed personal strengths, few role models for a work ethic and accountability (and instead have models of dishonesty, violence, and dependence), multiple losses, mental health issues, cognitive issues, physical issues and lack of motivation. They are unprepared to live on their own but need intensive and long-term assistance. They have lived in subsistence level environments, not just financially, but from all other aspects of well-being. They have not been linked to services that would likely help them. Many have been on an IEP (Individualized Education Plan) in school but have not received the appropriate services to mitigate the issues that led to their school failure. (C. Minton, email survey, April 11, 2011)

Pulling from data that were collected by Daybreak between June 1 and November 28, 2011, staff prepared the following, preliminary profile of clients entering Daybreak's shelter and housing programs (Table 4). These and other data collected by Daybreak over the years demonstrate that Daybreak youth struggle with many of the issues that the literature suggests are common to homeless and at-risk youth populations nationally.

Table 4. Characteristics of Daybreak clients entering shelter and housing, Jun 1–Nov 28, 2011

CHARACTERISTIC	MALE		FEMALE		COMBINED	
	#	%	#	%	#	%
Foster care history	15	34	8	28	23	32
More than three foster care placements	1	2	5	17	6	8
Physically abused (not injured)	26	59	12	41	38	52
Physically abused (injured)	17	39	12	41	29	40
Sexually abused	11	25	12	41	23	32
Domestic violence in the home	16	36	10	35	26	36
Physically neglected	14	32	9	31	23	32
Emotionally neglected	24	55	18	62	42	58
Parent or friend killed	9	21	3	10	12	16
Witness to community violence	25	57	12	41	37	51
Parental addiction/alcoholism (one parent)	13	30	15	52	28	38
Parental addiction/alcoholism (both parents)	11	25	5	17	16	22
Prior mental health hospitalization	9	21	10	35	19	26
Multiple mental health hospitalizations	4	9	5	17	9	12
Substance abuse issues	12	27	3	10	15	21
GLBTQ	5	11	2	7	7	10
Pregnant or parenting	2	5	4	14	6	8
History of legal charges	31	71	17	59	48	66
Felony conviction, juvenile or adult	5	11	0	0	5	7
Misdemeanor conviction, juvenile or adult	27	61	17	59	44	60
Had IEP in school	17	39	12	41	29	40

GLBTQ = gay, lesbian, bisexual, transgender, and questioning; IEP = Individualized Education Plan.

3.6 Staff perspectives of the challenges Daybreak youth face

In an email survey conducted in April 2011, Daybreak staff provided additional insight into the characteristics of Daybreak youth. Staff members were asked what *they* consider to be the biggest issues and needs that Daybreak youth face. Their responses (in no particular order) both reflect and add local and personal perspective to what research has shown nationally.

Lack of basic life skills. Daybreak youth lack basic skills of survival, such as cooking, cleaning, and developing a budget. They also struggle with coping skills, such as anger management, conflict resolution, and how to deescalate situations of potential violence.

Employment and training. One of the biggest hurdles that Daybreak youth face is obtaining and maintaining employment. Many lack real work experience, and many more lack the basic skills needed to search for work, prepare a resume, and interview (well) for a job. Those who become employed may lose their job because of conflict with a supervisor, unreliable attendance, or simply unrealistic expectations about what having a job and earning a living wage really means. These factors are compounded by today's highly competitive job market and recent losses in Dayton's manufacturing and other "low-skill, high-pay" employment sectors.

Limited education. Many Daybreak youth have not finished high school, and others who have graduated do not necessarily function at age-appropriate levels. Most Daybreak youth lack the education necessary to obtain livable-wage employment.

Developmental and mental health issues. Increasing numbers of Daybreak youth are in need of psychiatric care and access to psychotropic medication. Others may be developmentally immature or cognitively delayed. Some struggle with mental illness that is so severe it prevents them from being able to live on their own without permanent support

Risk behaviors. Many Daybreak youth engage in risk behaviors including substance use and abuse and unprotected sex.

Teen and youth violence. In schools, in families, among peers, and on the streets, youth are exposed to increasing levels of violence. Many come into Daybreak extremely angry and aggressive and have to work to separate themselves from the violence of their experience.

Former systems youth. For some Daybreak youth, the situation that brought them to Daybreak relates to their history with mainstream systems like foster care and juvenile justice. For example, a youth might have turned 18, aged out of foster care, and found him- or herself ill-prepared or incapable of living independently. Or an adoptive parent might have opted to "give back" a youth when the youth reached adolescence and became too much for the adoptive family to handle.

Image and confidence issues. Many Daybreak youth lack confidence in their own abilities and have difficulty finding their "voice" and developing their own personal strengths. Many do not understand the difference between a "healthy" and an "unhealthy" relationship and allow others to dictate their place or role in relationships. Others struggle with fears of abandonment.

Lack of internal motivation. Some Daybreak youth lack direction and demonstrate little motivation for setting and achieving goals toward self-sufficiency. Many Daybreak youth come from backgrounds where few, if any, accountable, success-oriented adult role models exist. Quite the opposite, many are exposed to models of dishonesty, dependence, and violence. For some youth, it is challenging to develop and ultimately "own" the belief that a person can achieve anything he sets his mind to, given the right tools, plan, and hard work.

Lack of family support. Other youth end up at Daybreak because their parents kicked them out or because conflict, unhealthy relationships, or an overall lack of support within the home forced them out. In the Dayton area, there is also a growing population of gay, lesbian, and transgender youth who become homeless after they "come out" to their families and are kicked out of their homes. More than one third of Daybreak youth come from homes where one or both caregivers is a serious substance abuser.

Lack of permanent supportive housing options for youth. For Daybreak youth who are severely mentally ill or developmentally delayed, who require more intensive and permanent support than Daybreak can provide, there is a lack of permanent supportive housing options in the Dayton area. For other "gapper" youth—those who are too low-functioning for Daybreak's housing program but are not "low enough" to qualify for permanent supportive housing—Dayton's lack of affordable, permanent housing options is perhaps more critical.

4.0 Service Gaps

Evaluation questions addressed

- *What is the current status of youth in the Dayton area? (Question 1)*

4.1 Homeless youth in Montgomery County

In 2011, over an 11-month period spanning January 1 to November 30, a total of 1,153 youth ages 18 to 24 were served by Montgomery County's homeless system, as evidenced by their entry into the county's Homeless Management Information System (HMIS); 75% of these youth were between the ages of 18 and 22—the age range eligible to be served by Daybreak's emergency shelter (18-year-olds only) and housing programs (18- to22-year-olds). Yet on average, Daybreak's shelter serves approximately 100 18-year-olds, and the transitional housing program serves about 100 18 to 22-year-olds annually. Daybreak does not have the capacity to serve every homeless youth in the area: the total bed capacity for the shelter is 18 and for the housing program, 54 (not including children). And to clarify, not every one of the 1,153 youth entered in the county's HMIS were necessarily in need of shelter—some were served through Homelessness Prevention and Rapid Re-housing Program (HPRP) services; others received street outreach or other services without meeting HUD's definition of "homeless." However, because Daybreak is the only youth-focused shelter and housing program in the Dayton area, what these figures suggest is that some percentage—and possibly a large percentage— of homeless youth in Montgomery County is being served either through outreach only or through homeless systems that are primarily designed to serve adults. As the previous section of this report suggests, and as will be covered in Section 6, the needs of homeless youth are uniquely different from those of adults. Programs and services to address those needs should be tailored to fit where youth are developmentally, cognitively, and emotionally. That so many of the county's homeless youth are being served by adult systems suggests a gap in services in the community.

Table 5 presents demographic data of all youth ages 18 to 24 served by Montgomery County's homeless system in 2011 (January to November).

Table 5. Demographics of youth entering Montgomery County HMIS, ages 18–24 (Jan. 1–Nov. 30, 2011)

	AGES 18–22		AGES 23–24		COMBINED	
	#	%	#	%	#	%
Total population	**862**	**75**	**291**	**25**	**1,153**	**100**
Gender*						
Male	409	35	137	12	546	47
Female	448	39	150	13	598	52
Race*						
Black or African American	539	47	160	14	699	61
White	252	22	104	9	356	31
Multiracial	48	4	18	2	66	6
Other	3	<1	1	<1	18	2
Household type*						
Female single parent	312	27	110	10	422	37
Male single parent	15	1	3	<1	18	2
Two-parent family	38	3	14	1	52	5
Other	46	4	17	13	63	5
Extent of homelessness*						
1-2 times in the past	--	--	--	--	198	17
2 years or more	--	--	--	--	14	1
4 times in past 3 years	--	--	--	--	24	2
First time homeless	--	--	--	--	237	21

	AGES 18–22		AGES 23–24		COMBINED	
	#	%	#	%	#	%
Education level*						
Post-secondary	3	<1	3	<1	6	<1
High school diploma/GED	224	19	95	8	319	28
12th grade, no degree	44	4	8	1	52	5
Some high school	199	17	54	5	253	22
7th-8th grade	5	<1	6	<1	11	1
Currently in school*						
No	239	21	94	8	333	29
Yes	129	11	19	2	148	13
Employed*						
No	587	51	211	18	798	69
Yes	118	10	39	3	157	14
Parenting*						
One child	50	4	18	2	68	6
Two children	22	2	12	1	34	3
Three or more children	15	1	9	1	24	2
Criminal history*						
Yes	67	6	42	4	109	9

Source: Montgomery County HMIS

* Because of missing data, totals across age categories and percentages do not add to 100%

4.2 Perceptions of local providers

Need for services

In March 2011, Daybreak distributed a web-based survey (developed by CRP with the assistance of Daybreak staff) to approximately 60 area nonprofit and public agency service providers; the survey explored, among other things, issues facing Dayton youth, demand for services, and gaps in services. The survey received a total of 31 responses (50% response rate) from individuals representing housing and homeless service agencies, educators, child welfare and juvenile justice agencies, health care providers, neighborhood development organizations, workforce development providers, and other organizations.

Respondents were presented with a list of problems and issues that Dayton-area teens and young adults ages 18 to 24 *potentially* faced and were then asked to what degree they thought services and supports in these areas needed to be increased. To every category, a majority of respondents indicated that "much more" needs to be done locally to address the issue. They identified these issues requiring the greatest attention (based on more than 60% of respondents indicating it as an issue that required "much more" work):

- Peer violence (61%)
- Alcohol and drug abuse among youth (71%)
- Mental health issues (71%)
- Unemployment (71%)

Respondents were also asked what level of need exists for specific services in the areas of (1) health care, (2) education, and (3) employment for *all* youth ages 10 to 24.

In terms of health care, services where respondents felt there is *critical* need (versus low, moderate, or high need) include primary health care (37% indicating a critical need); high-risk sexual activity prevention (43%); and mental health services, both in-patient (47%) and out-patient (50%).

In the area of education, services where there is critical need include opportunities to attend alternative schools (30% indicating a critical need) and Ohio Graduation Test preparation (37%).

In the area of employment, critical services include certificate/apprenticeship programs (53% indicating a critical need), vocational training (57%), and youth employment (63%).

Need for housing

Providers were asked to indicate what level of need currently exists for certain types of housing for youth ranging in age from 10 to 24 (Table 6). Overall, providers indicated a need for more of *all* types of housing, with perhaps additional emphasis on housing for youth aging out of foster care, permanent supportive housing for youth with severe mental or physical disabilities, and Housing First-model housing.

Table 6. Perceptions of Dayton-area housing needs for youth ages 10–24 (n=31)

TYPE OF HOUSING	LOW NEED	MODERATE NEED	HIGH NEED	CRITICAL NEED
Emergency shelter				
Ages 10–18	7%	19%	**42%**	26%
Ages 19–24	7%	19%	29%	**42%**
Pre-transitional housing				
Ages 15–17	7%	13%	**52%**	26%
Ages 15–17 pregnant or parenting	3%	16%	**48%**	26%
Transitional housing (18–24 months)				
Ages 18–21	0%	23%	36%	**39%**
Ages 22–24	0%	23%	**36%**	**36%**
Emergency housing for stabilization (4–6 months)				
Ages 18–21	0%	23%	**45%**	29%
Ages 22–24	0%	26%	**39%**	29%
Housing First with supports				
Ages 18–24	7%	10%	**52%**	29%
Permanent supportive housing for homeless with mental or physical disability				
Ages 18–24	0%	10%	29%	**58%**
Housing for youth aging out of foster care				
Ages 21–24	3%	7%	26%	**61%**
Housing for youth reentering from juvenile justice				
Ages 10–18	10%	10%	19%	**48%**

4.3 Perceptions of funders and local government representatives

In March 2011, CRP facilitated a series of focus groups with (1) representatives from city and county government, including members of the Montgomery County Homeless Solutions Policy Board; (2) Daybreak funders; (3) Daybreak board members; and (4) Daybreak youth. Questions asked in each focus group differed based on the experience and knowledge of participants. In two focus groups—with city and county government representatives and with Daybreak funders—participants were asked what they perceived to be the greatest needs and priorities for serving homeless populations in the Dayton/Montgomery County area. Their responses included the following:

- Services that address the growing levels of poverty in the region, especially the loss of manufacturing jobs and jobs that pay a living wage
- Affordable housing in general
- Housing that can serve homeless single individuals (single men, primarily)
- Housing that can serve homeless families
- Employment services, including education, training, and placement services
- Mental health centers and broader eligibility for mental health services
- Greater and more long-term aftercare and follow-up services, especially for formerly homeless youth who are housed
- Case management services

4.4 Perceptions of Daybreak staff

In the email survey of Daybreak staff conducted in April 2011, staff was asked what gaps exist in the community to meet the needs of the homeless and at-risk youth populations that Daybreak serves. Their responses are summarized below.

Mental health services. As mentioned previously, many Daybreak youth require psychiatric care and access to medication. Others struggle with cognitive and/or developmental delays and require not only access, but timely access, to appropriate services.

Supportive housing options for youth. Within Dayton and Montgomery County, there are limited supportive housing options for youth who struggle with mental illness, who have cognitive and/or developmental delays, who cannot live independently without the continuing support of case management services, or who require a high level of structure and a rigid living environment to succeed. These youth are typically not appropriate for Daybreak housing because their needs are too great. However, because of eligibility requirements and other restrictions (which some argue favor adult homeless populations to the detriment of youth), these youth also do not qualify for permanent supportive housing.

Other affordable housing options. In addition to supportive housing for youth, there is a lack of affordable housing generally within the Dayton and Montgomery County area, especially for youth and especially for youth aging out of foster care and other mainstream systems.

Housing that is appropriate for the age, development, and skill level of youth. Many Daybreak staff members believe that Housing First and other rapid re-housing models that emphasize getting homeless individuals into housing before preparing them to live independently are not appropriate for the youth Daybreak serves. Their perception is that when you put youth into housing without services and without teaching them essential life skills and coping mechanisms, they fail. For these youth, problems can be compounded by eviction, debt, legal charges, or victimization.

Employment services. Employment training and placement services for youth are lacking. Within the community overall, there are not adequate jobs that are appropriate for youth (who have limited work experience) and also pay well. Daybreak youth would benefit from more opportunities to train, apprentice, and be placed in jobs. They also need assistance developing professional interpersonal skills, including how to interview, workplace etiquette, communicating with supervisors, etc.

Coordination of services across providers. Daybreak staff members believe that within Dayton and Montgomery County, there are opportunities for more and better coordination across service providers. This includes improving communication across providers, improving connections with child welfare and other agencies to support the needs of emancipating "systems" youth, and ensuring (rather than assuming) that all providers are engaged and following up to deliver needed services to youth.

5.0 Daybreak Services

Evaluation questions addressed

- *How is the Daybreak youth shelter and transitional housing program being implemented? (Question 2)*

A primary function of the Year One Process Evaluation is to describe how services are provided to youth through Daybreak's programs. In the following pages, emphasis will be given to programs that are the focus of the impact evaluation—namely, emergency shelter for 18-year-olds who are on track for housing and transitional housing for youth ages 18 to 21. Brief descriptions of Daybreak's street outreach and group home programs are also provided. The section concludes with a detailed description of the services youth receive through all of these programs.

5.1 Opportunity House

During the spring of 2008, Daybreak moved from its original location on Wayne Avenue into a newly renovated building called Opportunity House, located at 605 S. Patterson Boulevard. The renovation project, which began in 2006 and cost approximately $10 million to complete (Table 7), transformed a dilapidated warehouse into a brightly colored 50,000 square foot facility designed to safely and effectively serve homeless, runaway, and troubled youth in the Miami Valley (Figure 3).

Figure 3: Opportunity House (before and after renovation)

Table 7. Funding sources for the revovation of Opportunity House

FUNDER	AMOUNT
Daybreak Capitol Campaign and other private sources	$5,700,000
Low Income Housing Tax Credits (LIHTC) allocated by OHFA	$1,744,635
Federal Home Loan Bank	$750,000
State of Ohio Housing Development Assistance Program (HDAP)	$600,000
Montgomery County and CountyCorp*	$265,000
Developer fee to Daybreak from LIHTCs	$250,000
Proposed sale of former Daybreak shelter	$230,000
HUD	$198,000
Enterprise Green Communities**	$71,000
City of Dayton	$50,000
TOTAL	$9,858,635

* CountyCorp is a private non-profit development corporation for Montgomery County

** Green Communities provides grants, financing, and tax-credit equity to developers who meet criteria for affordable housing that promotes health, conserves energy, and provides easy access to jobs, school, and services

Opportunity House is centrally located in downtown Dayton, on a major bus route; it is within one mile of a major hospital, county and local government offices, Montgomery County's One-Stop employment center, the public library, Sinclair Community College, and the University of Dayton. It is also close to numerous public and nonprofit service providers, retail establishments, banks, and parks.

The building was designed to be energy-efficient and includes a geothermal heating and cooling system, and energy-efficiency windows and appliances. The building's four floors housing Daybreak's emergency shelter and its on-site transitional housing program – Beachler apartments – as well as office space to accommodate all Daybreak employees and numerous amenities for Daybreak clients. Design features include the following (Table 8):

Table 8. Design features of Opportunity House

FLOOR	FEATURES
Basement (8,000 square feet)	• Back Room Coffee House, equipped with microphones and disc jockey/recording equipment, couches and chairs. Approximately 40 youth from all Daybreak programs gather on Wednesday evenings to recite poetry, sing, dance, and engage in other forms of self-expression.
	• Daybreak "pantry" stocked with items such as diapers, canned goods and beverages, household products, backpacks, etc. for youth in emergency shelter, housing, and street outreach programs. Walk-in freezer for bulk food storage.
	• Storage areas
First floor (16,000 square feet)	• Front desk and lobby
	• Counseling center with individual and group rooms, and education and classroom space
	• Street outreach area with lockers, shows, and laundry facilities
	• Emergency shelter for a maximum of 18 individuals (14 private rooms, 1 double-occupancy room, and 1 "overflow" room that can accommodate two individuals). Includes a full commercial kitchen, dining and living areas, private intake area, 24-hour staff supervision and work area for shelter and 24-hour hotline staff, 5 private bathrooms, computer lab, furnished recreation room, laundry room, private lockers, and storage areas.
	• Beachler efficiency apartments (4 total). Units are part of Daybreak's on-site transitional housing program, but not funded using LIHTC dollars. Homeless youth who do not meet the LIHTC student rule exemption may live in one of these non-tax credit units.
Second floor (16,000 square feet)	• Beachler apartments (20 total). Entire second floor accommodates 20 LIHTC-funded efficiency apartments, fully furnished for single individuals or single individuals with up to one child under the age of three. 24-hour staff supervision area, common lounges, laundry room, computer lab, separate bathing room for safely bathing infants and young children, indoor play area for infants and young children, and rooftop patio.
Third floor (12,000 square feet)	• Daybreak offices, including work space to accommodate 50+ employees, large cubicles, meeting rooms, workspace for university interns, secure file room with work tables, break room, and storage areas for employees and interns.
	• Rooftop urban vegetable garden, funded with private donations, installation of the garden is planned for Spring 2012 to teach about healthy nutrition and how to grow and cook their own vegetables.

5.2 Emergency shelter

Daybreak's emergency shelter provides youth ages 10 to18 with physical safety and emotional support in addition to a variety of other services. The shelter is open 24 hours a day, seven days a week, and has a maximum occupancy of 18.[5]

18-year-olds in shelter

Daybreak offers two different levels of shelter service for 18-year olds. The first level of service is called "crash" and is designed for youth who come to Daybreak for a safe place to stay and sleep but who express no interest or willingness to participate in the shelter's structured program. In essence, these youth seek minimal rules and requirements. Youth on "crash" status have access to meals, a bed and linens, bathroom and laundry facilities, basic hygiene items, and a phone. Crash residents are expected to follow basic shelter rules and policies outlined in Daybreak's *Shelter Handbook for 18-Year Olds,* which is provided to every resident at intake. They may stay in shelter for a maximum of 14 nights during a 30-day period, and are provided with material support and referrals to other housing, resources, and services in the community.[6] Crash residents may leave the shelter during the day but are expected to return in time for dinner or risk "losing their bed" to the next incoming youth. When they return in the evenings, youth on crash status are expected to eat at the regularly scheduled dinner hour, assist with clean-up, and participate in evening shelter activities.

The second level of shelter service is called "programmatic" and is designed for youth who come to shelter wanting more than a place to crash. Youth in the programmatic level of shelter actively participate in case management and structured services designed to help them develop basic life skills and achieve housing, educational, employment, and other personal goals necessary for independence and self-sufficiency. Daybreak expects higher levels of participation and engagement from youth at the programmatic level than from crash youth, however the personal gains and chances of long-term success are greater. Daybreak's programmatic shelter allows youth to stay for a maximum of 90 days, provided they continue to work on and progress toward their goals.

Regardless of age or program level, Daybreak's objective is to help all shelter youth secure safe permanent housing. For some, this may mean reuniting with family or moving in with another appropriate caregiver. For others, and for many of Daybreak's 18-year olds, it means living independently as a contributing member of society. Independent housing options for older youth include but are not limited to affordable apartments, subsidized housing or vouchers, transitional housing, permanent supportive housing, living with friends or family members, university housing, and military housing.

Shelter rules

Rules and guidelines established for the shelter program function to make the shelter a safe home for its residents. In the interest of safety and security, and in the spirit of creating an atmosphere of comfort, respect, cooperation, support, and responsible behavior, the following shelter rules and policies apply to all residents of all ages.

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[5] The shelter was originally designed to accommodate 16 youth at any given time with 14 single bedrooms and one double bedroom. Within a year of construction, to meet demand, staff moved the computers out of what was the shelter's computer lab and converted the lab into an overflow room that can accommodate two additional youth (on futon beds).

[6] Daybreak staff does not collect or track assessment or outcome data for crash shelter residents in the same way (or to the same extent) as they do for 18-year-olds who are actively participating in the shelter program. For this reason, data for crash shelter residents are not included within the scope of the impact evaluation.

Rules for all shelter residents

Chores. Residents must make their bed every day, keep their room neat, do their own laundry, keep common spaces clean, clean up after meals, and help with assigned chores such as vacuuming and emptying garbage bins.

Dress code. Shelter residents must wear shoes at all times (except when sleeping) and are expected to dress appropriately in clothing that is free of alcohol or drug advertising, foul language, or inappropriate visual images.

Illegal drugs and alcohol. Illegal drugs and alcohol are not permitted at any time on Daybreak premises. Smoking is not permitted in the building. Smoking is permitted (for those of legal age) in designated smoking areas on Daybreak property.

Medication. Prescribed medications must be kept in original containers and are stored by Daybreak staff in a locked cabinet. The use of medication is monitored and documented by staff.

No touching. Many youth who come to Daybreak come from backgrounds of crisis, worry, confusion, and even violence. Daybreak's priority is to create an environment in which residents are protected and feel safe. All shelter residents are required to maintain a distance of at least one foot (12 inches) from other youth in the shelter.

Violence. Physical, verbal, or property violence is prohibited at all times. Conduct that threatens, intimidates, or coerces another person is not tolerated and is grounds for dismissal from the shelter.

Weapons. Firearms, explosives, hazardous, or illegal substances are not permitted on Daybreak premises. Daybreak reserves the right to remove or store any item that is deemed dangerous and will report any weapons found on its grounds to police.

Some rules and expectations differ depending on whether a resident is a minor or 18 years of age. The following additional rules and expectations apply to all 18-year-olds in shelter.

Rules for all 18-year-olds

Identification and benefits. Within the first 30 days of entering shelter, and with help from Daybreak staff, 18-year-olds obtain their birth certificate, Social Security card, and state identification card. Youth must also complete an application for government benefits including food stamps and Medicaid coverage and must complete an application for the Dayton Metropolitan Housing Authority's subsidized housing program. Accessing benefits of this type make it possible for a homeless 18-year-old to eventually obtain permanent housing and financial support.

Phone calls and visitors. Eighteen-year-olds are responsible for maintaining an authorized phone call and visitor list. Callers or visitors not on this list will not be given any information about the resident. Personal cells phones are stored by Daybreak staff while youth are in the shelter but are accessible to the youth.

In and out times. Eighteen-year-olds must be in the shelter by 10:00 p.m. Sunday through Thursday and by 11:00 p.m. on Fridays and Saturdays. They must be in their rooms with lights out by 11:00 p.m. Sunday through Thursday and by midnight on Fridays and Saturdays. Shelter "quiet time" is between 7:00 and 8:00 p.m. Sunday through Thursday.

Wake up. 18-year-olds are responsible for setting their own alarm clock and getting up in the morning. They are required to be up by 8:00 a.m. on weekdays and by 9:00 a.m. on weekends. (Exceptions are made for those who work third shift.)

Additional rules and expectations are required of 18-year-olds participating in Daybreak's programmatic shelter. As previously explained, these additional rules focus on helping youth develop basic life skills and achieve housing, educational, employment, and other personal goals necessary for independence and self-sufficiency.

Additional rules for 18-year olds in programmatic shelter

School. If an 18-year-old has not finished high school or obtained a GED, he or she is strongly encouraged and helped to enroll in school or begin pursuing a GED within 30 days of entering the shelter. Once enrolled in a school program, shelter staff works with youth to develop daily routines that promote, support, and reward school attendance.

Employment. If an 18-year-old is unemployed and not attending school, he or she is expected to seek employment every day and provide written verification of this to staff.

Attendance. Youth are expected to attend assigned groups, sessions, meetings, and classes as determine by the youth and his or her case manager. Excessive noncompliance of this expectation is grounds for termination from the programmatic level of the shelter, but a youth may still be eligible to stay in shelter on crash status.

5.3 Transitional housing

Daybreak's transitional housing program has two components: Beachler apartments (24 in total)—which are located within Opportunity House, are highly supervised, and operate using a "Daybreak Dollars" token economy system of incentives and rewards—and community apartments (30 in total)—which are owned and operated by private landlords throughout the Dayton area, are leased to Daybreak, and rented to youth who have demonstrated the ability to live independently and take on increasing levels of financial responsibility.

To qualify for Daybreak's housing program, applicants must meet the following criteria:

- Be 18 to 21 years of age[7]
- Be homeless, which means (in accordance with McKinney-Vento) coming from the streets, emergency shelter, or other unsafe living situation not fit for human habitation
- Have income at or below 35% of the area median income
- Have no other viable housing option
- Have no active psychosis or untreated chemical dependency[8]
- Have no violent crime convictions, including but not limited to arson, murder, or rape
- Agree to Daybreak's program rules and expectations

Any applicant requesting entry into Daybreak's housing program must complete a comprehensive application process, which can take two to six weeks[9] depending on the time it takes youth to complete their portion of the process and the time it takes to receive required documentation by the LIHTC Program. During that time youth up to the age of 18 may reside in Daybreak's emergency shelter or continue to receive services through Daybreak's outreach program. The intake process comprises different activities intended to (1) provide youth with an understanding of Daybreak's program and expectations, and (2) provide Daybreak staff with a sense of each applicant's level of motivation and commitment to "working" the Daybreak program. These activities include the following:

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[7] Exceptions for 17-year-olds may be granted under special conditions.

[8] Youth in treatment may be eligible.

[9] The application process includes completing a Tax Credit Unit Qualification application, which must be verified and approved by the Ohio Housing Finance Agency, the agency that administers Ohio's LIHTC program.

- Attend an orientation session about Daybreak's program
- Meet a minimum of three times with Daybreak staff from the street outreach program (these staff work with the youth to secure initial documentation such as birth certificates, Social Security cards, etc.)
- Complete a mental health assessment (administered by a licensed Daybreak social worker)
- Complete life skills classes
- Meet with Daybreak's Housing Director to review program expectations and requirements
- Consent to a urine drug screen and a criminal background check[10]

Both components of the housing program (Beachler apartments and community housing) are designed to provide housing residents with the opportunity to develop life skills, increase their education, find employment, and achieve financial security. As Daybreak describes it, the housing program is "training for life" and strives to "move homeless youth out of homelessness, poverty, under-education, and crisis and into housing, financial independence, educational achievement, and self-sufficiency." Similar to the shelter program, residents are required to comply with the rules and regulations that govern the housing program.

5.3.1 Beachler apartments

Beachler apartments are efficiency units for males and females, including pregnant females and single individuals living with one child up to three years old. Of the 24 apartments, 20 are LIHTC units and four are non-LIHTC units that can accommodate full-time students. [11] The apartments are leased on a monthly basis. On the date of a new resident's move-in, he or she meets with Daybreak's housing director to review and sign a lease that includes "house rules" that are permissible in a lease agreement, such as rent payments, keys, sanitation, notification of repairs, etc.[12]

Tenants also sign a separate rental subsidy agreement with Daybreak and receive a housing handbook that clearly describes the rules and expectations associated with accepting a rental subsidy from Daybreak. These rules include the requirement that youth meet with their case manager to jointly develop a weekly schedule of activities and an Individualized Service Plan (ISP) designed around the youth's housing, financial, educational, employment, and personal goals. The ISP serves as the youth's written goal plan and clearly identifies

- The youth's goals (personal, financial, etc.)
- The barriers the youth may face attaining his or her goals
- The services and activities that can help the youth achieve those goals
- The role Daybreak can play helping the youth remove barriers and achieve goals
- The specific steps, tasks, and activities the youth agrees to pursue
- A target timeline for achieving various activities

In general, ISPs for Beachler apartment residents are designed to be achievable within a 9- to 12-month timeframe and are typically divided in three parts (because for some youth, 9 to 12 months sounds like a lifetime): Level 1 applies to a resident's first three months in

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[10] A positive drug screen or a negative finding in a background check will not automatically make a youth ineligible, but will trigger discussion with the youth.
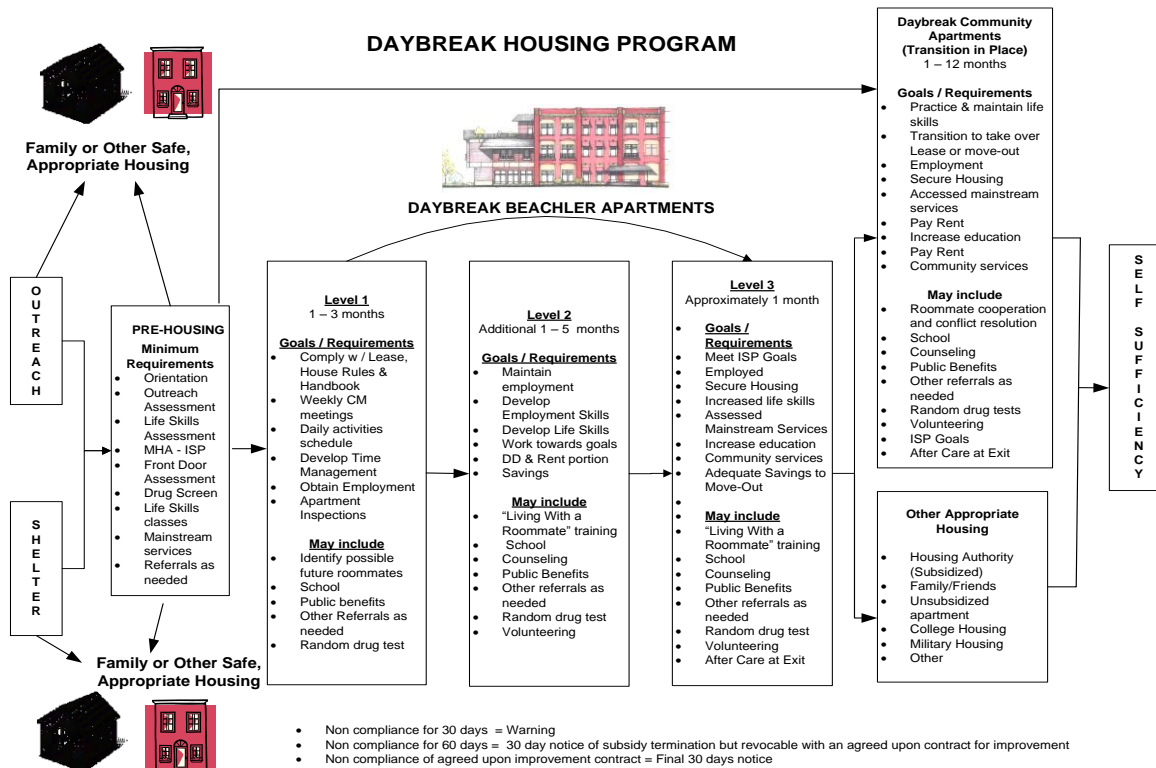
[11] Federal requirements for the LIHTC Program typically reserve LIHTC units for low-income individuals who are not full-time students.

[12] Because Opportunity House was funded in part with LIHTC dollars, the landlord under these lease agreements is "Opportunity House, LLC," not Daybreak. Daybreak is a managing partner of Opportunity House, LLC.

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housing, Level 2 to the resident's next one to six months in housing, and Level 3 to his or her final months in a Beachler apartment (Figure 4).

Figure 4: Daybreak housing program

DAYBREAK HOUSING PROGRAM

Family or Other Safe, Appropriate Housing

OUTREACH

SHELTER

PRE-HOUSING
Minimum Requirements
- Orientation
- Outreach Assessment
- Life Skills Assessment
- MHA - ISP
- Front Door Assessment
- Drug Screen
- Life Skills classes
- Mainstream services
- Referrals as needed

Family or Other Safe, Appropriate Housing

DAYBREAK BEACHLER APARTMENTS

Level 1
1 – 3 months
Goals / Requirements
- Comply w / Lease, House Rules & Handbook
- Weekly CM meetings
- Daily activities schedule
- Develop Time Management
- Obtain Employment
- Apartment Inspections

May include
- Identify possible future roommates
- School
- Public benefits
- Other Referrals as needed
- Random drug test

Level 2
Additional 1 – 5 months
Goals / Requirements
- Maintain employment
- Develop Employment Skills
- Develop Life Skills
- Work towards goals
- DD & Rent portion
- Savings

May include
- "Living With a Roommate" training
- School
- Counseling
- Public Benefits
- Other referrals as needed
- Random drug test
- Volunteering

Level 3
Approximately 1 month
Goals / Requirements
- Meet ISP Goals
- Employed
- Secure Housing
- Increased life skills
- Assessed Mainstream Services
- Increase education
- Community services
- Adequate Savings to Move-Out

May include
- "Living With a Roommate" training
- School
- Counseling
- Public Benefits
- Other referrals as needed
- Random drug test
- Volunteering
- After Care at Exit

Daybreak Community Apartments (Transition in Place)
1 – 12 months
Goals / Requirements
- Practice & maintain life skills
- Transition to take over Lease or move-out
- Employment
- Secure Housing
- Accessed mainstream services
- Pay Rent
- Increase education
- Pay Rent
- Community services

May include
- Roommate cooperation and conflict resolution
- School
- Counseling
- Public Benefits
- Other referrals as needed
- Random drug tests
- Volunteering
- ISP Goals
- After Care at Exit

Other Appropriate Housing
- Housing Authority (Subsidized)
- Family/Friends
- Unsubsidized apartment
- College Housing
- Military Housing
- Other

SELF SUFFICIENCY

- Non compliance for 30 days = Warning
- Non compliance for 60 days = 30 day notice of subsidy termination but revocable with an agreed upon contract for improvement
- Non compliance of agreed upon improvement contract = Final 30 days notice

Beachler apartment rules

Many of the same rules that govern Daybreak's shelter program also apply to the Beachler apartments, including the following:

- Appropriate dress code
- No illegal drugs or alcohol
- No violence
- No weapons

In addition, the following rules apply:

Income/Employment. Residents must actively seek and maintain employment (typically a minimum of 20 hours, but this varies depending on school, parenting, and/or other responsibilities.) Residents who are eligible to receive public benefits such as food stamps, Ohio Works First (OWF), Social Security Disability, etc. are expected to apply as appropriate.

Apartment condition. All furniture and furnishings within the Beachler apartments belong to Daybreak. Residents are required to keep their apartments clean and to properly maintain the furnishings within them. Residents are responsible for any damages they or their visitors cause to Daybreak property.

Apartment inspection. Daybreak reserves the right to enter Beachler apartments at any time if staff have reasonable suspicion of the existence of safety, security, and hygiene hazards or property damage in the unit.

Visitors. Outside visitors are permitted between the hours of 10:00 a.m. and 10:00 p.m. Sunday through Thursday and between 10:00 a.m. and 11:00 p.m. on Fridays and Saturdays. Residents may not have more than three visitors at a time. Visitors are subject to a security check upon entering the building and are not permitted to be anywhere in the building (in the apartments or in common areas) unaccompanied. Overnight visitors are not permitted.

Pets. Pets are not permitted on Daybreak property.

Courtesy quiet time. Quiet time runs from 12:00 a.m. to 6:00 a.m. Sunday through Thursdays and from 1:00 a.m. to 6:00 a.m. on Fridays and Saturdays.

Overnight absence. Residents are expected to stay in their apartments for a minimum of five nights a week, although permission for extended absences may be granted (for illness, a family emergency, special personal plans, etc.). Tenants with frequent and/or long unexcused absences risk losing their "homeless" status and therefore, their rental subsidy under the rules of the LIHTC Program and Montgomery County's CoC homeless system.

Beachler residents with children

Beachler apartments are efficiency units and can accommodate a single parent with one child under the age of three. Parents in the Beachler apartments are responsible for their children at all times. Children are never permitted to be in an apartment alone. Daybreak provides volunteer babysitters for times when parents must attend Daybreak groups or individual sessions within the building. When parents leave their child with a Daybreak babysitter, they must keep a baby monitor with them.

Daybreak Dollars

Daybreak Dollars is the contingency management system—or token economy system—that governs the rental subsidy component of Daybreak's low-income housing program, Beachler apartments. Daybreak Dollars is designed to encourage Beachler residents to engage in proactive behaviors by rewarding specific activities with Daybreak Dollars. When residents apply to live in a Beachler apartment, they also apply for the Daybreak Dollars subsidy. Beachler residents are required to submit verification of all activities for which they may earn Daybreak Dollars every week by Sunday at midnight. Table 9 shows the menu of activities for which residents may earn Daybreak Dollars.

An apartment at Daybreak costs $495 per month to rent. As a subsidized program, residents are required to pay 30% of their income (to a maximum of $40) toward their monthly rent, and the remaining balance is earned through Daybreak Dollars, which ranges between $455 and $495 (or between $105 and $115 each week) depending on how much the resident pays in cash. When Daybreak Dollars are used to pay the rental subsidy, the exchange rate is an even exchange, meaning that one Daybreak Dollar is equal to one U.S. dollar (USD).

To encourage saving, once a tenant earns his or her rent in Daybreak Dollars, he or she is then required to save a minimum of $125 Daybreak Dollars each month in the Daybreak virtual bank. Assuming a resident stays in a Beachler apartment for 12 months, saving $125 Daybreak Dollars per month amounts to $1500 Daybreak Dollars in the virtual bank that may be "cashed out" upon graduation from the program. Tenants who earn Daybreak Dollars in excess of the amount required for their rental subsidy and mandatory savings may choose to spend additional funds to purchase items from Daybreak's pantry or catalogue, although no more than $50 per month can be spent in either category. In the event a resident does not meet his or her rental subsidy in a given month, Daybreak Dollars savings can be used to pay the remaining balance.

Upon graduation, tenants may convert their accumulated savings of Daybreak Dollars to USD at an exchange rate of 0.50 USD for 1 Daybreak Dollar. This means that if the resident has saved a maximum of $1,500 Daybreak Dollars, he may cash it in for $750 USD, provided

the money is used to purchase furniture or other household items for a new apartment. If the tenant prefers to convert saved Daybreak Dollars straight to cash, the maximum that can be converted is $1,000 Daybreak Dollars for $500 USD.[13]

Table 9. Daybreak Dollars activity menu

ACTIVITY	$DD EARNED PER HOUR	POTENTIAL $DD EARNED DAILY	POTENTIAL $DD EARNED WEEKLY
Weekly schedule included with verifications submitted by Sunday at midnight			$5
Employment	$5	$40	$200
School attendance and homework	$5	$20	$100
Verified documentation of a job interview		$40	
In not employed, 3 online job applications per day		$5	$25
In not employed, 1 job application completed and submitted at job site		$5	
If not employed , employment assistance with an intern	$10	-	-
Case manager weekly meeting (required)	$10	-	$10
Individual therapy (4 initial sessions required)	$10	-	$10
Groups (Housing, Feelings, Parenting, Power Club, Community)	$10	-	-
Clean apartment (required)	-	-	$10
Showing clean apartment for visitors	-	-	$10
9 a.m. group (Monday-Friday; required if not in school or employed full-time)	-	$10	$50
Completed homework assignments authorized by case manager	$5	-	-
"Relationship" with intervention specialist (required if Individual)	$10	-	$10
"Anger management" with intervention specialist (required if Individual)	$10	-	$10
Supper Club	$10	-	$10
Coffee House	$10	-	$20
6 p.m. group (Monday—Thursday)	$10	$10	$40
Medical appointment for you or your baby	-	$5	-
Caring for your child during first 6 weeks/8 weeks for C-section	-	$5	$35
Physician mandated bed rest	-	$25	-
Documented participation in other agency community programs	$5	-	-
Volunteer hours in the community (recommended if not making weekly Daybreak Dollars)	$5	-	-
"Outstanding Achievement Client" receives $100 Daybreak Dollars			
Infraction-free week (if schedule submitted on time)			$20

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[13] The Daybreak Dollars program was started in 2009 with start-up funds provided by the Ohio Capital Corporation for Housing. Today the program is funded through private donations.

Noncompliance

Violations of certain Daybreak policies result in consequences in the form of fines and specific correction actions.[14] Under Daybreak Dollars, youth may be fined or may lose Daybreak Dollars for the following actions:

- Not paying rent by the fifth day of the month ($50 Daybreak Dollars)
- Missing or being late to any Daybreak appointment, mandatory or scheduled (between $5 and $10 Daybreak Dollars)
- Not maintaining a clean apartment ($10 Daybreak Dollars)
- Breaking housing program or house rules regarding common areas, visitors, etc. ($10 Daybreak Dollars)
- Parking violations (no permit, no insurance, parking in unauthorized spaces, etc.; between $10 and $150 Daybreak Dollars depending on nature and frequency of violation)

Consistent failure to make enough Daybreak Dollars to pay for rent each month results in a 30-day Written Warning. If a tenant continues to fail to make rent 30 days after receiving this warning, he or she receives a 30-day Revocable Notice of Discharge from the program. At this point, the tenant is given the opportunity to develop a Subsidy Termination Prevention Contract (STPC), which serves as a corrective action plan between the tenant and his or her case manager. If the tenant meets the terms of the STPC, the Notice of Discharge is revoked, or, if there is evidence of significant effort or improvement, the STPC may be extended or revised. If the terms of the contract are not met, the subsidy termination becomes effective and the tenant is required to pay the rent in full, without Daybreak's subsidy ($495). Nonpayment of rent is grounds for eviction, but in most cases, staff members can avoid the eviction process by helping the tenant identify and secure a safe exit and by providing street outreach and/or aftercare services.

Exiting Beachler apartments

Daybreak's ultimate goal is to help all of its homeless youth clients mature into self-sufficient, independent young adults who obtain and maintain safe, secure permanent housing. For some youth, however, the path is not always a straight one or free of setbacks. While many clients achieve a positive housing outcome upon exiting a Beachler apartment, some do not. Typically, exit outcomes for youth leaving a Beachler apartment fall into one of the following categories (Table 10):

Table 10. Exit outcomes for clients leaving Beachler apartments

EXIT OUTCOME	TYPE OF OUTCOME
Client moves into own apartment, either subsidized or unsubsidized	Positive
Client moves in with family or friends (healthy relationship)	Positive
Client moves into school/university housing	Positive
Client moves into military housing	Positive
Client moves into permanent supportive housing	Positive
Client moves from a Beachler apartment to one of Daybreak's community apartments[15]	Positive
Client moves in with family or friends (unhealthy or unstable environment)	Negative
Client returns to homelessness	Negative
Client arrested or jailed	Negative
Unknown outcome	Negative

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[14] Daybreak Dollars was originally designed to be a "rewards only" system, but Daybreak staff eventually found it necessary to include consequences for violations of certain policies.

[15] Although this type of exit outcome is considered positive by Daybreak staff, HUD HMIS codes it as negative because it is considered a move from one transitional program to another transitional program.

Daybreak: Year One Process Evaluation

5.3.2 Community housing

Not all Daybreak clients need the intensity of the Beachler-style "immersion" program to succeed or make progress toward their personal goals. Some youth possess the skills, resources, and maturity to live more independently, but still with a rental subsidy, targeted case management, and support services. For these clients Daybreak offers a total of 30 scattered-site community apartment in which youth can live and transition-in-place. Depending on their skills and resources, some homeless youth are able to move directly from homelessness into a community apartment. Many others, however, first live in a Beachler apartment where they spend time healing, learning, and developing the basic life skills and resources necessary to move back into the community.

Community apartments are owned and operated by private landlords who lease them to Daybreak. With the landlords' permission, Daybreak then rents the apartments to youth in its community housing program. This arrangement benefits both landlords and Daybreak by (1) providing landlords with the assurance they require before allowing a youth (typically with no rental history) to move into one of their units, and (2) providing Daybreak with access to the unit and authority over what is permitted to take place in the unit. The community housing program also provides clients the chance to demonstrate that they are responsible tenants who pay rent and utilities on time, maintain clean apartments, and are good neighbors to others in the building and in the area. Clients' stay in the program can range from two to 24 months depending on the needs of each youth. (For example, a very young parent or a youth with significant mental or physical health challenges may need more time and support than a single young adult with fewer challenges.)

Both single occupancy and double occupancy apartments are available, located on bus routes and in different parts of the county in order to match the needs and preferences of youth. The community housing program does not provide 24-hour supervision but does provide rental and utility subsidies, furniture, counseling, case management, education support, and employment support according to each youth's needs. It also provides 24-hour emergency crisis hotline response so that tenants can always reach a Daybreak case manager or clinical consultant.

In return for this support, tenants are expected to adhere to community housing program rules, meet with their case managers as scheduled, and pay a portion of their rent and utilities every month according to a schedule that gradually increases the tenant's financial responsibility over time (Table 11). Community apartments are leased to youth with the understanding that youth living in them will eventually have the option of taking over the lease when they gain greater financial independence (i.e., transition-in-place). Youth who demonstrate this ability may remain in their apartment when they leave the Daybreak program by assuming their lease and utility payments. After leaving Daybreak, youth are eligible for two years of aftercare services, through which they can access counseling, emergency support, and additional skill training.

Table 11. Community apartments subsidy

SINGLE OCCUPANCY CLIENT CHARGES			DOUBLE OCCUPANCY CHARGES PER CLIENT		
FIRST TRIMESTER	SECOND TRIMESTER	THIRD TRIMESTER	FIRST TRIMESTER	SECOND TRIMESTER	THIRD TRIMESTER
Rent:	**Rent:**	**Rent:**	**Rent:**	**Rent:**	**Rent:**
• Fixed payment	• 30% of income	• $5	• Fixed payment	• 25% of income	• $5
• $60/month		• 30% of income saved	• $30/month		• 30% of income saved
• First month free if not coming from Beachler			• First month free if not coming from Beachler		
• Groups as appropriate			• Groups as appropriate		
Phone:	**Phone:**	**Phone:**	**Phone:**	**Phone:**	**Phone:**
• Landline	• Client pays 100%	• Client pays 100%	• Landline	• Client pays 50%	• Client pays 50%
• Paid by Daybreak			• Paid by Daybreak		
Utilities:	**Utilities:**	**Utilities:**	**Utilities:**	**Utilities:**	**Utilities:**
• Paid by Daybreak	• Client pays 50%	• Client pays 75%	• Paid by Daybreak	• Client pays 25%	• Client pays 50%
Process	Income/savings verifications are required. You will never be charged more than 30% of your income. Rent is due by the 5th of the month If unable to pay bills on time, you must call your case manager and may be scheduled for financial coaching				
Noncompliance	1. Written warning 2. 30-day notice with a contract option 3. 30-day notice of discharge				

Community housing rules

While a tenant is in the community apartment program, Daybreak is legally the tenant of the apartment and has certain rights to it. As such, the following rules apply to all tenants living within Daybreak's community apartments:

Employment. Youth living in a community apartment are expected to maintain employment of at least 20 hours per week. Youth who lose their job must inform their case manager immediately. Case managers will work with the youth to adjust budgets, meet basic needs, assume payments necessary to avoid delinquency/debt, and to secure new employment. During this time, youth are required to attend a weekly job assistance meeting with one of Daybreak's job specialists until they obtain, at minimum, part-time employment.

Apartment inspection. Daybreak maintains a master key to each of its community apartments and reserves the right to enter them at any time if staff members have reasonable suspicion there is a safety, security, or hygiene hazard or property damage or if any program rules are being violated. Daybreak staff inspect apartments periodically whether tenants are home or not.

Pets. Pets are not permitted.

Overnight absence. As with the Beachler apartments, tenants are expected to stay in their apartments for a minimum of five nights a week (although permission for extended absences may be granted) or risk losing their homeless status, an eligibility requirement under Montgomery County CoC-funded programs.

Furnishings. If moving from a Beachler apartment, tenants are expected to have saved enough Daybreak Dollars to furnish their apartment. If moving directly into a community apartment from homelessness, Daybreak provides necessary furniture and tenants are required to keep it in good condition. In either case, Daybreak reserves the right to inspect furniture prior to move-in to guard against bedbugs and other unsanitary conditions.

No weapons, illegal drugs, or violence. If weapons or illegal drugs are found in an apartment and/or if violence occurs, a tenant may be discharged from the housing program, evicted from the apartment, and/or reported to police, depending on the severity of the infraction. In addition, random drug tests may be administered at any time. Positive drug tests will result in referral for evaluation and follow-up treatment. Discharge from the program depends on the client's willingness to change behavior.

Visitors. Tenants must be in the apartment when visitors enter. Visitors must leave the apartment by 11:00 p.m. Sunday through Thursday and by 1:00 a.m. on Fridays and Saturdays. No more than three visitors may be in the apartment at a time, and tenants are responsible for the behavior of their guests. Occasional overnight guests are allowed but they must complete an application with the tenant's case manager.

Budgeting, maintaining a bank account, and making purchases. As part of their ISP, tenants are required to share all financial information with their case manager, prepare a budget, and review this budget at least once a month. Tenants are expected to open a bank account and incorporate a savings plan into their financial goals. Non-essential purchases such as cable, cell phone data plans, electronic equipment, automobiles, etc. must be approved by the youth's case manager.

5.4 Street outreach

Daybreak's Street Outreach Program (SOP) provides survival aid and case management services designed to move street youth and couch hoppers to safe living environments. SOP staff and college interns reach out to homeless youth by frequenting places where youth are known to congregate or where street youth have been identified. The program provides youth with survival-aid items such as food, clothing, blankets, health and hygiene kits, and bus passes. Staff also provide prevention and education services, access to Daybreak's laundry and shower facilities, and information and referrals to other community resources including Daybreak's shelter and housing programs. All youth who contact Daybreak's 24-hour hotline are also offered street outreach services.

5.5 Group home (Alma's Place)

In 2011, Daybreak opened Alma's Place in its former shelter facility on Wayne Avenue. The shelter has been converted into a 10-bedroom group home for boys ages 14 to 19 who are in the custodial care the child welfare or juvenile court systems. Alma's Place provides a structured supportive setting designed to interrupt high-risk behavior patterns and to help residents learn life skills that their own life experiences have not allowed them to master. Mental health services are provided on-site, including pre-admission mental health assessments, ISPs, individual and group counseling, and individual and group clinical psychiatric support and treatment as needed.

5.6 Support services

Daybreak's support services are designed to help homeless and at-risk youth attain emotional and housing stability and to help them develop the life skills and resources necessary to maintain that stability (Table 12). Services include, but are not limited to, the following:

Safety and security. Daybreak maintains a security guard on duty 24 hours a day. All visitors, volunteers, and residents are required to enter Opportunity House (i.e., emergency shelter and Beachler apartments) through the main entrance, and clients and visitors are subject to a security check with a metal-detecting wand. Video cameras are located on the grounds and throughout the building in common areas.

24-hour crisis hotline and crisis intervention. Daybreak staffs a crisis hotline for youth experiencing an emergency, needing help, or needing to reach their case manager after-hours. Staff is available 24 hours a day to talk about the situation and help youth decide the best course of action. Staff can also intervene in moments of crisis between a youth and his or her family.

Food. Three balanced and nutritious meals plus snacks are prepared for shelter residents every day. The Street Outreach Program distributes emergency food items to street youth. Youth residing in Daybreak's housing program have their own kitchens and cooking utensils and are expected to use food stamps and/or earned income to purchase food for cooking. They also have access to the Daybreak pantry in emergency situations.

Mental Health Services. Daybreak is certified by the Ohio Department of Mental Health and the national Council on Accreditation (COA) to provide mental health assessments, individual and group counseling, community psychiatric support services (CPSS), and other mental health services. Services include the following:

- **Mental Health Assessment.** Youth seeking shelter or housing participate in a mental health assessment to identify their needs, strengths, and personal goals.

- **Individualized Service Plan.** Following the mental health assessment, case managers and specialists work with youth to create an ISP designed to help them meet their personal goals and objectives.

- **Case management.** All Daybreak youth are assigned a case manager who is responsible for coordinating services for youth and working directly with youth to provide support, encouragement, advice, and advocacy and to monitor progress and compliance. Group case management activities are also available to youth on a regular basis.

- **Therapeutic counseling.** All counseling is provided by Licensed Social Workers (LSW). Daybreak also employs a supervisor-level Licensed Independent Social Worker (LISW) to provide clinical supervision for the social workers and to oversee the Clinical Plan. Youth living in Daybreak's shelter participate in therapeutic counseling if needed or desired. Residents of Beachler apartments are encouraged to attend four "well health" sessions to determine if there is a need or desire for on-going counseling. In the community housing program, youth participate in counseling based on their needs and desire but are eventually transitioned out of these services. Youth who require or desire more services are referred to other community providers.

Medical health history. Youth seeking shelter or housing complete a medical health history. Staff work with youth to address both their immediate and long-term health needs by linking them to services or treatment as appropriate.

Drug and alcohol assessment. If youth identify drug and alcohol use as an issue, or if staff suspects a problem with drug and alcohol use, a screening is administered. Daybreak's Alcohol and Drug Prevention Specialist is certified by the Ohio Department of Alcohol and Drug Addiction Services (ODADAS) and provides prevention education and support services.

Educational support. For youth who have not finished high school or obtained their GED, Daybreak staff works with youth to get them enrolled in school and/or to pursue their GED. For those who have their diploma or GED and want to pursue postsecondary education, staff works with youth to explore and enroll in a college, trade school, or other educational program. Youth are encouraged to set and pursue educational goals that will help them attain a living wage.

Employment support. Daybreak staff, university interns, and volunteers representing various professions provide a wide array of employment support services and assistance to help Daybreak youth build employment skills in the areas of job searching, accessing Dayton's Job Center, resume building, understanding employment expectations, interviewing skills, job development, and job placement.

Life skills training. Life skills training helps youth secure appropriate legal documents and provides assistance with personal hygiene, communications, anger management, nutrition, parenting skills, housekeeping, cooking, budgeting, etc.

Referral and access to mainstream services. Staff works to connect youth with services such as Medicaid, food stamps, mental health treatment services, drug and alcohol treatment programs, child care and parenting support for young parents, scholarship and financial aid programs, job center services, etc.

Permanent housing plan. Case management services focus on securing a positive housing outcome for all youth ages 18 to 21. This may mean obtaining transitional housing, direct housing, subsidized rental housing, or positive permanent housing with family or friends.

Emergency and financial support. In some cases, Daybreak is able to secure financial assistance for youth in the form of security deposits, rent, utilities, small allowances, bus tokens, and other forms of emergency financial assistance.

Leisure time and recreational activities. Residents may participate in recreational and educational activities supervised by Daybreak staff. In addition, residents are encouraged to attend social, family, school, work, and religious activities that offer support.

Babysitting. Daybreak provides volunteer babysitters for parents in the housing program. Babysitters can be used when parents are participating in Daybreak services, including classes, groups, and individual appointments.

Aftercare. After leaving Daybreak, clients are eligible for two years of aftercare services, during which youth can access counseling, emergency support, and additional skill training. Staff also assist with a youth's transition back to a family (where appropriate), to services with other agencies, or to independence.

Table 12. Daybreak services

SERVICE	WHO RECEIVES IT	WHEN IT OCCURS	WHERE IT OCCURS
Mental health assessment	Shelter youth Housing youth SOP youth requesting housing	Before being accepted into Daybreak's program	Daybreak
Life skills assessment	Shelter youth Housing youth SOP youth requesting housing	Before being accepted into Daybreak's program	Daybreak
Vocational assessment	Optional	Within 2-3 months of entering the program	Daybreak Goodwill/Easter Seals
Alcohol and Other Drug (AOD) Assessment	Those for whom AOD is identified as an issue or problem	As necessary	CrisisCare or other local drug and alcohol program
Individualized Service Plan (ISP)	Shelter youth Housing youth SOP youth requesting housing	After mental health assessment and prior to moving into housing	Daybreak
Case management	Shelter youth Housing youth SOP youth requesting housing	After mental health assessment	Daybreak In the community In an apartment
Individual counseling	According to ISP	When client or case manager requests When client is in crisis or is having difficulty	Daybreak Local mental health center
Group counseling	According to ISP	When client needs to work on specific issues (coping, grief, anger management, anxiety, depression, etc.)	Daybreak
Life skills classes	Shelter youth Housing youth SOP youth requesting housing	According to client's life skills assessment and ISP	Daybreak
Parenting classes	Shelter youth Housing youth SOP youth requesting housing	Immediately if client is pregnant or parenting According to ISP	Daybreak Parenting program in the community
Prevention education classes	Shelter youth Housing youth SOP youth requesting housing	According to ISP	Daybreak
Education/schooling	Shelter youth Housing youth SOP youth requesting housing	Prior to entering program or immediately upon program entry	High schools GED programs Community colleges or technical schools
Transportation (bus tokens)	Shelter youth Housing youth SOP youth	As needed when deemed appropriate and/or a reasonable request.	Client requests these from case manager
Employment support	Shelter youth Housing youth SOP youth requesting housing	Prior to entering program or as soon as possible thereafter	Community

SERVICE	WHO RECEIVES IT	WHEN IT OCCURS	WHERE IT OCCURS
Financial assistance (food, housing, utilities, etc.)	Shelter youth Housing youth SOP youth	Emergency support provided immediately or ASAP. Ongoing support dependent upon program and ISP	Daybreak Job Center Dayton MHA Food pantries Other agencies
Crisis hotline	Everyone	24 hours, 365 days	Phone
Emergency shelter	Youth ages 10 - 18	24 hours, 365 days	Daybreak shelter
Babysitting	Parents in Housing Parents in SOP if scheduled	During appointments and participation in services	Daybreak (second floor play area)
Leisure time and recreational activities	Everyone	Various times	Various locations
Outreach services	Walk-in or by referral	Before enrolling in a Daybreak program. After being discharged from a Daybreak program.	Daybreak In the community
Nutrition classes	Shelter youth Housing youth	According to ISP	Daybreak

6.0 Daybreak's Evidence-Based Practices

Evaluation questions addressed

- *What are best practices in providing emergency shelter and transitional housing to runaway, troubled, and homeless youth ages 18 to 21? (Question 5)*
- *What does the research literature indicate are best practices? (Question 5a)*
- *What best practices is Daybreak currently demonstrating? (Question 5c)*

6.1 A housing continuum

Daybreak's emergency shelter and housing programs are designed to help older youth ages 18 to 21 become independent, self-sufficient young adults through a continuum of housing programs and services designed to meet their needs. Daybreak's programs are based on the premise that youth are transitional by nature. Its programs are specifically designed to allow youth to transition from one level of housing to the next until they are able to live independently, all while providing safety, support, clinical services, treatment, and the life skills education needed for them to successfully transition to adulthood. According to the National Alliance to End Homelessness:

> Housing for young people, homeless or otherwise, is, by nature, transitional. Most youth in their late teens and early to mid-twenties are housed in college dormitories, shared or studio apartments, or are continuing to live at home. Commonly, youth move through any number of such interim housing situations as they transition to adulthood. Adolescence and its transition to adulthood is a challenging time for youth under the best of circumstances. Homeless youth must develop the financial resources and skills to establish themselves independently and they must do so during a time of great developmental flux. It is a period when youth are establishing their independence, a sense of identity, and the capacity for intimacy. Adolescents who are homeless must take on the adult tasks of securing housing, a livable income, and seeing to their future at a time when their capacity for rational thought and decision making is inconsistent and still developing.… The design of housing for homeless youth should focus on stability, safety, and affordability. The goals of any housing model for youth should be placement in stable housing and preparation for future independent housing. A youth housing continuum incorporates various housing solutions that appropriately respond to the broad range of needs of youth experiencing homelessness during their transition to adulthood. (2006, p. 3)

Daybreak's housing continuum, which starts with street outreach and emergency shelter and moves from highly supervised on-site transitional housing, to less supervised community housing, to aftercare services, aims to transition older homeless youth from situations of dependency and crisis to self-sufficiency and indpendent living (see Figure 4, page 28).

Although Daybreak's housing continuum resembles a linear progression on paper, it is designed to be fluid. Youth may enter the continuum at any point, but may also be redirected depending on their request, current progress, skill level, or need. Youth who may be ineligible for a program due to age, income, homeless status, etc. can request assistance from Daybreak and staff will work to connect them to other appropriate community services. Youth who leave Daybreak's housing program in good standing may request re-admittance if their pemanent housing plan fails, and even youth who are evicted from housing due to noncompliance are encouraged to access street outreach services if and when they need assistance.

Daybreak's support services are based on a client-centered case management approach that tailors case management plans to the specific needs of clients. Daybreak uses a team model to ensure that (1) clients are involved in making decisions regarding their own case management plans and goals; (2) all members of Daybreak's service provision group operate in concert with the case management plan; and (3) clients receive the benefit of a multidisciplinary team approach and are known to all members of the team, thus assuring continuity of care.

6.2 Evidence-based interventions

Daybreak integrates and applies evidence-based tools and models in its programs, clinical interventions, group and individual counseling sessions, and support services. These practices—grounded in theories of cognitive and behavioral therapies, positive youth development, trauma-informed care, strengths-based skill development, and nurturing parenting—are based on research, literature, and promising practices developed or endorsed by the following:

- Regulatory agencies, including the Substance Abuse and Mental Health Services Administration (SAMHSA), HHS, National Institutes of Health (NIH), Ohio Department of Mental Health, Ohio Department of Developmental Disabilities, and Ohio Department of Alcohol and Drug Addiction Services

- National agencies that regulate, fund, or provide technical assistance on issues related specifically to homeless populations and transitioning youth, include USICH, HUD, the Family and Youth Services Bureau within HHS, RHYTTAC, Search Institute, and others

- Nonprofit, advocacy, and policy organizations dedicated to issues of homelessness, including the National Alliance to End Homelessness (NAEH), National Coalition for the Homeless, National Health Care for the Homeless Council, Corporation for Supportive Housing, National Network for Youth, Coalition on Housing and Homelessness in Ohio, and others

Cognitive and behavioral therapies

Cognitive Behavioral Therapy (CBT) is a term used to describe a group of psychological treatments that clinical research suggests are effective in treating many psychological disorders among children and adolescents, as well as adults. CBT approaches aim to solve problems associated with dysfunctional emotions, behaviors, and cognitions (thoughts) through a goal-oriented process that emphasizes the important role that *thinking* plays in how we feel and in what we do (National Association of Cognitive Behavioral Therapists, 2007).

CBT has been applied in different clinical and nonclinical environments and has been successfully used as a treatment for many clinical disorders, personality conditions and behavioral problems (Cooper, 2008). CBT is one of the few empirically supported psychosocial treatments for young people (Association for Behavioral and Cognitive Therapies and Society of Clinical Child and Adolescent Psychology [ABCT & SCCAP], 2010). Cognitive and behavioral therapies for children and adolescents focus on teaching young people specific skills and emphasize the ways that a person's cognitions, emotions, and behaviors are connected and how they affect one another.

Although there are differences between cognitive therapies and behavioral therapies for youth, both approaches have the following in common (ABCT & SCCAP, 2010):

- The therapist and youth develop goals for therapy together and track progress toward goals throughout the course of treatment.

- The therapist and youth develop a mutual understanding that the therapist has clinical expertise, but the youth is the expert on him- or herself.

- A goal of therapy is to empower youth by helping them discover that they are powerful and capable of choosing positive thoughts and behaviors.

- Treatment is often short term; youth participate in treatment in and out of session and are often assigned "homework" as part of their therapy. The skills that are taught in therapy require practice.

- Treatment is goal-oriented to resolve present-day problems. Therapy involves working step-by-step to achieve goals.

In cognitive therapy, youth learn to distinguish between thoughts and feelings; become aware of the ways in which thoughts can influence feelings; evaluate critically whether these "automatic" thoughts and assumptions are accurate, biased, or helpful; and then develop skills to identify, interrupt, and correct biased thoughts independently (ABCT & SCCAP, 2010). Behavioral therapy calls attention to how problematic or unhealthy behaviors may accidentally get "rewarded" within a young person's environment, contributing to the behavior being repeated. Behavior therapists help youth recognize and "un-learn" negative patterns of thinking and behaving and instead reinforce positive bevhaviors.

Trauma-focused CBT

In addition to traditional therapies, licensed Daybreak counselors and clinicians are trained in trauma-focused cognitive behavioral therapy (TF-CBT) approaches for youth who have significant behavioral or emotional problems related to traumatic life events. Initially developed to address the psychological trauma associated with child sexual abuse, the TF-CBT model has been adapted for use with children who have a wide array of traumatic experiences, including domestic violence, traumatic loss, and the often multiple psychological traumas experienced by children prior to foster care placement (SAMHSA, 2008). The approach combines trauma-sensitive interventions with cognitive behavioral therapy. Youth are provided knowledge and skills related to processing the trauma; managing distressing thoughts, feelings, and behaviors; and enhancing safety and communication (National Child Traumatic Stress Network, 2007). The treatment addresses distorted beliefs and attributions related to the abuse and provides a supportive environment in which youth are encouraged to talk about their traumatic experience.

Contingency management intervention

The Daybreak Dollars "token economy" system, which governs the rental subsidy component of Daybreak's Beachler apartment housing program, is a behavioral intervention known as contingency management. The approach is grounded in behavioral psychology, which posits that when a person is rewarded for doing something, he or she is more likely to do it again. Contingency management is a systematic and consistent use of this principle, found to be especially effective in the treatment of both drug and alcohol abusers (Petry, 2006) and children with behavior problems. (Harvard Mental Health Letter, 2006). "Contingency" refers to a reward that is contingent on performing a desired act; "management" refers to the practice of arranging rewards in ways that shape positive or desired behavior (Harvard Mental Health Letter, 2006).

In the treatment of substance use disorders, contingency management is often used to provide the substance abuser with tangible, positive reinforcers (rewards) for objective evidence of behavior change. For example, patients might receive payment or a voucher, exchangeable for goods and services, whenever they submit a urine specimen that tests negative for drugs or alcohol (Petry, 2006). Contingency management techniques have also been used to direct behavior among children with certain conduct disorders or learning

disabilities and children who may never have been rewarded (or disciplined) consistently enough to know what to expect from their actions (Harvard Mental Health Letter, 2006). Daybreak Dollars operates on this principle.

In the Beachler apartments, tenants have the opportunity to be rewarded precise amounts of Daybreak Dollars based upon their participation in specific activities and behaviors. Daybreak staff keep careful documentation of tenants' activities, rent payments, purchases, and fines in order to clearly establish and communicate the boundaries of acceptable and unacceptable behavior. Ultimately, the goal of Daybreak Dollars is to positively reinforce the adaptive behaviors of tenants by communicating messages of support and encouragement. In doing so, Daybreak hopes to teach residents the skills and responsibilities necessary for their autonomy and ultimately aid Daybreak in its mission to eliminate youth homelessness.

Positive youth development

Positive youth development (PYD) is a comprehensive framework that outlines the supports young people need in order to be successful. PYD emphasizes the importance of focusing on youths' strengths instead of their risk factors to ensure that all youth grow up to become contributing adults (National Conference of State Legislatures, 2010). Researchers have developed several PYD frameworks that revolve around the physical, cognitive, and social and emotional needs of youth.

The Five Promises. Developed by America's Promise Alliance, the Five Promises states that youth need five key supports: (1) caring adults, (2) safe places, (3) a healthy start and healthy development, (4) an effective education, and (5) opportunities to help others through service. According to the Alliance, children who receive at least four of the Five Promises are much more likely than those who experience only one or zero Promises to succeed academically, socially, and civically (America's Promise Alliance, 2011).

The National Research Council. The National Research Council identifies the following characteristics for programs that support and promote the positive development of youth (Eccles & Gootman, 2002):

- Physical and psychological safety
- Appropriate structure
- Supportive relationships
- Opportunities to belong
- Positive social norms
- Support for efficacy and mattering
- Opportunities for skill building
- Integration of family, school, and community efforts

The 40 Developmental Assets. The 40 Developmental Assets, developed by the Search Institute, suggests that youth need a mixture of internal and external assets to grow and to be caring, responsible adults. The assets refer to the relationships, opportunities, and personal qualities that young people need to avoid risks and thrive. The next section describes the 40 Development Assets in more detail.

40 Developmental Assets

The Search Institute's 40 Developmental Assets model is grounded in extensive research in child and adolescent development, resiliency, and prevention (Sesma & Roehlkepartain, 2003). The model posits that helping youth experience healthy development resources and opportunities, and helping them to successfully achieve developmental tasks, is a highly effective way to promote positive behaviors and outcomes, avoid negative behaviors and

outcomes, and build resiliency, or the capacity to function adequately in the face of adversity (Mannes, 2004). Developmental assets are positive factors in young people, families, communities, schools, and other social settings that shape and promote young people's healthy development (Table 13).

Table 13. Search Institute's 40 Developmental Assets

EXTERNAL ASSETS (RELATIONSHIPS AND OPPORTUNITIES)		INTERNAL ASSETS (PERSONAL QUALITIES)	
Support		**Commitment to learning**	
1.	Family support	21.	Achievement motivation
2.	Positive family communication	22.	School engagement
3.	Other adult relationships	23.	Homework
4.	Caring neighborhood	24.	Bonding with school
5.	Caring school climate	25.	Reading for pleasure
6.	Parent involvement in schooling	**Positive values**	
Empowerment		26.	Caring
7.	Adults in the community value youth	27.	Equality and social justice
8.	Youth are given roles in the community	28.	Integrity
9.	Youth provide service to others in community	29.	Honesty
10.	Youth feel safe in community	30.	Responsibility
Boundaries and expectations		31.	Restraint
11.	Family boundaries	**Social competencies**	
12.	School boundaries	32.	Planning and decision making
13.	Neighborhood boundaries	33.	Interpersonal competence
14.	Adult role models	34.	Cultural competence
15.	Positive peer influence	35.	Resistance skills
16.	High expectations	36.	Peaceful conflict resolution
Constructive use of time		**Positive identity**	
17.	Creative activities	37.	Personal power
18.	Youth programs	38.	Self-esteem
19.	Religious community	39.	Sense of purpose
20.	Time at home	40.	Positive view of personal future

Daybreak utilizes the Search Institute's 40 Developmental Assets to guide the development of "protective factors" within youth to help them cope with and address the challenges they face transitioning from homelessness to stability and self-sufficiency. For Daybreak, this means employing a holistic approach to positive youth development and integrating this approach, every day, through healthy messages, safe and structured time and space, positive recreation, positive interactions and relationships with adult role models, skill development activities, opportunities for positive self-expression, and opportunities for youth participation.

Trauma-informed care

Homelessness is a traumatic experience. Youth who experience homelessness are under constant stress, unsure of whether they will be able to sleep in a safe environment or obtain a decent meal (Hopper, Bassuk, & Olivet, 2010). Many homeless youth have histories of physical and sexual abuse and other types of trauma-inducing experiences, including complex trauma, which results from long periods of re-occurring traumatic events such on ongoing abuse, neglect, violence, instability, and unpredictability. Trauma-informed care

(TIC) is a framework, or an approach to engaging people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives (SAMHSA, 2012).

Daybreak has adopted and committed to a trauma-informed care model of interaction with youth in its shelter, housing, and other programs. When an agency takes this step to become trauma-informed, every part of its organization, management, and service delivery system is assessed and potentially modified to include a basic understanding of how trauma affects the life of an individual seeking services. Trauma-informed programs and services are based on an understanding of the vulnerabilities or triggers of trauma survivors that traditional service delivery approaches may exacerbate, so that these services and programs can be more supportive and avoid retraumatization (SAMHSA, 2012).

The basic principles of TIC include the following (Hopper, Bassuk, & Olivet, 2010):

- **Trauma awareness.** Trauma-informed service providers incorporate an understanding of trauma into their work. This may involve altering staff perspectives, with providers understanding how various symptoms and behaviors represent adaptations to traumatic experiences. Staff training, consultation, and supervision are important aspects of organizational change towards trauma-informed care.

- **Emphasis on safety.** Because trauma survivors often feel unsafe and may actually be in danger (e.g., victims of domestic violence), TIC works towards building physical and emotional safety for consumers and providers. Precautions are taken to ensure the physical safety of all residents. In addition, the providers are trained to recognize potential triggers for clients and strive to avoid retraumatization. Clearly established roles and boundaries, privacy, confidentiality, and mutual respect are also important aspects of developing an emotionally safe atmosphere.

- **Opportunities to rebuild control.** Because control is often taken away in traumatic situations, and because homelessness itself is disempowering, trauma-informed homeless services emphasize the importance of choice for clients. They create predictable environments that allow consumers to re-build a sense of efficacy and personal control over their lives.

- **Strengths-based approach.** TIC service settings help clients identify their own strengths and develop coping skills. Services are focused on the future and emphasize skill-building to further develop resiliency.

Strengths-based skill development

Many of the youth who come to Daybreak lack the basic life skills they will need to successfully live independently. Numerous studies conducted on youth who have "aged out" or emancipated from foster care suggest that without focused preparation prior to leaving care, young adults may fare worse than their peers in education, employment, housing, mental and physical health, and other important aspects of adult life (Barth, 1986; Collins, 2001; Downs & Caldwell, 2003; McDonald, Allen, Westerfelt & Piliavin, 1996; Mech, 1994). A national Westat study of young adults formerly in foster care (Cook, 1991, as cited in Wertheimer, 2002) found evidence that independent living training—specifically in the areas of money managemement, credit management, consumer skills, education, and employment—significantly improved outcomes with respect to young adults' ability to live independently compared with those who received no skill training in those areas (Wertheimer, 2002).

Numerous resources exist for training and practice in life skills, from organizations such as Casey Family Programs (caseylifeskills.org); National Resource Center for Youth Services (www.nrcys.ou.edu); and the Children, Youth, and Families Education and Research Network (cyfernet.org). In addition, various methods for assessing a youth's current like skills attainment or abilities are available. Daybreak utilizes two primary life skills curricula to assist youth in developing the internal and external assets needed to foster independence as they transition toward adulthood: the Ansell-Casey Life Skills Assessment and the Council for Boys and Young Men.

Ansell-Casey Life Skills Assessment

The Ansell-Casey Life Skills Assessment, also known as the Casey Life Skills, is a suite of comprehensive online assessments, learning plans, and learning resources originally developed to help young people in foster care gain the life skills they need to exit care and live independently. The tools are strengths-based and were built and refined with extensive user input and research (Casey Family Programs, 2011).

The assessments themselves consist of multiple series of statements about life skills domains considered necessary for successful adult living. For each item, the respondent indicates whether the statement is "very much like me," "somewhat like me," or "not like me." Life skill domains are

- Career planning
- Communication
- Daily living
- Home life
- Housing and money management
- Self-care
- Social relationships
- Work life
- Work and study skills

Both the youth and his or her caregiver (i.e., a Daybreak case manager) complete the assessment. For youth, it is a self-assessment. Caregivers complete the assessment based on their knowledge of the youth. Supplemental assessments are available for youth who have specific needs and challenges, including those who are pregnant or parenting, homeless, or GLBTQ (gay, lesbian, bisexual, transgender, or questioning).

At Daybreak, typically the Casey Life Skills assessments are administered at intake or as part of a client's pre-housing assessment. The assessment is completed on paper and then responses are entered and scored online. Case managers review side-by-side comparisons of scores (clients and their own), then use the information first to assess whether a client is suitable or ready for housing and to inform development of goal plans, activities, and an ISP.

The Council for Boys and Young Men

The Council for Boys and Young Men is a strengths-based group approach focused on the safety, health, and healthy interaction of boys and young men through their pre-teen and adolescent years. Through a faciliated process, the Council aims to promote boys' natural strengths and to increase their options for being male in today's world. The Council model challenges societal and peer assumptions about what is means to be a "real boy" or a "real man" while engaging boys in activities, dialogue, and self-expression. At its core, the Council strives to meet a developmental need in boys for strong, positive relationships (Council for Boys and Young Men, 2011).

The process involves bringing a group of boys of similar age and developmental need together, approximately once per week for 10 weeks or more. Group formats include warm-up activities, experiential activities that address relevent topics, and reflection and group dialogue. Activities may include group challenges, games, skits or role-plays, arts, etc. Topics may address any number of issues, including competition, bullying, safe expression of emotions, rejecting violence, friendships with women, safe and healthy decision making, and others.

Nurturing Parenting Programs

The Nurturing Parenting Programs (NPP) are family-based programs for the prevention and treatment of child abuse and neglect. The programs were developed for families who have experienced or who are at high risk for child abuse and neglect. NPP instruction is based on psychoeducational and cognitive behavioral approaches to learning and focuses on "re-parenting" or helping parents learn new patterns of parenting to replace their existing, learned, abusive patterns (SAMHSA, 2010). The goals of NPP are to

- Increase parents' sense of self-worth, personal empowerment, empathy, bonding, and attachment
- Increase the use of alternative strategies to harsh and abusive disciplinary practices
- Increase parents' knowledge of age-appropriate developmental expectations
- Reduce abuse and neglect rates

Nurturing Parenting Programs are recognized by SAMHSA, the National Registry of Evidence-based Parenting Programs, the Office of Juvenile Justice and Delinquency Prevention, and other state and federal agencies as being an evidence-based best practice. NPP processes include questionnaire-based self-assessments, discussion, role-play, and audiovisual exercises that teach participants how to nurture themselves as individuals and in turn build their nurturing family and parenting skills.

7.0 Daybreak Partnerships

Evaluation questions addressed

- *How are community service organizations partnered with Daybreak to provide support services to Daybreak clients? (Question 2d)*

Daybreak, like many nonprofit organizations, often partners with other groups to provide needed services to youth who are under Daybreak's care, to achieve common goals, and to make the most of limited financial resources. In addition, some funders require Daybreak to work collaboratively with other agencies (and vice versa).

Partnerships, or collaboration, can take many forms, including information-sharing arrangements to more formal joint-administrative and joint-programming activities. Daybreak may collaborate, for example, to develop a new program to serve homeless youth or share office space, staff, or other administrative costs. Within Daybreak's strategic plan for FYs 2010 to 2012, one of three primary objectives for the organization included "increasing collaborative efforts with other agencies and programs."

7.1 Community partnerships

Since moving into Opportunity House in 2008, Daybreak has initiated several new partnerships with other agencies and programs in the Dayton area and continues today to explore new ventures and collaborations. Daybreak's current partnerships are described below.

St. Vincent Hotel. St. Vincent provides emergency and essential human and supportive services to homeless families and underemployed or unemployed men in order for them to survive a period of crisis or to obtain and maintain economic self-sufficiency and permanent housing. Through its partnership with St. Vincent, Daybreak outreach staff provide outreach, case management, and pre-housing services for youth ages 18 to 21.

South Community Mental Health Center. South Community is certified by the Ohio Department of Mental Health to provide behavioral health care and related services in the greater Miami Valley area. As part of South Community's Continuum of Care for Youth, the agency provides psychiatric consultation and services; prevention services; integrated health services; individual, group, and family counseling; specialized home-based counseling; individual and group community psychiatric support services; school-based services; an intensive outpatient program; and a partial hospitalization program for youth. Daybreak has had a longstanding relationship with South Community and frequently refers clients to the agency for mental health services. More recently, Daybreak has contracted with South Community for mental health professional training, consultation for Daybreak staff, and clinical Performance Quality Improvement chart review.

University of Dayton Graduate Fellows Program. The Fellows program places a Masters-level student from the University of Dayton's Clinical Psychology program at Daybreak for two years to work on specific projects. Currently, Daybreak's graduate fellow is overseeing implementation of the the Daybreak Dollars system for youth in Daybreak's Beachler apartments and coordinating community service activities for youth.

Goodwill/Easter Seals Pathways II. Daybreak is collaborating with Goodwill/Easter Seals and other partners in the Pathways II project, which provides employment services to transitional youth with qualifying mental health diagnoses. Services include vocational evaluation, community-based work assessments, additional training, job development, job placement, job coaching, and follow-along services. In addition, through a private

partnership with Goodwill/Easter Seals, a Vocational Specialist is on site at Daybreak 20 hours a week to work specifically with Daybreak youth that do not qualify for Pathways II.

Samaritan CrisisCare. CrisisCare is an assessment service that is available 24 hours a day, seven days a week for people with mental health or drug and alcohol needs who are in need of crisis services or evaluation for hospitalization. CrisisCare partners with Daybreak to provide crisis intevention in the event of a mental health crisis during the day, evenings, or weekends when Daybreak clinical staff may not be readily available. CrisisCare also dispatches licensed staff to Daybreak when necessary and appropriate.

Good Samaritan Hospital Homeless Clinic. The Samaritan Homeless Clinic opened in 1992 with the goal of reducing the common connection between homelessness and poor personal health. The clinic is staffed with a full-time physician and nursing team and provides a wide array of both primary and preventative medical services, including primary care, podiatry services, dental services, vision services, chemical dependency counseling, psychiatric services, and educational programming. Currently, the clinic provides physical health care to many Daybreak youth. Formerly, the clinic also provided Daybreak with a nurse practitioner who came to the agency once a week to see patients, conduct physical exams, and prescribe medication. Although both agencies agreed that this model of on-site care was optimal, the agreement ended when the private grant that funded it expired.

Miami Valley Hospital. Daybreak has a volunteer psychiatrist who comes to Opportunity House once a week. Miami Valley Hospital provides for this doctor to come to Daybreak. In light of what Daybreak has found to be the profound benefits of having psychiatric services available on-site, the agency is currently exploring the possibility of expanding this partnerhsip to include medical school interns.

Wright State University/Public Health – Dayton and Montgomery County. A collaboration between Wright State Univeristy and the local public health department provides Daybreak youth with HIV/AIDS testing and educational materials on-site on a quarterly basis.

Montgomery County Children Services. Daybreak maintains a contract with Montgomery County Children Services (MCCS) to accept as "paid placements" youth who are appropriate for Daybreak's housing program. Daybreak also regularly receives referrals (unpaid) from MCSS. In addition, Daybreak staff is required by law to report suspected cases of child abuse or neglect to MCCS. Under these circumstances, Daybreak works closely with MCCS case managers to ensure coordinated and complementary services.

Montgomery County Juvenile Court. Similar to its contract with MCSS, Daybreak also accepts paid placements from the Montgomery County Juvenile Court. In addition, the court pays Daybreak to conduct "Power Club" at the court. Over the course of a 10-week module, Power Club provides high-risk youth with intensive anger management, violence prevention, leadership, personal responsibility, and conflict resolution skills that help them solve problems in their own lives. The programming focuses on building and then practicing the skills that lead to promotion of individual, family, and community strength.

Community landlords. Daybreak currently partners with nine landlords for the agency's community housing program. These landlords agree to rent apartments to Daybreak program participants, despite the fact that the tenants have no secure income, employment history, or stable housing history.

The following providers also regularly coordinate with Daybreak, accepting referrals from and providing referrals to Daybreak, and working in partnership to provide necessary services to homeless and at-risk youth:

- Montgomery County Combined Health District
- Adolescent Wellness Center
- YWCA Teen Connection
- Womanline
- Planned Parenthood
- Brighter Futures
- Local schools, including charter schools
- Local colleges, trade schools, and universities
- Dayton Police Department

7.2 Daybreak's role in Montgomery County's continuum of care

Daybreak is one of four "gateway" shelters within Dayton/Montgomery County. As such, Daybreak's coordination with and referral to other emergency shelters and affordable housing providers within the community is managed through a process called the *Homeless System Front Door Assessment Process.*

In 2010 Montgomery County and the City of Dayton implemented a new process to improve the delivery of housing and shelter services to families and individuals who are homeless or at great risk of homelessness (including youth). The *Homeless System Front Door Assessment Process* institutes uniform assessment processes and procedures to determine "the most appropriate service response" to each individual or family's immediate and long-term housing needs (Abt Associates, 2011). The rationale and impetus for the new process stems from Montgomery County's *10-Year Plan to End Chronic Homelessness and Reduce Overall Homelessness* (Homeless Solutions Policy Board, 2006)*.* In 2006, this plan recommended that changes to the county's homeless system include creating a single entry point (or front door) to ensure "an effective management information system to provide high quality data for planning, performance measurement, funding allocation and accountability" (HSPB, 2006). Ultimately, the goal of the Front Door Assessment is to implement a service system that enables the community to link persons who are at risk of homelessness to the services and housing supports necessary to end homelessness in the county (Abt Associates, 2011).

Front Door Assessment Process

The following is taken from Abt Associate's *Front Door Assessment Process: A Six-Month Review* (2011).

All households who enter any one of the community's four gateway shelters—St. Vincent de Paul Gateway Shelter for Women and Families, Gettysburg Gateway for Men, YWCA, or Daybreak—or who are homeless on the street and in contact with a street outreach program are assessed using the same assessment tool. All assessment data are entered into HUD's Homeless Management Information System (HMIS), and client barriers are scored and filtered through a matrix to determine the appropriate type of program to meet their need (e.g., programmatic shelter, transitional housing, or permanent supportive housing). Once the appropriate program has been determined, the households are placed on a central waiting list for that type of program. Several priority criteria, including length of time homeless, health condition, age, large household size, or being young parents, are used to determine placement on the waiting list.

All non-gateway shelter programs funded through Montgomery County's homeless system are required to fill any vacancies with referrals through the Front Door Assessment Process. All vacancies at transitional housing, permanent supportive housing, or Safe Haven programs must be reported to Homeless Solutions Policy Board staff, which maintains a waiting list for each program type. Taking into account restrictions particular to the program with the vacancy (e.g., gender, age, disability), Homeless Solutions staff refers a household appropriate for that particular vacancy that is at the top of the waiting list.

Area housing providers

All housing programs, including transitional and permanent supportive housing programs designed and funded to service homeless persons, only accept referrals through Montgomery County's Front Door Assessment Process. This includes the providers listed below, who regularly coordinate with Daybreak to ensure that homeless and at-risk youth receive appropriate services and support.

Homefull. Homefull provides all of the case management services for two of Dayton's emergency shelters—St. Vincent de Paul Gateway Shelter for Women and Families and the Gettysburg Gateway for Men. Homefull's case managers work one-on-one with clients in the shelters with the primary goal of moving them into appropriate permanent housing and out of the shelter system. When 18-year-olds come into one of these two shelters, Homefull coordinates with Daybreak, through the Front Door Assessment Process, to transfer youth to Daybreak's shelter and, when possible, into Daybreak's housing program in order to minimize their exposure to these adult-focused, large mainstream systems.

Miami Valley Housing Opportunities. Miami Valley is a nonprofit organization that owns or manages more than 400 rent-subsidized, service-supported housing units throughout Montgomery County. The agency also manages federal rent subsidies that keep formerly homeless individuals stably housed in apartments owned by private landlords and operates the local Projects for Assistance with Transition from Homelessness (PATH) Program. Miami Valley and Daybreak staff work collaboratively in street outreach activities to identify individuals and families who are homeless or at risk of homelessness and provide them with appropriate shelter and/or services. Miami Valley also provides permanent supportive housing to some former Daybreak clients.

Dayton Metropolitan Housing Authority (DMHA). DMHA may provide housing to some Daybreak youth who are underemployed and/or have multiple children. Daybreak works closely with DMHA to secure permanent subsidized housing for eligible clients.

8.0 How Stakeholders View Daybreak

Evaluation questions addressed

- *How do Daybreak's policies and procedures help to meet its mission and goals? (Question 2a)*
- *What factors have had an impact on how the Daybreak program is implemented? What decisions have led to important benchmarks in the development and evolution of the program? (Question 2b)*
- *What barriers and challenges does Daybreak face in serving youth and achieving its program goals and outcomes? (Question 2c)*
- *What lessons have been learned by Daybreak staff and other stakeholders about providing emergency shelter, transitional housing, and other support services to runaway, troubled, and homeless youth? (Question 3)*

In October and November 2011, CRP conducted a series of telephone interviews with stakeholders—including board members, funders, and partner organizations—who are well acquainted with Daybreak and with the characteristics of the youth Daybreak typically serves. Stakeholders were asked about the challenges associated with serving runaway and homeless youth in the Dayton area, barriers that stand in the way of Daybreak achieving its mission of eliminating youth homelessness, what Daybreak does best and where it could improve, how Daybreak has evolved or changed over time, and how Daybreak has applied lessons learned over time to its service delivery model. Their comments are summarized in the pages below.

8.1. Challenges and barriers to serving Daybreak youth

Many of the challenges that confront Daybreak staff as they serve their target population of youth ages 18 to 21 in emergency shelter and housing are directly related to the characteristics of the youth themselves—their backgrounds, traumatic experiences, and risk factors for homelessness. These include histories of complex trauma, multiple losses, abuse, untreated mental health diagnoses, social and emotional developmental delays, low educational attainment, lack of positive adult role models or support networks, etc. Other challenges for Daybreak include the following:

Funding. Daybreak, like a multitude of other nonprofit and public service agencies, has struggled with cuts to state and federal funding streams due in part to the current economic climate and to shifts in local and federal government priorities.

Lack of funding for prevention. As budgets tighten in Ohio and across the United States, programs that were in place to early-identify and assist at-risk and troubled youth are dwindling. Many afterschool programs have been cut, and within Daybreak, private funding that had been available to provide violence prevention and mentoring programs in local schools is no longer available. At the peak of these programs, Daybreak staff were in approximately 23 schools, annually seeing thousands of students in grades 6 to 12.

"Couch hopping" is not considered homeless. Many homeless youth move from friend to friend's house, "couch hopping" in order to have a place to sleep at night. In Daybreak's view, this is a type of homelessness, just as sleeping in an abandoned building or on the street is. It is also a type of homelessness that is unique to, or more common among, youth. Under the current HUD definition of homelessness, however, couch hopping is not homeless. To be eligible for a housing referral through the county's Front Door Assessment Process, an individual must be sleeping in a shelter, on the street, or in some other place that is unsafe or not meant for human habitation.[16] Couch hopping youth, therefore, must spend at least one night in a shelter before they can be placed on the community's central waiting list for housing.

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[16] As of January 30, 2012, Montgomery County's Homeless Solutions Policy Board has not determined how HUD's new definition of "youth" and expanded definition of "homelessness" (see page 12) might affect the Front Door Assessment Process or homeless populations to be served.

There are some who refuse to do this because shelter, in their eyes, is a less appealing option (or a more frightening or traumatizing option) than continuing to couch hop. The larger issue, related to how homelessness is defined, is that not all youth enter the homeless system the same way and should not always be treated the same way. It is true that some are in shelter, but others may couch hop, may be living at home one day and kicked out the next, or may emancipate from foster care with nowhere to live.

Some youth do not want to be "found" or helped. Many homeless youth, especially those living on the street or couch hopping, have operated in survival mode for so long that it becomes their norm. Some claim that living on the streets is their "choice" and they resist seeking assistance. It can be very challenging for outreach staff to identify and reach out to these youth, gain their trust, and help them.

Lack of affordable housing. The lack of affordable housing is an issue for all of the Dayton area and affects not only youth but all populations of low-income, disabled, or homeless individuals.

Lack of mental health centers. In 2004, St. Joseph Children's Treatment Center—a major provider of mental health services for youth, including residential treatment—closed its doors. And although South Community Mental Health Center and several smaller mental health programs still operate in Dayton today, the need for mental health services still outweighs the capacity. This affects Daybreak youth as well as other at-risk and in-need populations.

The stigma of mental health. In addition to there being a lack of easily accessible mental health services, some Daybreak clients resist acknowledging or flat out deny that they struggle with a mental health issue in the first place. For many, this is because of the stigma associated with being "mentally ill," which exists among society at large. For youth over the age of 18, who are legally adults within the mental health system, this may translate into a refusal to *accept* services—some stop taking their prescribed medications, and some stop coming to appointments altogether.

Securing mainstream services for "gapper" youth. There are some youth who pass through Daybreak that have some level of mental health illness or developmental delay, but they are not so disabled that they qualify for services funded through the Ohio Department of Developmental Disabilities, and they are not so mentally ill that they qualify for services funded through the Ohio Department of Mental Health. These are children who have low IQs, struggle to learn basic life skills, and have limited capacity to live on their own without support, but they do not qualify for services. In essence, they are children in the "gaps," or "gapper" youth.

Benefit limits for Medicaid mental health services. As part of Ohio's biennial budget process for fiscal years 2011 and 2012, Ohio's Governor and General Assembly implemented a series of Medicaid cost containment strategies to address the rising cost of health care and to improve the state's overall health system performance. In terms of mental health services, strategies included annual service limits for community psychiatric supportive treatment (CPST), pharmacologic management, individual and group counseling, diagnostic assessment (physician and non-physician), and partial hospitalization as well as weekly service limits for case management, group counseling, individual counseling, and medical somatic. The change in law became effective July 1, 2011, and will ultimately affect client service plans and coordination between Daybreak and outside providers who bill Medicaid for mental health services.

Lack of case management services tied to mental health services. For the mental health population to remain stable, individuals need to continue to take their medication and need to stay in touch with case managers. For those who require intensive case management, this service is not available to the extent it should be in Dayton. There are simply not enough case managers to go around, and those that are available do not have the capacity to provide

intensive case management. The issue is tied to funding and to the newly imposed limits on case management services that can be billed under Medicaid.

Barriers to clients' accessing services. Numerous barriers impede Daybreak clients' access to mainstream services, including waiting lists, inflexible agency policies or eligibility requirements that youth cannot meet (*because* they are young and cannot demonstrate the same history of barriers or need compared to the adult homeless population), poor credit or a lack of credit history, lack of transportation, no experience as a lease holder, etc. These barriers may also hinder or delay Daybreak's ability to serve youth in ways that are most impactful.

Lack of employment opportunities. The barriers that Daybreak youth face trying to gain (and maintain) employment include not only a lack of jobs because of the area's economic downturn but also their own lack of employment skills. These include employment searching skills (resume building, interviewing); job readiness and soft skills (communication skills, attitude, time management, understanding workplace expectations); and job-related technical skills.

Denial that youth homelessness is pervasive. Some communities, especially outlying suburban communities, assume that youth homelessness is primarily an urban issue and not a personal cause for concern. Daybreak works to educate and spread awareness of the reality of youth homelessness—that it is happening in the suburbs, too.

Challenges to preventing homelessness among "systems" youth

Child welfare, juvenile justice, mental health, and homeless services systems understand that young people who age out of system care and lack the emotional or financial support of families are at extremely high risk for homelessness as young adults (Naude, LeTourneau, & Falcocchio, 2009; Courtney et al., 2010). Youth and young adults without parents or other supportive family members do not have the concrete support and guidance parents ideally provide to encourage high school completion, development of basic job skills, and plans for furthering one's education or career (Rauch, 2011).

In Montgomery County, despite efforts to improve partnership and collaboration across major systems that serve youth, these systems still operate in relative silos (stakeholder interviews, November 2011). In 2009, a Youth in Transition work group was created under the Young People Succeeding outcome team—one of six "desired community outcome" teams within Montgomery County's Office of Family and Children First. The work group was established in response to concerns about older youth and young adults in transition to adulthood (youth in transition) falling through the cracks of various systems. The work group identified vulnerable youth, ages 16 to 24, experiencing one or more of the following as their target population:

- Aging out of foster care
- Transitioning out of the juvenile justice system
- Experiencing serious mental illness
- Living with disabilities
- Experiencing homelessness

In a report released in August 2011, the work group acknowledged that youth in transition are often served by multiple systems in "largely uncoordinated systems of care," a problem compounded by the fact that transition youth encounter a "transition cliff" when they age out of youth systems and attempt to access adult services. Adult systems often have different terminology, eligibility requirements, and service options that can be confusing and intimidating for any transition youth trying to understand and access them. The uncertainty this causes can result in dire consequences such as termination of services and lost progress (National Collaborative on Workforce and Disability for Youth, 2009).

In stakeholder interviews, several observations were made about the challenges faced by transitioning youth in Montgomery County and the need for better coordination among the systems that exist to help them. Observations included the following:

> Children Services indicates it has an Independent Living program and does discharge planning, but for the tough kids—the top 3% of the hardest to serve kids—which is who's involved with Daybreak, [the perception is that] Children Services "dumps" those kids when they turn 18…. Sometimes they get sent to Daybreak, but these are kids who can't move through the system [on their own] without an intensity of services.

> In Montgomery County, there is Children Services, the juvenile justice system, and the school system all involved [with troubled and at-risk youth], but they handle their roles piecemeal. There is no comprehensive approach to homelessness. …[T]here is no global or regional approach to how we're addressing this.

> We haven't done a good job of identifying "cross system" youth, especially between Children Services and the juvenile court, the two biggest players in the community. We haven't done a good job working together to make sure that all players are aware, or even involved in the same case.

> There should be more evaluation of kids coming out of foster care. Do we have someone that is stable, is doing well in high school, will go on to college, will continue to work with their foster parents? Or do we have someone who will be pushed out on the streets, is flunking out of high school, does not have a job or job ready skills? If the latter, those kids need to be identified earlier in the process before they're out on the streets. Whether they end up at Daybreak or another agency, those at-risk kids should be identified.

8.2. Daybreak's strengths

Later in the stakeholder interviews, respondents were asked what program or services they think Daybreak is best at delivering and where they saw opportunities for Daybreak to improve. In terms of what Daybreak does best, stakeholders identified these areas:

Daybreak knows its kids. Daybreak takes pride in having developed a service culture where every Daybreak client is known as a "Daybreak kid." Staff establishes and fosters strong relationships with clients by taking the time to understand their experiences, their strengths, and their challenges.

Dedicated, high-quality staff. Staff is compassionate, professional, and reliable, and staff members purposefully design goals and interventions to meet clients where they are (developmentally, emotionally, etc.). In the words of one stakeholder, "Staff embrace the child in such a way that, maybe for the first time in their lives, they actually believe that someone loves them."

Daybreak takes on some of toughest kids to serve. Daybreak staff does well with clients who are difficult to serve, providing them with safe housing and opportunities to pull themselves together, gain skills, and make appropriate plans for the future. This includes taking in youth with mental health diagnoses who are medicated and must maintain a daily regime. These youth in particular require close supervision and constant monitoring.

Core competencies—shelter and housing. Providing emergency shelter and housing is what Daybreak was founded to do and is still what Daybreak does best. Along the way Daybreak has added various support services as the needs of youth and the needs of the community have changed, but shelter and housing continue to be Daybreak's core competencies. These services are a safety net for runaway and at-risk youth in the Dayton area.

Transforming youth. Daybreak provides youth the opportunity to continue their education, gain life skills, obtain employment, and achieve self-sufficiency. In essence, Daybreak provides, for those who want to take advantage of it, the opportunity to be transformed from a person society overlooked and did not want to an independent, contributing member of society.

Alternative therapies. In addition to traditional individual and group counseling sessions, Daybreak offers youth opportunities to participate in activities that promote self-expression, empowerment, and skill building, including Supper Club, Coffee House, Power Clubs, and parenting classes.

Advocacy and involvement. Daybreak strives to be part of many communitywide discussions and initiatives that involve or touch on the needs of youth. Daybreak staff continually advocate for their clients and for homeless and at-risk youth generally. To the extent possible, Daybreak tries to educate the community and other services providers about the unique qualities and histories of youth and how best to serve them. Daybreak also tries to make all providers aware of the services others provide.

Fundraising. Daybreak staff have cultivated the skills necessary to be effective fundraisers for the organization. Daybreak's Raise the Roof capital campaign to build Opportunity House raised over $5 million in local support. Other ongoing events, such as Discover Daybreak and Champions for Youth breakfasts and luncheons, continue to bring in private dollars in support of Daybreak.

Leveraging grants. There are many RFP opportunities that require communities to partner together. Daybreak is very savvy at securing public funding, and the agency does a good job of identifying and bringing in resources that benefit multiple agencies, not just its own.

8.3 Opportunities for improvement

Stakeholders also noted areas where services or programs could improve, both within Daybreak and within the Dayton community.

Time delays associated with placing youth in Daybreak housing. At times, it can take several weeks to get kids into Daybreak housing after they have been referred through the Front Door Assessment Process. Daybreak's application process can sometimes take up to six weeks. For youth who are waiting in emergency shelter (and sometimes in an adult shelter), this delay can be stressful and may expose youth to additional trauma.

On-site mental health services. Daybreak over time has tried to build capacity and staff to support and proactively provide mental health services for Daybreak youth on-site— everything from diagnoses, to appropriate treatment, to medication. Daybreak has tried to take a more clinical approach to serving the mental health needs of the youth it serves, but the need continues to be great, and Daybreak is limited in its capacity to meet that need.

Collaboration related to mental health services and aftercare. External providers of mental health services perceive they are rarely asked to participate in provider meetings, where all providers to a particular client come together to discuss and coordinate services, especially to coordinate aftercare services.

Collaboration related to sharing services and/or merging programs. In today's economic climate, the reality is that funding for nonprofit service organizations is becoming scarcer. All nonprofits, including Daybreak, have to honestly assess whether they are trying to be "all things to all people" or whether their programs and services truly fill an unmet need. Where opportunities exist to share services, merge programs across agencies, or eliminate programs altogether, those opportunities should be explored.

Making on-site transitional housing available to younger adolescents. Currently youth in Daybreak's on-site transitional housing program are at least 18 years old. There may be a need to make this type of housing available for younger youth, ages 16 and 17, currently in the custody of Montgomery County's juvenile court. Because the court's residential programs are highly structured and supervised, youth coming from those environments would likely transition well into Daybreak's program. And for many, Daybreak is a far more promising option than returning home or entering foster care.

Transition planning. Daybreak has a highly qualified Executive Director who is well known in the community, has many connections, and has a unique ability to attract funding and pursue a variety of funding opportunities for Daybreak. This kind of expertise is not easy to find. Rather than a suggestion for improvement, a word of advice or caution for Daybreak is to think about, as a long-term strategy, what transition plan the agency should have in place if the current Executive Director ever leaves.

8.4. How Daybreak has changed over time

Stakeholders were asked to describe the extent to which they perceive that Daybreak evolved or changed over time in terms of its mission or focus, its target population, and the services it provides. The following summaries are taken from stakeholder responses.

Mission

- Daybreak's core mission, to provide safe housing and support to runaway and homeless youth in the Dayton/Montgomery County area, has not changed.

- However, instead of providing outreach and emergency shelter to minors until they can be reunified with family, the mission on which Daybreak was originally founded, the agency has evolved into a more sophisticated human service agency that provides shelter, residential programming, and mental health services. This has required a change in mission, focus, and services.

- In the words of one stakeholder, when Daybreak started (back in 1975), "it was the closest thing to a teenage flophouse that you could find." The program lacked well defined structure, and few clinical or support services were provided. Over the course of 35 years, Daybreak has evolved from what was essentially emergency shelter and a collection of separate, even fragmented programs into a housing continuum that provides tailored levels of structure, supervision, and services, in addition to measurable outcomes.

Population

- Daybreak has taken on a niche of kids that are like castaways—they are too old to be part of the foster care system but too young to be appropriately considered within the adult system. These are kids, ages 17 to 22, that no one else wants to claim, and Daybreak does.

- Daybreak has taken on harder-to-serve kids. It used to be that Daybreak took on the top 10% or 15% of the most "difficult to serve" clients—those involved with the juvenile court, with Children Services, or the mental health system. Today, Daybreak has evolved and is better equipped with staff that can serve an even more difficult client—perhaps the top 3% of those who are most difficult to serve. Many of these youth have moderate to severe mental health issues that must be addressed as part of their service plans.

- Over the last several years, Daybreak has shifted from serving primarily minors—children in the 13- to 15-year-old range—to older youth (17 and older). This is partly because of youth who turn 18 and for whatever reason are told to leave home and because of youth who age out of foster care without a permanent and stable place to live and without the skill set necessary to live independently.

Services

- Moving into Opportunity House has allowed Daybreak to provide highly supervised, on-site transitional housing and an array of on-site support services that were not possible in its former location on Wayne Avenue.

- Daybreak grew from a traditional youth shelter into a comprehensive shelter/mental health agency. The service it provides now is more akin to residential programming.

- Daybreak's services have evolved and expanded because the scope of the needs of Daybreak youth has expanded, especially regarding mental health.

- Daybreak recently opened Alma's Place, which is testament to the fact that Daybreak has tried to meet the needs of youth and of the community when they are identified and when resources and staff can be directed to serve those needs.

8.5. Perceptions of lessons learned

Finally, stakeholders were asked how Daybreak (the agency) or Daybreak staff, in their estimation, learn over time and apply that learning to providing support and services to youth in shelter and housing.

Self-assessment. Daybreak tries to be intentional about assessing the need for its own programs. This can be one of the hardest things for a nonprofit agency to do. Many are very mission- and service-driven, and it can be difficult to step back and ask "what is it that we are really good at doing, what services do we have to provide because they are critical, and what services would it be nice to provide but are not core services?" There have been times when Daybreak has stopped providing a program or service because it was not a core service. There have been other times when Daybreak has taken on a new program or service because management identified it as an unmet need and honestly assessed whether Daybreak had the capacity and ability to meet the need. Decisions like these are based on data; Daybreak has always been a very data- and metrics-driven organization.

Evaluation. Daybreak also tries to be intentional about evaluating the effectiveness of its programs. Evaluation is not easy, especially for professionals who are not trained in evaluation. But Daybreak has tried to define and measure outcomes and to create systems and processes to evaluate whether it is making a difference, how, and what staff have learned about how best to deliver programs. Daybreak's Executive Director has talked very openly about changes the organization has made because programs were not working or not achieving the outcomes the agency was hoping to achieve.

Mental health services training for Daybreak staff. Daybreak staff members are open to learning new methods and therapies in the treatment of mental health disorders. Daybreak's recent partnership with South Community Mental Health Center to provide professional training and consultation for Daybreak staff and for clinical Performance Quality Improvement chart review is part of this effort to train staff in the skills they need to best serve Daybreak youth.

Co-locating the shelter and on-site transitional housing programs. Bringing the emergency shelter program into the same building as Daybreak's on-site transitional housing program (Beachler apartments) enabled both Daybreak staff and many of Daybreak's support services to be located on-site. The move benefited staff by improving communication and coordination of services. Having services available on-site allowed staff to spend more time (and more quality time) with clients, getting to know them and helping them achieve, step by step, their goals. Life skills are not easy, and they take time to learn. Before Opportunity House, it was difficult for Daybreak to know how and to what degree it was having an impact on client outcomes because so many outside influences could affect them.

Knowing the population and planning ahead. The design of Opportunity House and, more recently, Alma's Place shows that Daybreak knows the population it serves very well. Both buildings incorporate private single bedrooms, common and recreational space, cameras and other security devices, and other amenities intended to promote an environment of privacy, safety, and fun for both clients and staff.

Creating a supportive environment that allows youth to thrive. Daybreak has created a service environment and culture that give youth who have been through enormous strife the opportunity to come to terms with their trauma, gain skills, be supported, and work their way up and out. With this opportunity comes a great deal of expectation—Daybreak is not in the business of providing a free place to stay without expecting youth to comply with the organization's rules and structure. Rather, Daybreak is in the business of providing the right mix of programming, structure, and support to allow every Daybreak client the chance to succeed.

9.0 Interviews with Daybreak Staff

Evaluation questions addressed

- *How do Daybreak's policies and procedures help to meet its mission and goals? (Question 2a)*
- *What factors have had an impact on how the Daybreak program is implemented? What decisions have led to important benchmarks in the development and evolution of the program? (Question 2b)*
- *What barriers and challenges does Daybreak face in serving youth and achieving its program goals and outcomes? (Question 2c)*
- *What lessons have been learned by Daybreak staff and other stakeholders about providing emergency shelter, transitional housing, and other support services to runaway, troubled, and homeless youth? (Question 3)*

In October and November 2011, CRP conducted three group interviews with Daybreak staff to explore lessons staff members have learned over time through the evolution of Daybreak's programs and services, the changing needs and characteristics of youth, and the implementation of the Daybreak evaluation project itself.

CRP met first with a group of 13 direct service staff from Daybreak's outreach, emergency shelter, on-site transitional housing, and community housing programs. With this group, CRP addressed several of Daybreak's programs individually—emergency shelter for minors, emergency shelter for 18-year-olds, on-site transitional housing, and community housing—and explored the challenges to serving youth in these programs and the barriers to achieving desired outcomes as well as the rules, client expectations, and support services considered to be critical for each program's success. Staff also discussed the Daybreak Dollars program and provided perspective of how well the program operated, its greatest strengths and weaknesses, and how the program could be improved.

Next, CRP interviewed a group of eight management-level staff from Daybreak, including the CEO; Chief Operating Officer; Clinical Director/Chief Program Officer; and the directors of Daybreak's shelter, housing, and group home programs. This interview focused largely on how Daybreak was founded and has evolved over time, the best practice models on which Daybreak bases its interventions and services, Daybreak's partnerships and relationships in the Dayton community, and lessons learned from preparing for and implementing the Daybreak evaluation project.[17]

Finally, CRP interviewed a group of four Daybreak staff, including the Performance Quality Improvement Coordinator, Data Evaluation Specialist, Development Associate, and HMIS Administrator, to talk specifically about the Daybreak evaluation project, the positive and negative impacts it has had on organization-wide data collection, and lessons learned that might be shared with other youth housing programs wanting to streamline data collection or conduct a program evaluation similar in scope to Daybreak's evaluation.

9.1 Direct service staff perspectives

Emergency shelter for minors

According to Daybreak staff, one of the biggest challenges to serving minors in its emergency shelter is securing permissions and coordinating services through the minor's legal guardian. In some cases, guardians are difficult to contact or simply refuse to support Daybreak staff. Other times, what the child wants and what the guardian wants is not the same. Most often, a guardian will send a minor to Daybreak assuming that in two weeks the child will be "fixed"

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[17] Much of the factual information provided by Daybreak management regarding how Daybreak was founded, best practice models, and partnerships has already been discussed and incorporated into earlier sections of this report. The current section will summarize management's insights and lessons learned through its many years of experience.

and whatever problems the family was having will now be resolved. Getting buy-in from guardians on the need for their ongoing support, and the potential need for follow through and aftercare, can be a challenge for Daybreak staff.

Ultimately, a desired, positive outcome for any youth at Daybreak (not only minors) is to secure a permanent, safe place to live where his or her natural needs are being met (i.e., food, clothing, and the opportunity to attend school). This is typically how a grant or funder of Daybreak programs defines a positive housing outcome. Within that definition, however, are numerous potential outcomes for minors, including relocation in the home or placement with Children Services. One of the biggest challenges is ensuring that a minor youth ends up not only in a safe place, but a place that is best suited to meet his or her emotional, developmental, and physical needs.

In terms of Daybreak rules and client expectations for minors in emergency shelter, staff says that the highly structured environment of the shelter is essential, as is the mandate that youth must attend school. Daybreak's "no hands" policy is also critical for protecting residents and staff and for cultivating the sense that Daybreak is a safe, supporting place for youth to recover from the trauma of their personal experiences.

Critical services that Daybreak provides to this population include the emphasis on attending school; sponsoring outings and fun recreational activities; and having social workers and staff on-hand 24 hours a day to talk with youth, provide advice, and a much-needed sounding board. Daybreak's mental health assessment, which is administered to every youth in shelter and housing, also provides staff with insight into a youth's emotional state and mental well-being. Although it is true that if a minor is mentally ill, he or she will only rarely present fully developed symptoms of the illness at such a young age, Daybreak staff say that in recent years they have had increasing numbers of minors in shelter that have come into their mental illness at a young age and require higher levels of attention and services from Daybreak staff.

Emergency shelter for 18-year-olds

Developmentally, 18-year-olds in emergency shelter do not look much different than minors, but their circumstances are different, as are the expectations placed on them. Very rarely does Daybreak have an 18-year-old in shelter who is interested in being reunified with his or her family; at age 18, he or she can decide what housing options to pursue and what services to seek out or receive. That said, because many of these youth lack the skills they need to secure employment and live on their own, the challenge for Daybreak becomes developing a reasonable and achievable transition plan to help the youth (legally an adult) remain stable in housing and avoid future homelessness.

Some youth (approximately 20%) apply for and are accepted into Daybreak's transitional housing program. Many others decide they are not interested in the rules and structure that Daybreak requires and opt to live independently, despite the many obstacles they face.[18] Still others are not suitable for Daybreak's housing program because of severe mental illness or developmental delays that Daybreak's programs are not equipped to address. For these "gapper" youth, Daybreak's challenge is to locate mainstream services and systems that will accept the youth and see to their needs over the long term.

Daybreak policies that staff consider to be critical for 18-year-olds in shelter include developing and sticking to timelines, especially those related to enrolling in school or a GED program (for those who do not have a high school diploma) and gaining employment. These are messages that Daybreak staff—in both shelter and housing —continually push and reinforce.

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[18] For 18-year-olds who have been living on the street for any length of time, this resistance to Daybreak's rules and structure can be particularly difficult to overcome. Staff say that sometimes, youth simply leave the shelter without a word and no one ever hears from them again.

Critical services to 18-year-olds in shelter include employment services and educating youth about resources available in the community to support them in their transition to adulthood (financial aid, parenting resources, etc.).

On-site transitional housing program

For Daybreak staff, the biggest challenges to serving youth ages 18 to 21 in the Beachler apartments are the numerous barriers that stand in the way of youth obtaining and maintaining employment. When they first come to Daybreak, most youth lack basic employment skills and experience. In addition, some youth have criminal backgrounds that exclude them from pursuing certain types of employment. If youth are homosexual or transgender (and Daybreak serves a large population) they may face discrimination in the workplace, especially those who cross-dress according to the gender with which they identify. Many others do not have a high school diploma. Many who do obtain employment end up losing it quickly, primarily because of unrealistic expectations about what it means to have and keep a job and how many hours a person actually has to work to be able to live and support him or herself. These issues and others stand as barriers that ultimately affect Daybreak's ability to teach youth how to be self-sufficient and to live independently.

Developmentally, youth in Daybreak's Beachler apartments are no more advanced than the at-risk and homeless youth Daybreak serves in outreach and shelter. Many have experienced similar trauma, struggle with anxiety and other mental health problems, chafe against rules and authority, and lack basic life and employment skills. But to be accepted into the housing program, youth must demonstrate the capacity and willingness to comply with the program's rules and expectations, and Daybreak staff strives to support and hold youth accountable to these rules and to the agreements they have made.

In terms of policies that are important to this population of Daybreak youth, staff members believe that youth in the Beachler apartments have a great deal freedom and can come and go as they please provided they meet very basic requirements. Overall, the number one rule that youth must understand is that Daybreak's housing program is a *program*, not just a free place to stay. Youth are expected to earn rent through activities rewarded through Daybreak Dollars and are expected to work toward their own goals and plans for transitioning into stable and permanent housing.

Critical services to youth in the Beachler apartments include employment services. Daybreak's housing and shelter clients have access to an Employment Specialist, an employee of Goodwill Easter Seals who works at Daybreak half-time. In addition, case managers provide constant reinforcement, support in the areas of job searching, resume development, and mock interviewing. Other important services include basic life skills education, budgeting, linking to mainstream services, and identifying reliable and positive mentors and support networks, the latter of which becomes increasingly important as a youth prepares to leave Daybreak.

Community housing program

Tenants in Daybreak's community housing program have demonstrated good self-discipline and an ability to live on their own with less supervision than is provided on-site in the Beachler apartments. Challenges to serving youth in the community housing program include educating youth about what to do when something goes wrong in their apartment (e.g., the furnace goes out or the toilet overflows) to keep the apartment from being damaged. Another challenge is keeping outsiders from moving into the apartments (boyfriends, girlfriends, family members, etc.). Also, because many of the youth in community apartments are employed, scheduling necessary appointments and weekly case management meetings can be difficult.

Necessary rules and policies for tenants in community apartment include those associated with maintaining the apartment (e.g., no pets), not engaging in any illegal activities (e.g., no

selling drugs from one of Daybreak's apartments), no outsiders living in the apartment unless approved by Daybreak, and maintaining good relationships with landlords and neighbors.

Essential services provided to youth in the community housing program include, again, employment services, especially for youth who have lost a job and need to quickly find another one, budgeting, and prioritizing household purchases. Many youth in this program struggle with sticking to the budget they have set and run the risk of ruining the good credit they are trying to establish.

Daybreak Dollars

Staff perceives that the Daybreak Dollars program helps youth achieve or make progress toward self-sufficiency by teaching responsibility. Youth understand that they are accountable for the rent subsidy they have been provided through their Beachler apartment and that to earn the subsidy they must attend school or find employment and participate in groups and other activities. Daybreak Dollars also provides staff with a quantitative measurement of each tenants' level of engagement and participation on a weekly basis. Case managers can see based on total Daybreak Dollars earned and/or fines assessed where a client is doing well and where a client may need redirection or additional guidance and support.

Staff observes that the effectiveness of the Daybreak Dollars program ebbs and flows based on the current population of youth in housing. At times it seems that all tenants have bought into the program and are in compliance. Other times there may be one or two residents who are less motivated or who refuse to comply with the requirements of the program, and their attitude affects everyone else's participation. Daybreak staff believes this is partly because of their inability to truly enforce the "penalties" side of the Daybreak Dollars program.

According to Daybreak's policy, violations of the Daybreak Dollars program should result in fines and specific corrective actions, including a 30-day Written Warning, 30-day Revocable Notice of Discharge, and development of a Subsidy Termination Prevention Contract. However Daybreak staff thinks that more typically, if a Daybreak tenant does not make rent, they simply do not make rent. Corrective actions are not always pursued. The flip side of this argument[19] is that when dealing with a population of youth that have experienced so many traumas, that have had so much taken from them, punitive approaches simply do not work. For all Daybreak staff, the Daybreak Dollars program represents a balance (tenuous at times) between rewarding good behavior with positive reinforcement (Daybreak Dollars) and "penalizing" inappropriate behavior by enforcing rules related to noncompliance.

Overall, staff feel that having Daybreak Dollars is "ten times better" than when Daybreak did not have a token economy system. Prior to Daybreak Dollars—and actually, within just a few months of moving into Opportunity House—many youth moved into their apartment, shut their door, stopped participating in programming, and ignored most of Daybreak's rules. Today, Daybreak Dollars effectively motivates youth to set and achieve goals and to improve their own circumstances. The program also empowers youth and gives them tangible evidence of their ability to earn their way, make rent, and be responsible. The additional perk of Daybreak Dollars paying out in real dollars when youth graduate from Daybreak is also a source of pride. Youth can use the money to purchase furniture and other amenities for an apartment in the community—an accomplishment that *they* made possible by excelling in the program.

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[19] As explained by Daybreak management in a separate interview.

9.2 Management's insights and lessons learned

The eight members of Daybreak's management team who participated in CRP's group interview have 75 years' combined experience working at Daybreak. For these individuals, lessons they learn both individually and as a group about how best to meet the needs of the vulnerable populations they serve literally occur every day. The insights and lessons provided below represent only a few of these, but they are useful for understanding how, over the course of time and through changes in funding, community priorities, and need, Daybreak as an organization has adapted and evolved.

Street outreach: homeless youth in Daybreak stay underground. Daybreak received its first federal grant to do street outreach in 2001. Before long, staff began to understand that the way street outreach happens in large urban settings like New York and Chicago would not work in Dayton. In those other settings, homeless youth were readily identifiable because they tended to hang out together in public spaces. In Dayton, homeless youth stayed "underground" because Dayton police were known to canvass and "sweep up" loitering youth who appeared to be truant or homeless and take them places they did not want to go—back home, Children Services, Daybreak, etc. Daybreak outreach staff learned that to identify and reach out to homeless youth in Dayton, they had to go underground themselves. They started going where youth congregate naturally—schools, recreation centers, clubs, etc.—and started talking to youth, passing out information, and talking through friends of homeless youth to get the word out that Daybreak was there to help.

Emergency shelter: why Daybreak opened its emergency shelter to 18-year-olds. In the mid-2000s, the Montgomery County Juvenile Court opened the Intervention Center, a 24-hour, seven-day-a-week centralized intake, screening, assessment, and case processing department for all children referred to the court for delinquency and unruly behavior. After the Intervention Center opened, Dayton police (still canvassing and sweeping up delinquent and truant youth) started dropping minor youth off there rather than taking them to Daybreak. At the time, Daybreak's shelter served only minors ages 10 to 17. As more minors were diverted to the Intervention Center, the number of minors in Daybreak's shelter decreased, and Daybreak staff saw an opportunity. Federal and state guidelines under the Runaway and Homeless Youth Act had recently changed to allow 18-year-olds to be served in emergency shelter. Staff reviewed Daybreak's own service history, recognized a need in the community, and petitioned its Board for a change in agency policy to allow 18-year-olds to come into emergency shelter. The change was approved in 2005.

Opportunity House: a new facility that united staff and improved service delivery. When Daybreak was located on Wayne Avenue, the emergency shelter operated out of one building, a second building housed administrative offices, and a third building was used for classes and recreational activities. The street outreach and community housing programs existed, but there was no on-site transitional housing program. Despite management's efforts to promote an organizational culture that embraced every youth as a "Daybreak youth," programs tended to operate in isolation. The agency's former organizational and staffing structure was reflected in individual funding streams, resulting in each department employing its own social workers, youth workers, program specialists, etc. Youth tended to be viewed as either a "shelter youth" or an "outreach youth." And because staff was not located together, communication among staff in different programs also suffered.

Building Opportunity House allowed Daybreak to bring all its resources together under one roof. Today, emergency shelter, facilities for street outreach, and Daybreak's new on-site transitional housing program all operate out of one building, and offices for all Daybreak staff are located on the third floor. Co-locating staff and services into one facility allowed Daybreak to shift to a more client-driven model in which all youth are viewed as "Daybreak youth." Soon after moving into Opportunity House, management began holding what it called "marathon

meetings" of interdisciplinary staff so that staff across programs would learn what others were doing, what interventions they were trying, and what progress youth were making so that when clients transferred from one program to another (e.g., from shelter to housing) the transitions occurred more smoothly. What developed naturally from this was a new level of understanding and respect among staff. Processes improved, opinions and input were heard and valued, office morale improved, and ultimately services to Daybreak youth improved. As one senior staff member described it,

> Everyone came into the room and brought their piece of the puzzle. When we discussed youth and their progress or lack of progress, different staff knew the kids through different lenses. And kids responded differently to different staff, which gave us one more piece of the puzzle. When we got the staff together, we started to get a picture of the whole kid.

For Daybreak as an agency, these events helped cultivate the organization's strengths-based culture, which today is the foundation of nearly every aspect of the agency, from the way staff communicates with each other to the way therapies and interventions are provided to clients. Daybreak's five core values—commitment to young people, respect, integrity, empathy, and teamwork—are grounded in this foundation.

Program evolution: be responsive to feedback. Daybreak strives to learn from its own history, from the experiences of staff and clients, and through community feedback. The agency participates on committees and work groups, develops partnerships and links to other providers and schools, and generally tries to stay connected and responsive to the community. The agency also collects feedback from clients and community stakeholders to assess whether and to what extent programs are working and meeting needs. Shelter and housing clients are asked to complete satisfaction surveys that ask specifically about the helpfulness of Daybreak's services, how they are treated by staff, and whether they would recommend Daybreak to others.

Daybreak also implemented new Performance Quality Improvement (PQI) processes approximately six years ago. The project requires diligently tracking and reporting numerous types of output data, including financial data, incident reports, safety reviews, client and staff satisfaction data, staff trainings, turnover rates, daily census counts and bednights, and client outcomes. Although it has required a great deal of work (and a fair amount of griping from staff), the payoff for Daybreak includes the ability to

- Identify and track key trends
- Manage and analyze individual and aggregate outcome data
- Analyze assessment results
- Maintain a comprehensive history of participate information
- Address multi-funder reporting obligations
- Report and share findings with other organizations locally and nationally

Client services: bring as many on-site as possible. Daybreak staff has found that in general, if a client service can be provided on-site it is more effective. At Daybreak, case management and individual and group counseling sessions are held on-site, as are life skills classes, parenting classes, and various youth empowerment and developmental activities. In addition, a psychiatrist comes to Daybreak once each week to meet with certain clients. Drug and alcohol counseling is also provided online through a link to a local rehabilitation services provider. When services are offered on-site, youth are more willing to participate and barriers to access can be overcome (transportation, hours spent in waiting rooms, intimidation and anxiety, etc.).

Daybreak: not a one-size-fits-all agency. Daybreak has learned over time that to adequately address the problem of youth homelessness at a community level, it must create a housing continuum that incorporates various housing solutions suitable to a broad range of housing needs. All homeless youth are not the same, and although Daybreak's housing programs are suitable for many homeless youth, they are not suitable for all. In Daybreak's view, a community housing continuum should include emergency shelter for youth who need a safe place to crash for one or two nights, a "pre-housing" shelter that prepares youth for transition into a more long-term housing program, a highly structured transitional program for youth who need guidance and supervision, a scattered site community housing program for youth who can handle that level of responsibility, permanent supportive housing (or trans-permanent supportive housing) for youth who suffer from mental illness or cognitive dysfunction that cannot succeed in transitional housing, and a Housing First model for youth who need an affordable a place to live but are not interested in participating in a structured transitional program. In the words of one senior staff member,

> Daybreak has learned over time that if we take a youth that is inappropriate for our services, and we know that from experience and from our assessment tools, we are setting up the kid to fail. And we're setting up our staff to fail, and we're risking sabotaging the progress of the other kids in the program. And that's not fair to anyone. It isn't that we don't want to take those kids, but there are gaps in this community—gaps in housing and in supportive services that have to be filled. As a community, we have to create programs to help the kids who don't fit Daybreak's program.

Front Door Assessment: a move in the right direction. Montgomery County's new Front Door Assessment Process has succeeded in bringing agencies together and has made providers more aware of the services and resources available in the community. The process has also required community leaders and providers to honestly and objectively assess where there are gaps in services and to strategize about how those gaps could be filled. Of particular importance to Daybreak, as a result of the county's centralized waiting list and prioritization system, increasing numbers of youth referred for permanent supportive housing have obtained that type of housing.

9.3 Data team perspectives

From the onset of the Daybreak evaluation project, Daybreak's data team has served in many respects as the intermediary between Daybreak's senior staff—who conceptualized and sought funding for the "big picture" of the evaluation—and CRP—who helped define the project's specific evaluation questions and data requirements. The data team comprises staff who are highly knowledgeable of Daybreak's data collection and assessment tools, reporting requirements, and database capacities. On numerous occasions when Daybreak management or CRP has asked, "do we collect this," "can we collect this," or "what tool best captures this?" the data team has explained the process, refined data tools as necessary, and taken on the responsibility of explaining new processes to direct service staff. Their observations, suggestions, and lessons learned may be useful to other organizations wanting to streamline their data collection processes or undertake an evaluation like Daybreak's.

Observations

Streamlining data collection. Daybreak has always collected data about its clients, services, and outcomes and has maintained clinical and case management data for every youth served. Funders, government entities, and regulatory agencies all have reporting requirements with which Daybreak must comply. Soon after the Daybreak evaluation project commenced, the data team realized there would be some overlap between the data needs of the evaluation and the agency's many reporting requirements, and unless processes were streamlined, direct service staff would be asked to collect the same information more than once for different purposes. To avoid this, multiple changes were made to forms and procedures, which created a significant data entry backlog for the team.

Increased data collection requirements for direct service staff. In addition to changing forms and streamlining procedures, direct service staff are required to collect data more frequently. For example, in order to guage the degree to which participation in Daybreak's programs affect client outcomes in the areas of housing, physical and mental health, life skills, income and employment, and education, staff must administer several different tools at entry, every six months, at program transfer, at exit, and seven months post-exit (depression/anxiety checklist, Ansell-Casey Life Skills assessment, etc.). Some of these processes were put in place for the Daybreak evaluation project, but they will continue beyond the timeframe of the evaluation itself. This message has not always been well received among Daybreak staff. Many direct service staff perceive that the paperwork they are required to do, and which is a necessary part of data collection, is already an annoyance at best and at worst takes away from the time they are able to spend with clients. Adding to their paperwork load has only increased their frustration.

Suggestions and lessons learned

Bring on evaluation staff at the beginning of the evaluation process. Two of the four members of the data team joined Daybreak's staff about three months after the evaluation project began and had to spend their first weeks and months familiarizing themselves with Daybreak's current processes, then learning what the evaluation would require and what processes needed to change to avoid duplication of data collection. Bringing evaluation staff on earlier would ensure that all staff start from the same place of knowledge and could make necessary transitions to new processes occur more smoothly.

Clearly define the roles of senior staff and evaluation staff. A recurring frustration for members of the data team were "brainstorming" sessions and discussions about the parameters of the evaluation that resulted in what they felt were ever-changing data collection requirements. At times it seemed like a decision about a set of output measurements or a specific assessment tool would be made, but in a follow-up conversation something would be added or changed. Although there are necessary and unavoidable "back and forth" processes that are a normal part of designing an evaluation plan, the data team felt that some of the confusion was attributable to senior staff not being as familiar with Daybreak's data collection processes and "promising" things that were complicated to achieve or difficult to change in light of other changes that had already been implemented. One recommendation would be to have senior staff closely involved in the conceptualization and initial start-up phases of an evaluation project (to provide high-level parameters) and then to step back and assume an advisory role while the work of the evaluation itself is accomplished by the data team and external evaluators.

Clearly articulate to direct service staff the goals of the evaluation and its importance.
Daybreak management places great value on the ability to track outcomes over time and when possible link what it knows about a client's history or profile to services that its own data suggest will help a client, over time, achieve his or her goals. This is why the data collection and streamlining processes that began with the evaluation project will continue beyond the timeframe of the evaluation itself. However, the data team perceives that direct service staff—those responsible for doing the paperwork and submitting necessary data at regular intervals and on time—do not understand and are not invested in the evaluation process. Clearly communicating the goals of the evaluation and why it is important to both Daybreak and to the youth Daybreak serves might ease frustrations among staff, improve morale, and allow new data collection protocols to be implemented more easily (and with fewer complaints).

10.0 Next Steps: Data Collection

Evaluation questions addressed

- *What data do Daybreak collect? (Question 2e)*

10.1. Data collection protocol

Identifying appropriate output and outcome measures for the impact evaluation was a primary focus of start-up activities under Phase 1 of the Daybreak evaluation project. As discussed in the previous section, the process required input from multiple players and required Daybreak's data team to alter and refine assessment tools and other instruments several times. The result of this work was a detailed protocol for 17 months of data collection that began on August 1, 2011, and will continue through December 31, 2012. During this time, Daybreak staff will collect data from emergency shelter and housing clients at the following time periods:

1. At intake
2. Every six months a client is enrolled in the program
3. Every time a client transfers from one program component to another (e.g., from shelter to a Beachler apartment or from a Beachler apartment to a community apartment)
4. At exit
5. Seven months post-exit

Specific measures fall into three broad categories: (1) participant characteristics, (2) participant activity in Daybreak programs, and (3) participant outcomes.

Participant characteristics

Measures of participant characteristics include, but may not be limited to, the following:

- Age
- Race
- Gender
- Income and employment status
- Educational attainment
- History of foster care, kinship care, or adoption
- History of homelessness and length of time homeless
- History and severity of abuse or neglect
- History of trafficking
- Family composition
- History with criminal justice system
- Pregnancy status
- Parenting status and number of children
- Sexual orientation
- Mental health status
- Physical health status
- Use of alcohol, tobacco, or other drugs
- Scores on standard scales that measure Global Assessment of Functioning (GAF), levels of depression or anxiety, life skills attainment, and developmental assets

Participant activity in Daybreak programs

Measures of participant activity in Daybreak programs include the following:

- Average number of Daybreak Dollars earned monthly for various activities
- Total Daybreak Dollars at completion of Beachler housing phase
- Number of corrective actions required during Beachler housing phase
- Types of activities performed to acquire Daybreak Dollars
- Daybreak Dollars fined
- Length of time (number of nights) in shelter
- Length of time in housing
- Hours of individual therapy/counseling
- Hours of group therapy/counseling
- Hours of accessing health care services
- Hours of individual CPST/life-skills counseling
- Hours of group CPST/life-skills counseling
- Hours in work readiness activities
- Hours in employment
- Hours spent accessing mainstream benefits
- Hours of class attendance/participation
- Hours spent on education activities

Participant outcomes

Measures of participant outcomes include the following:

- Negative or positive completion of the program
- Move from transitional to community housing, transitional to permanent housing, or community to permanent housing
- Maintenance of housing for seven months
- GAF score
- Measures of mental health status, including depression/anxiety scale score
- Controlled alcohol, tobacco, or other drug use
- Health level
- Possession of health insurance
- Ansell-Casey Life Skills Assessment score
- Lack of criminal involvement
- Income from employment or other sources
- Sufficient income to cover living expenses
- In school to obtain a high school diploma or GED (if applicable)
- In a program leading to higher education (if this is a goal)

10.2. Data collection instruments

The specific data points that capture participant characteristics, participation, and outcomes are being collected through six separate assessment tools. Some of these instruments have been used by Daybreak for a number of years; others were developed by Daybreak specifically for use in the evaluation project. A copy of each tool can be found in Appendix B. They include the following:

1. Mental health assessment

2. Mental health assessment supplement

3. Depression/anxiety checklist

4. "Face sheet"

5. Ansell-Casey Life Skills assessment

6. Search Institute's 40 Developmental Assets assessment

Mental health assessment and supplement

The mental health assessment, also known as the "adult diagnostic assessment," is a standard form that Daybreak is required to use as part of the Ohio Department of Mental Health's Solutions for Ohio's Quality Improvement and Compliance (SOQIC) Standardized Documentation Initiative. This form, and others like it, was created by a committee of Ohio Department of Mental Health personnel, ADAMHS board staff, and other stakeholders.

The mental health assessment supplement was developed by Daybreak staff specifically for use in the evaluation project. This form captures several of the client characteristics and risk factors for homelessness that will be part of the statistical models created to examine the relationship(s) that exist among client characteristics, participation in Daybreak's programs, and outcomes.

Both the mental health assessment and the mental health assessment supplement are completed by a Daybreak clinician or case manager at intake.

Depression/anxiety checklist

The depression/anxiety checklist was developed in-house and has been used by Daybreak staff for many years to assess both the presence and the degree of feelings of depression and/or anxiety among shelter and housing clients. The checklist is filled out by the Daybreak youth at intake, every six months, at program transfer, at exit, and at seven months post-exit.

The form consists of two series of statements. The first series indicates feelings of depression (e.g., "feeling sad or down in the dumps?" "feeling hopeless about the future?"), and the second indicates feelings of anxiety (e.g., "feeling nervous, worrisome, or fearful?" "feeling things are strange or unreal?"). After each statement, the client is asked to indicate first whether the statement applies to him or her "right now" or "in the past" (or both) and then to what degree—"a lot," "a little," or "not at all."

Although intended as a measure of a client's level of depression and/or anxiety, the words "depression" and "anxiety" do not appear anywhere on the form (the form itself is untitled). This is purposeful. As Daybreak staff explained, many youth who come to Daybreak dislike filling out forms and feeling as if they are constantly being "assessed." To avoid actually creating feeling of depression or anxiety among the youth completing the form, those particular words are avoided.

Face sheet

Similar to the mental health assessment supplement, the "face sheet" was developed by Daybreak staff specifically for use in the evaluation project. The face sheet captures many of the output and outcome measures intended to show whether and to what degree clients have made progress toward housing, physical and mental health, life skills, income and employment, and education goals. The face sheet is completed by a Daybreak case manager or clinician at intake, every six months, at program transfer, at exit, and at seven months post-exit.

Ansell-Casey Life Skills and 40 Developmental Assets assessments

Both the Ansell-Casey and the Search Institute's 40 Developmental Assets assessments were discussed at some length in Section 6 of this report. Both assessments are completed by the client and the client's case manager or clinician at intake, every six months, at program transfer, at exit, and at seven months post-exit.

References

Abt Associates. (2011). *Front door assessment process: A six-month review.* Bethesda, MD: Abt Associates, Inc.

America's Promise Alliance. (2011). The five promises. Retrieved from
http://www.americaspromise.org/About-the-Alliance/Five-Promises.aspx

Association for Behavioral and Cognitive Therapies & Society of Clinical Child and Adolescent Psychology. (2010).
Evidence-based treatment for children and adolescents. Retrieved from
http://effectivechildtherapy.com/sccap/

Barth, R. (1986). Emancipation services for adolescents in foster care. *Social Work, 31,* 165-171.

Benoit-Bryan, J. (2011). *The runaway youth longitudinal study: A panel study spanning 15 years which examines the characteristics of kids who run away from home and the long term impacts of runaway behavior on key outcomes in adulthood*. Chicago, IL: University of Illinois.

Burt, M. (2007). *Understanding homeless youth: Number, characteristics, multisystem involvement, and intervention options*. Testimony before the U.S. House Committee on Ways and Means, Subcommittee on Income Security and Family Support. Retrieved from the Urban League website:
http://www/urban.org/publications/901087.html

Burt M., Pollack, D., Sosland, A., Mikelson, K., Drapa, E., Greenwalt, K., & Sharkey, P.T. (2002). *Evaluation of continuums of care for homeless people: Final report*. Washington, DC: U.S. Department of Housing and Urban Development, Office of Policy Development and Research.

Casey Family Programs. (2011). Casey life skills. Retrieved from http://www.caseylifeskills.org/

Collins, M. (2001). Transition to adulthood for vulnerable youths: A review of research and implications for policy. *Social Service Review, 75,* 271-291.

Cook, R. (1991). *A national evaluation of Title IV-E foster care Independent Living Programs for youth: Phase 2.* Rockville, MD: Westat, Inc.

Cooper, M. (2008). *Essential research findings in counseling and psychotherapy: The facts are friendly*. Los Angeles, CA: SAGE Publications.

Council for Boys and Young Men. (2011). What is a council? Retrieved from
http://www.boyscouncil.com/how_it_works.htm

Courtney, M., Dworsky, A., Lee, J., Raap, M., Cusick, G., Keller, T., et al. (2010). *Midwest evaluation of the adult functioning of former foster youth.* Chicago, IL: University of Chicago Chapin Hall. Retrieved from
http://www.chapinhall.org/research/report/midwest-evaluation-adult-functioning-former-foster-youth

Downs, C., & Caldwell, K. (2003). Foster care, adolescence. In T.P. Gullotta & M. Bloom (Eds.), *Encyclopedia of primary prevention and health promotion* (pp. 498-503). New York, NY: Kluwer Academic/Plenum Publishers.

Eccles, J., & Gootman, J., (eds). (2002). Executive summary. *Community programs to promote youth development* (pp. 1–18). Washington, DC: National Academies Press. Retrieved from
http://www.nap.edu/catalog/10022.html

Greene, J., Ringwalt, C., Kelly, J., Iachan, R., & Cohen, Z. (1995). *Youth with runaway, throwaway, and homeless experiences: Prevalence, drug use, and other at-risk behaviors*. Washington, DC: U.S. Department of Health and Human Services, Research Triangle Institute.

Hagan, J., & McCarthy, B. (1997). *Mean streets: Youth crime and homelessness.* Cambridge: Cambridge University Press.

Harvard Mental Health Letter. (2006). *Contingency management* (Volume 22, Issue 8). Stamford, CT: Harvard Health Publications.

Homeless Solutions Policy Board. (2006). *A blueprint for ending chronic homelessness and reducing overall homelessness in Dayton and Montgomery County, Ohio*. Retrieved from http://www.mcohio.org/services/fcfc/docs/Abridged.pdf

Hopper, E., Bassuk, E., & Olivet, J. (2010). Shelter from the storm: Trauma-informed care in homelessness service settings. *The Open Health Services and Policy Journal*, 3, 80-100.

Klein, J., Woods, A., Wilson, K., Prospero, M., Greene, J., & Ringwalt, C. (2000). Homeless and runaway youths' access to health care. *Journal of Adolescent Health*, 27(5), 331-339.

MacLean, M., Embry, L., & Cauce, A. (1999). Homeless adolescents' paths to separation from family: Comparison of family characteristics, psychological adjustment, and victimization. *American Journal of Community Psychology,* 27(2), 179-187.

Mannes, M. (2004). Research on and evidence for the developmental assets model. *Getting to outcomes: Promoting accountability through methods and tools for planning, implementation, and evaluation* (Appendix B). Santa Monica, CA: RAND, p. 275-299

McDonald, T., Allen, R., Westerfelt, A., & Piliavin, I. (1996). *Assessing the long-term effects of foster care: A research synthesis.* Washington, DC: Child Welfare League of America.

Mech, E. (1994). Foster youths in transition: Research perspectives on preparation for independent living. *Child Welfare, 75,* 603-624.

Molino, A. (2007). *Characteristics of help-seeking street youth and non-street youth.* Chicago, IL: Rosalind Franklin University of Medicine and Science.

Moore, J. (2005). *Unaccompanied and homeless youth review of literature (1995-2005)*. Washington, DC: U.S. Department of Education, National Center for Homeless Education at SERVE.

National Alliance to End Homelessness. (2006) *Fundamental issues to prevent and end youth homelessness* (Youth Homelessness Series, Brief No. 1). Retrieved from http://www.endhomelessness.org/content/general/detail/1058

National Alliance to End Homelessness (2009). Homeless youth letter to Obama Administration. Retrieved from www.endhomelessness.org/content/article/detail/2202

National Association of Cognitive Behavioral Therapists. (2007). Cognitive-behavioral therapy. Retrieved from http://www.nacbt.org/whatiscbt.aspx

National Center for Homeless Education at SERVE. (2004). Local homeless education liaison toolkit. Retrieved from http://www.sccoe.org/programs/foster-homeless/docs/toolkit.pdf

National Child Traumatic Stress Network. (2007). Trauma-focused cognitive behavioral therapy (Fact sheet). Retrieved from http://www.nctsn.org/nctsn_assets/pdfs/promising_practices/TF-CBT_fact_sheet_3-20-07.pdf

National Coalition for the Homeless. (2008). Homeless youth (Fact sheet). Retrieved from
http://www.nationalhomeless.org/factsheets/youth.pdf

National Collaborative on Workforce and Disability for Youth. (2009). *Successful transition models for youth with mental health needs: A guide for workforce professionals* (InfoBrief, Issue 23). Retrieved from
http://www.ncwd-youth.info/information-brief-23

National Conference of State Legislatures (2010). Positive youth development. Retrieved from
http://www.ncsl.org/?tabid=16375

National Health Care for the Homeless Council (2004). *Homeless young adults ages 18-24: Examining service delivery adaptations*. Nashville, TN: National Health Care for the Homeless Council, Inc. Retrieved from
http://www.nhchc.org/wp-content/uploads/2011/09/101905YoungHomelessAdults.pdf

Naude, A., LeTourneau, C., & Falcocchio, L. (2009). *Ending Homelessness After Foster Care: Report from a meeting to explore effective programs, the principles and data underlying their success, and what is needed to scale up programming to end homelessness after Foster Care*. New York, NY: Common Ground. Retrieved from
http://www.commonground.org/wp-content/uploads/2010/Foster%20Care%20Report%20FINAL.pdf

Petry, N. (2000). A comprehensive guide for the application of contingency management procedures in standard clinic settings. *Drug and Alcohol Dependence, 58,* 9–25.

Petry, N. (2006). Contingency management treatments. *The British Journal of Psychiatry, 189,* 97-98.

Pope, L. (2006). *Housing for homeless youth* (Youth Homelessness Series, Brief No. 3). Washington, DC: National Alliance to End Homelessness. Retrieved from
http://www.endhomelessness.org/content/article/detail/2206

Rauch, C. (2011). *Youth in transition to adulthood in Montgomery County: Areas for concern.* Dayton, OH: Montgomery County Family and Children First Council, Youth in Transition Work Group.

Robertson, M., & Toro, P. (1998). Homeless youth: Research, intervention, and policy. In L. B. Fosburg & D. L. Dennis (Eds.), *Practical lessons: The 1998 National Symposium on Homelessness Research.* Washington DC: U.S. Department of Housing and Urban Development and U.S. Department of Health and Human Services. Retrieved from http://aspe.hhs.gov/progsys/homeless/symposium/3-youth.htm

Roman, N., & Wolfe, P. (1995). *Web of failure: The relationship between foster care and homelessness*. Washington, DC: National Alliance to End Homelessness.

Sesma. A., Jr. & Roehlkepartain. E. (2003). Unique strengths, shared strengths: Developmental assets among youth of color. *Search Institute Insights & Evidence, 1*(2), 1–13. Retrieved from
http://www.search-institute.org/system/files/InsightsEvidence-11-03.pdf

Substance Abuse and Mental Health Services Administration [SAMHSA]. (2008). Trauma-focused cognitive behavioral therapy. Retrieved from the National Registry of Evidence-based Programs and Practices website: http://nrepp.samhsa.gov/ViewIntervention.aspx?id=135

Substance Abuse and Mental Health Services Administration [SAMHSA]. (2010). Nurturing parenting programs. National Registry of Evidence-based Programs and Practices website:
http://nrepp.samhsa.gov/ViewIntervention.aspx?id=171

Substance Abuse and Mental Health Services Administration [SAMHSA]. (2012). Trauma-informed care and trauma services website: http://www.samhsa.gov/nctic/trauma.asp
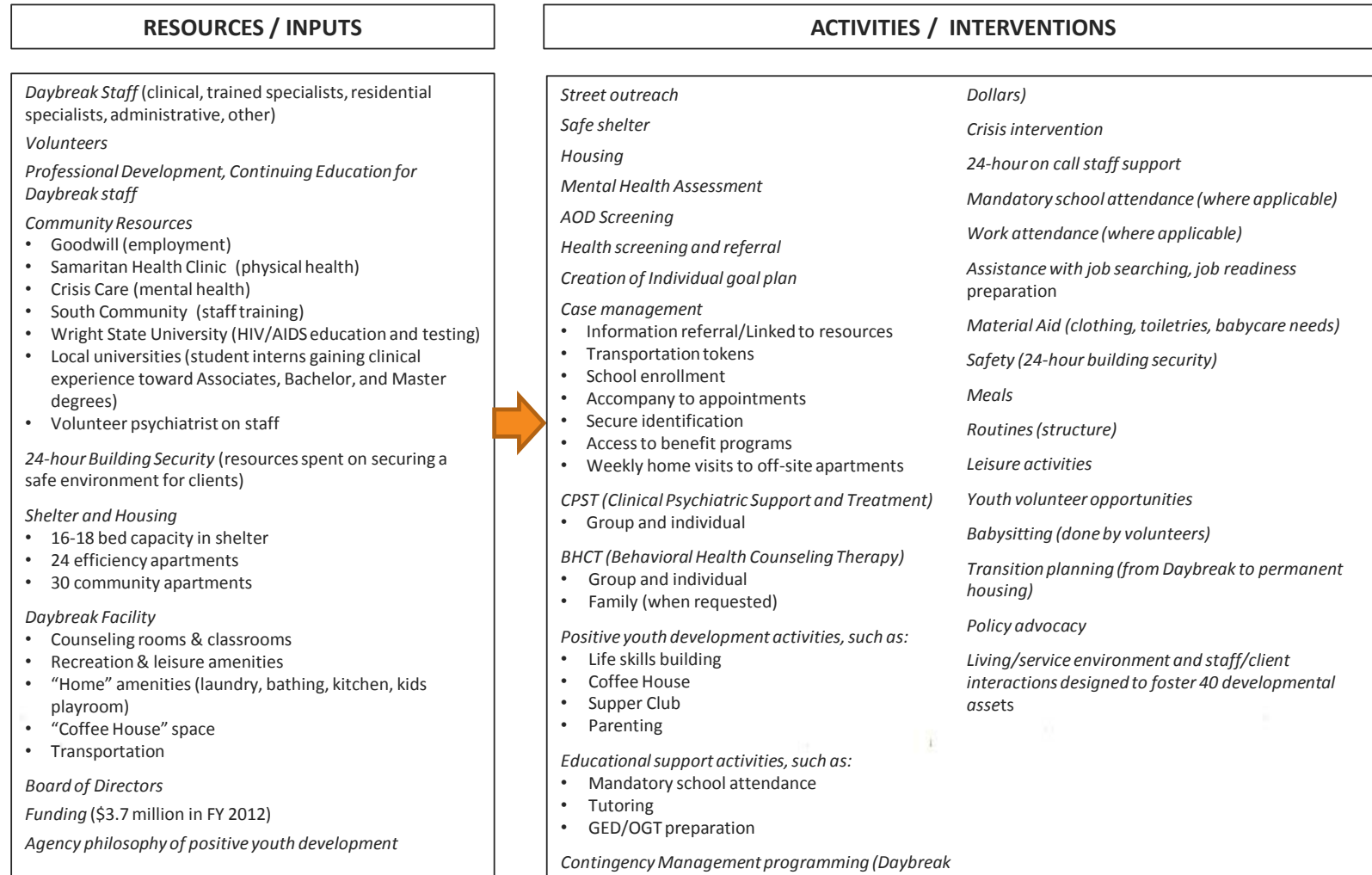
Toro, P., Dworsky, A., & Fowler, P. (2007) Homeless youth in the United States: Recent research findings and intervention approaches. *Toward understanding homelessness: The 2007 National Symposium on Homelessness Research.* Retrieved from http://aspe.hhs.gov/hsp/homelessness/symposium07/toro

Toro, P., Lesperance, T., & Braciszewski, J. (2011). *The heterogeneity of homeless youth in America: Examining typologies*. Washington, DC: National Alliance to End Homelessness.

U.S. Department of Health and Human Services [HHS]. (1997). *National evaluation of runaway and homeless youth*. Washington, DC: Author.

U.S. Department of Health and Human Services [HHS]. (2007). *Promising strategies to end youth homelessness.* Retrieved from http://www.acf.hhs.gov/programs/fysb/content/docs/reporttocongress_youthhomelessness.pdf

U.S. Department of Health and Human Services [HHS]. (2008). The Runaway and Homeless Youth Act (Title III of the Juvenile Justice and Delinquency Prevention Act of 1974) as Last Amended by the Reconnecting Homeless Youth Act of 2008 (P.L. 110-378). Retrieved from http://www.acf.hhs.gov/programs/fysb/content/aboutfysb/rhycomp08.htm

U.S. Department of Health and Human Services [HHS]. (2010). Understanding the health care needs of homeless youth (Program Assistance Letter 2001-10). Retrieved from http://bphc.hrsa.gov/policiesregulations/policies/pal200110.html

U.S. Department of Housing and Urban Development [HUD]. (2012). Homelessness Resource Exchange: Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act. Retrieved from http://www.hudhre.info/hearth/index.cfm

U.S. Department of Housing and Urban Development [HUD]. (2009). *The 2009 annual homeless assessment report to Congress*. Retrieved from http://www.hudhre.info/documents/5thHomelessAssessmentReport.pdf

U.S. Interagency Council on Homelessness [USICH]. (2010). *Opening doors: Federal strategic plan to prevent and end homelessness*. Retrieved from http://www.usich.gov/PDF/OpeningDoors_2010_FSPPreventEndHomeless.pdf

van Leeuwen, J. (2002). *Drug and alcohol survey results: Homeless and runaway youth*. Denver, CO: Urban Peak/ARTS Collaborative.

Wertheimer, R. (2002). *Youth who "age out" of foster care: Troubled lives, troubling prospects* (Child Trends Research Brief). Washington, DC: Child Trends.

Whitbeck, L., Hoyt, D., & Ackley, K. (1997). Abusive family backgrounds and victimization among runaway and homeless adolescents. *Journal of Research on Adolescence, 7,* 375-392.

Appendix A

Daybreak Logic Model
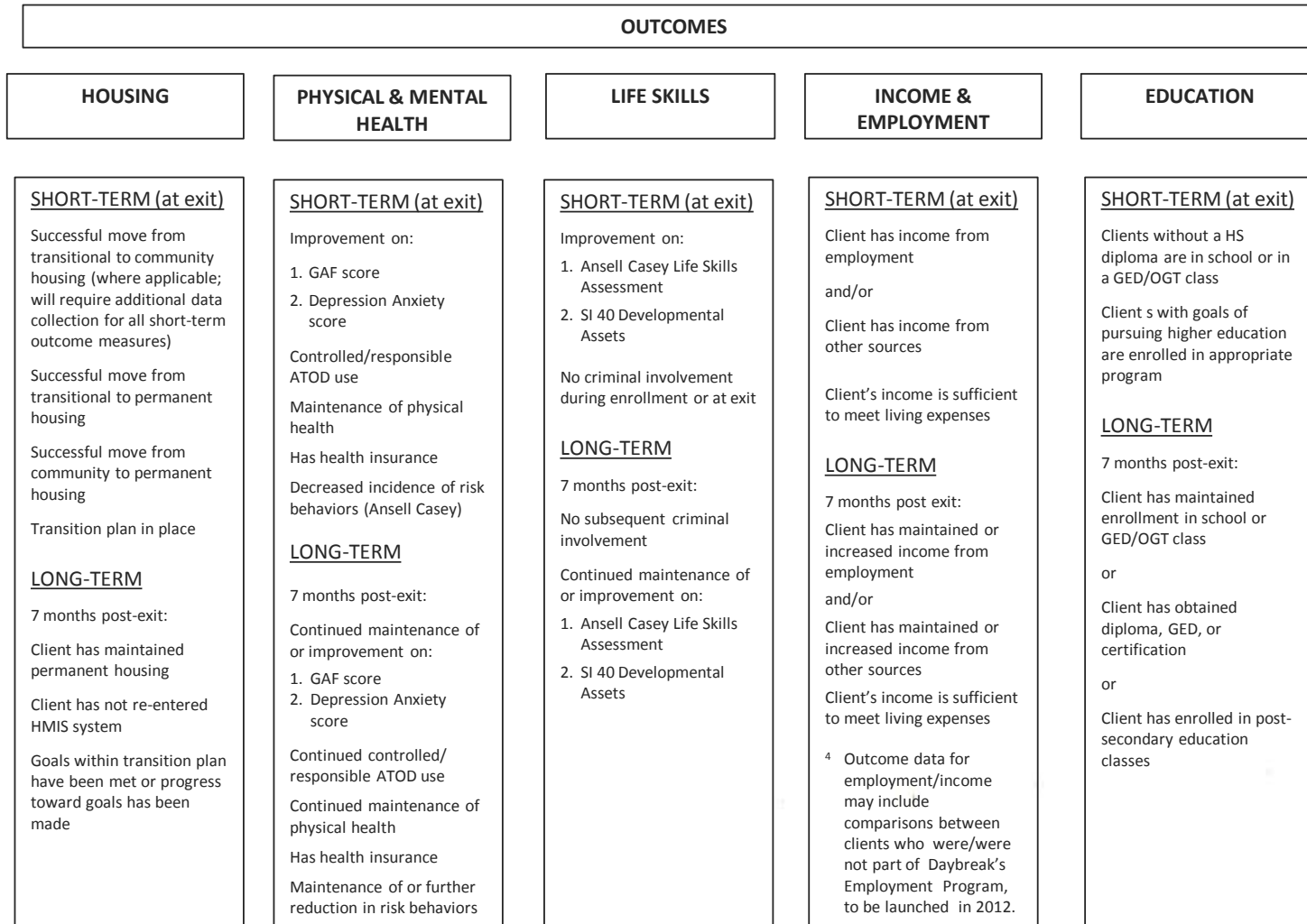
Daybreak Evaluation Logic Model

RESOURCES / INPUTS

Daybreak Staff (clinical, trained specialists, residential specialists, administrative, other)

Volunteers

Professional Development, Continuing Education for Daybreak staff

Community Resources
- Goodwill (employment)
- Samaritan Health Clinic (physical health)
- Crisis Care (mental health)
- South Community (staff training)
- Wright State University (HIV/AIDS education and testing)
- Local universities (student interns gaining clinical experience toward Associates, Bachelor, and Master degrees)
- Volunteer psychiatrist on staff

24-hour Building Security (resources spent on securing a safe environment for clients)

Shelter and Housing
- 16-18 bed capacity in shelter
- 24 efficiency apartments
- 30 community apartments

Daybreak Facility
- Counseling rooms & classrooms
- Recreation & leisure amenities
- "Home" amenities (laundry, bathing, kitchen, kids playroom)
- "Coffee House" space
- Transportation

Board of Directors

Funding ($3.7 million in FY 2012)

Agency philosophy of positive youth development

ACTIVITIES / INTERVENTIONS

Street outreach

Safe shelter

Housing

Mental Health Assessment

AOD Screening

Health screening and referral

Creation of Individual goal plan

Case management
- Information referral/Linked to resources
- Transportation tokens
- School enrollment
- Accompany to appointments
- Secure identification
- Access to benefit programs
- Weekly home visits to off-site apartments

CPST (Clinical Psychiatric Support and Treatment)
- Group and individual

BHCT (Behavioral Health Counseling Therapy)
- Group and individual
- Family (when requested)

Positive youth development activities, such as:
- Life skills building
- Coffee House
- Supper Club
- Parenting

Educational support activities, such as:
- Mandatory school attendance
- Tutoring
- GED/OGT preparation

Contingency Management programming (Daybreak

Dollars)

Crisis intervention

24-hour on call staff support

Mandatory school attendance (where applicable)

Work attendance (where applicable)

Assistance with job searching, job readiness preparation

Material Aid (clothing, toiletries, babycare needs)

Safety (24-hour building security)

Meals

Routines (structure)

Leisure activities

Youth volunteer opportunities

Babysitting (done by volunteers)

Transition planning (from Daybreak to permanent housing)

Policy advocacy

*Living/service environment and staff/client interactions designed to foster 40 developmental asse*ts

Daybreak Evaluation Logic Model

OUTPUTS / MEASUREMENTS

HOUSING	PHYSICAL & MENTAL HEALTH	LIFE SKILLS	INCOME & EMPLOYMENT	EDUCATION
OUTPUTS Nights in shelter Nights in transitional housing Nights in community housing **MEASUREMENTS/TRACKING** Every 6 months and at program transfer: Daybreak Dollars earned Daybreak $ fined Rent payments made Transition plan created (for move from Daybreak to permanent housing) Clients terminated from program for noncompliance	**OUTPUTS** Hrs of individual therapy/ counseling Hrs of group therapy/ counseling Hrs of accessing health care services (self-reports) **MEASUREMENTS/TRACKING** Every 6 months and at program transfer: MH diagnosis Global Assessment of Functioning (GAF) score Depression Anxiety score ATOD use (self-report) Health status assessment (self-report) Health insurance status Risk behaviors extracted from Ansell Casey 'Self-Care' questions Daybreak $ earned for participation in MH-related activities	**OUTPUTS** Hrs of individual CPST/Life Skills counseling Hrs of group CPST/Life Skills counseling **MEASUREMENTS/TRACKING** Every 6 months and at program transfer: Ansell Casey Life Skills Assessment SI 40 Developmental Assets Daybreak $ earned for life skills-related activities Criminal involvement/ interaction with the adult criminal justice system (public records search)	**OUTPUTS** Hrs in work readiness and/ or search activities Hrs in actual employment Hrs spent accessing mainstream benefits (self-reports) **MEASUREMENTS/TRACKING** Every 6 months and at program transfer: Employment status Annual income from all sources Daybreak $ earned for employment-related activities Daybreak $ cashed out at program exit	**OUTPUTS** Hrs of actual class attendance/participation Hrs spent on education activities (orientations, completing forms, tutoring, homework, etc) **MEASUREMENTS/TRACKING** Every 6 months and at program transfer: Last grade achieved Presence of an Individualized Education Program (IEP) Daybreak $ earned for education-related activities

Daybreak Evaluation Logic Model

OUTCOMES

HOUSING	PHYSICAL & MENTAL HEALTH	LIFE SKILLS	INCOME & EMPLOYMENT	EDUCATION

HOUSING

SHORT-TERM (at exit)

Successful move from transitional to community housing (where applicable; will require additional data collection for all short-term outcome measures)

Successful move from transitional to permanent housing

Successful move from community to permanent housing

Transition plan in place

LONG-TERM

7 months post-exit:

Client has maintained permanent housing

Client has not re-entered HMIS system

Goals within transition plan have been met or progress toward goals has been made

PHYSICAL & MENTAL HEALTH

SHORT-TERM (at exit)

Improvement on:

1. GAF score
2. Depression Anxiety score

Controlled/responsible ATOD use

Maintenance of physical health

Has health insurance

Decreased incidence of risk behaviors (Ansell Casey)

LONG-TERM

7 months post-exit:

Continued maintenance of or improvement on:

1. GAF score
2. Depression Anxiety score

Continued controlled/ responsible ATOD use

Continued maintenance of physical health

Has health insurance

Maintenance of or further reduction in risk behaviors

LIFE SKILLS

SHORT-TERM (at exit)

Improvement on:

1. Ansell Casey Life Skills Assessment
2. SI 40 Developmental Assets

No criminal involvement during enrollment or at exit

LONG-TERM

7 months post-exit:

No subsequent criminal involvement

Continued maintenance of or improvement on:

1. Ansell Casey Life Skills Assessment
2. SI 40 Developmental Assets

INCOME & EMPLOYMENT

SHORT-TERM (at exit)

Client has income from employment

and/or

Client has income from other sources

Client's income is sufficient to meet living expenses

LONG-TERM

7 months post exit:

Client has maintained or increased income from employment

and/or

Client has maintained or increased income from other sources

Client's income is sufficient to meet living expenses

[4] Outcome data for employment/income may include comparisons between clients who were/were not part of Daybreak's Employment Program, to be launched in 2012.

EDUCATION

SHORT-TERM (at exit)

Clients without a HS diploma are in school or in a GED/OGT class

Client s with goals of pursuing higher education are enrolled in appropriate program

LONG-TERM

7 months post-exit:

Client has maintained enrollment in school or GED/OGT class

or

Client has obtained diploma, GED, or certification

or

Client has enrolled in post-secondary education classes

Appendix B

Data Collection Instruments

Mental Health Assessment (8 pages)

ADULT DIAGNOSTIC ASSESSMENT

Client Name (First, MI, Last) Alisha Test	Client No. 011111

Presenting Problem	Date of Assessment 05/31/2011

Note symptoms; behavioral and functioning problems; precipitating factors; indicate referral source and reason for referral; services sought and client expectations.

Living Situation

My Home
☐ Rent ☐ Own

**Residential Care/Treatment Facility
☐ Hospital ☐ Temporary Housing ☐ Residential Care ☐ Nursing Home

**Other
☐ Friend's Home ☐ Relative's/Guardian's Home ☐ Foster Care Home ☐ Respite Care ☐ Jail/Prison
☐ Homeless Living with Friend ☐ Homeless in Shelter/No Residence ☐ Other:

**Identify Facility or Person's Name

Household Member Names	Relationship to Client	Age	Quality of Relationship

Significant Family Members/ Others Not Listed Above	Relationship to Client	Age	Quality of Relationship

Social Information (as appropriate, also include information from the Ohio Mental Health Consumer Outcome Reports)

Primary/Family/Marital/Significant Other Support Systems

Pertinent Family History (to include family MH and AoD history)

Strengths/Capabilities

Limitations of Activities of Daily Living

Friendship/Social/Peer Support Relationships

Meaningful Activities (community involvement, volunteer activities, leisure/recreation, other interests)

Religion/Spirituality

Cultural/Ethnic Issues/Information/Concerns

SQ-O4-040   **ADULT DIAGNOSTIC ASSESSMENT**   Page 1 of 8

Client Name (First, MI, Last)	Client No.
Alisha Test	011111

Community Supports/Self Help Groups (AA, NA, NAMIO, etc.)

Developmental Issues

Sexual History/Concerns

Education, Employment, and Military Information

Education History (check all that apply)	Highest Grade Completed	Vocational Year Completed
☐ GED ☐ HS Grad		
No. Of Years Degree/Major ☐ College	☐ Other Degree:	

History of Learning Difficulties (including performance/behavioral problems due to AoD use)

☐ None Reported   ☐ Learning Disability /Type: _____

☐ Mental Retardation

☐ Special School Placement: _____

☐ Other: _____

Barriers to Learning

☐ None Reported   ☐ Inability to Read or Write   ☐ Other: _____

Special Communication Needs

☐ None Reported   ☐ TDD/TTY Device   ☐ Sign Language Interpreter   ☐ Assistive Listening Device(s)

☐ Language Interpreter Services Needed/
Other Spoken Language: _____

☐ Other: _____

Employment (check all that apply)

☐ Full Time (35 hrs. or more per week)   ☐ Part Time (< 35 hrs. per week)   ☐ Non-Competitive

☐ Unemployed/Date Last Worked: _____

Not in Labor Force

☐ Disabled   ☐ Retired   ☐ Homemaker   ☐ Student   ☐ Living in Institution

☐ Other: _____

If employed, name of employer.

Job Performance History

No. ofJobs in Last 5 Years	Comments

Attendance

☐ Above Average   ☐ Normal   ☐ Tardiness   ☐ Absenteeism

Performance

☐ Exemplary   ☐ Good   ☐ Average   ☐ Below Average

Employment Interests/Skills

Is client satisfied with job?	☑ No ☐ Yes	If not currently employed, client wants to work?	☑ No ☐ Yes
Is client experiencing financial problems?	☑ No ☐ Yes	Is client concerned that employment will affect benefits?	☐ No ☐ Yes

Comments on Past or Current Skills/Interests

Client Name (First, MI, Last)	Client No.
Alisha Test	011111

Military History

☑ No ☐ Yes   If yes, describe branch of service, any pertinent duties, and any trauma experienced during service as applicable.

Type of Discharge (if other than General/Honorable)	Date of Discharge

Mental Health Treatment History

Outpatient Mental Health   ☑ None Reported

Agency	Check if Current	Date Range of Service	Clinician Name
		to	

Psychiatric Hospitalizations   ☑ None Reported

Hospital	Date Range of Service	Reason (suicidal, depressed, etc.)
	to	

Previous or Current Diagnoses   (if known)

☐ Not Known by Client

Other Comments Regarding Mental Health Treatment History

☐ No Comments

Current Medication Information   (prescription/OTC/herbal)

☐ None reported

Medication	Rationale	Dosage/Route/Frequency	Compliance			
			Yes	No	Partial	Unk
Albuterol Inhaler		1 Aeresol / Inhalation / PRN-As Needed	☐	☐	☐	☐
Allegra			☐	☐	☐	☐

Primary Care Physician   (name, phone no., and address)

NONE

Other Prescribing Physician(s)

Past Psychotropic Medications

☑ None reported

Psychotropic Medications	Reason for Discontinuation

Client Name (First, MI, Last) Alisha Test	Client No. 011111

Alcohol/Drug History

Illegal drug use/abuse past 12 months?	☑ No ☐ Yes	Non-prescription drug abuse past 12 months?	☑ No ☐ Yes
Prescription drug abuse past 12 months?	☑ No ☐ Yes	Alcohol abuse past 12 months?	☑ No ☐ Yes

Toxicology screen completed?

☐ Not Indicated   ☑ No   ☐ Yes   If yes, results:

Presenting with detox issues?

☑ No   ☐ Yes   If yes, symptoms:

Check All That Apply

☐ IV Drug User   ☐ Pregnant

Drug/Substance/Alcohol	Age of First Use	Date of Last Use	Frequency of Use	Amount	Method
Alcohol					

Alcohol/Drug Treatment History

AoD Treatment

☑ None Reported

Current: ☐ OP   ☐ IOP   ☐ Residential   ☐ Other

Past: ☐ OP   ☐ IOP   ☐ Residential   ☐ Hospital   ☐ Detox   ☐ Other

If current or past complete the following:

Name of Provider Agency	Type of Service	Service Date Range
		From: to

Other Comments Regarding Substance Abuse/Use (include AoD use/abuse by other family members/significant others, AoD related legal problem SAMI stage of treatment for providers using dual disorders integrated treatment approach)

Legal History

Legal Guardian/Custodian Name and Address of Legal Guardian/Custodian

☐ None Reported

Current Legal Status

☐ None Reported   ☐ On Probation   ☐ Detention   ☐ On Parole   ☐ Awaiting Charge
☐ AoD Related Legal Problems   ☐ Conditional Release   ☐ Outpatient Commitment   ☐ Court Ordered to Treatment
☐ Other:

History of Legal Charges

☐ None reported   ☐ Juvenile: ☑ No ☐ Yes If yes: ☐ Status Offense (e.g., Unruly) ☐ Delinquency
                   ☐ Adult: ☑ No ☐ Yes If yes: ☐ Misdemeanor   ☐ Felony

List and Date Most Recent Legal Charges

Convictions

☐ None reported

Client Name (First, MI, Last) Alisha Test	Client No. 011111

Incarcerations ☐ None reported	Name and Phone No. of Probation/Parole Officer (if applicable)

Civil Proceedings ☐ None reported	Domestic Relations Court Problems (i.e., custody, protective services, restraining order)

Juvenile Court Involvement (related to child abuse, neglect, or dependency)

Current: ☑ No   ☐ Yes   Comment: _____

Past: ☑ No   ☐ Yes   Comment: _____

Child Support Enforcement Orders
☐ None reported

Children's Protective Services Involvement with Family
☐ None reported

Name of Children's Protective Services Caseworkers(s) Assigned to Family (if applicable)
☐ None reported

<div align="center">

Abuse History   (describe in comments section each element checked)
</div>

☐ No Self Reported History of Abuse/Violence	☐ Physical Abuse	☐ Domestic Violence/Abuse	☐ Community Violence
☐ Physical Neglect	☐ Emotional Abuse	☐ Elder Abuse	☐ Sexual Abuse/Molestation
☐ Other:			

Comments (identify if client was/is victim of abuse or a perpetrator or both)

<div align="center">

Problem Checklist Including Functional Domains
</div>

Check	Check All Current Problem Areas	As Evidenced By
☐	Nutritional/Eating Pattern Changes/ Disorders	
☐	Pain Management	
☐	Depressed Mood/Sad	
☐	Bereavement Issues	
☐	Anxiety	
☐	Traumatic Stress	
☐	Anger/Aggression	
☐	Oppositional Behaviors	
☐	Inattention	
☐	Impulsivity	
☐	Disturbed Reality Contact (psychosis)	
☐	Mood Swings/Hyperactivity	

Client Name (First, MI, Last)	Client No.
Alisha Test	011111

☐	**Substance Use/Addiction**
☐	**Other Addictive Behaviors**
☐	**Sleep Problems**
☐	**Psychosoical Stressors**
☐	**Pertinent Health Issues/Medical History** (include any allergies and food/drug reactions)
☐	**Client's Family Needs Education to be Able to** (Describe areas of family education needs. Family education must be directed to the exclusive well being of the client.)
☐	**Client Needs Other Environmental Supports** (Describe areas where environmental supports are needed to support the client in community living and possible sources of that support.)
☐	**Other**

Skills Deficit/Skills Training/Community Support Needs (check all applicable skill deficits, skills training, and/or community support needs identified.)

☐ Client needs symptom and disability management skills.   ☐ Client needs restoration or development of social/personal skills.

☐ Client needs residential supports to develop skills necessary for community living.   ☐ Client needs employment related services to develop skills necessary for successful employment.

☐ Client needs education related services to develop skills necessary to enhance academic success.   ☐ Client needs restoration or development of social support skills and networks including recreational activities.

As Evidenced By (Describe the specific skill deficits or areas where improvement is needed.)

Ohio Mental Health Consumer Outcomes

Ohio Mental Health Consumer Outcomes Administered?

☐ Yes ☑ No   If yes, report results for those forms completed.

Quality of Life Score	Symptom Distress Score	Empowerment Score	Functioning Scale Score

Comment on Consumer Outcomes

Other Outcomes Utilized? If yes, summarize results.

☐ Yes ☑ No

Mental Status Examination OR   ☐ Refer to Mental Status Exam on:

Mental Status Examination (Complete Mental Status Exam form or provide a thorough written narrative below. If AoD client, include ODADAS MSE elements.)

Past attempts to Harm Self or Others   ☐ None Reported   ☐ Self   ☐ Others
Comment:

Current Risk of Harm to Self   ☐ None Noted   ☐ Low   ☐ Moderate   ☐ High
Comment:

Current Risk of Harm to Others   ☐ None Noted   ☐ Low   ☐ Moderate   ☐ High
Comment:

Client/Family/Guardian Expression of Service Preferences

Clinician and client (and/or primary support person) should have a meaningful recovery focused dialogue to engage and allow the client (and/or primary support person) to express their desired treatment preferences and priorities. Identify the indicated needs/preferences of client/family/guardian for the full range of behavioral health clinical and community-based rehabilitative services, and environmental support services available to them.

Client Name (First, MI, Last)	Client No.
Alisha Test	011111

1. Behavioral Health Clinical and Rehabilitative Service Preferences

2. Environmental Support Preferences

Clinical Summary

This Clinical Summary is Based Upon Information Provided By (check all that apply)

☐ Client   ☐ Parent(s)   ☐ Guardian(s)   ☐ Family/Friend   ☐ Physician   ☐ Records

☐ Law enforcement   ☐ Service Provider   ☐ School Personnel   ☐ Other:

Narrative Summary - Include etiology of presenting problem and maintenance of the problem; mental health history; AoD history; serverity of problem; where problem occurs (functioning at home, at work, in community); onset of problem (acute vs. Chronic); client motivation for treatment, whether problem is known to be responsive to treatment.

☐ Not Applicable   **Degree of Severity at Admission for the Following Dimensions** (AoD clients only)

Dimension	Intox/With	Biomedical	Em/Beh/Cog	Treatment Accept/Resist	Relapse Potential	Recovery Environs	Family Func Youth

Other Information

Diagnosis: ☐ DSM-IV Codes (or successor)   ☐ ICD-9 CM Codes (or successor)

Check Primary	Axis	Code	Narrative Description
☐	Axis I		
☑		303.00	Alcohol Intoxication
☐	Axis II		
	Axis III		None Reported
	Axis IV	SUPPORT GROUP: IS Very oppositional	
	Axis V	Current GAF: 0	Highest GAF in Past Year (if known): 0

Treatment Recommendations/Assessed Needs

1.
2.
3.
4.
5.
6.
7.

Client/Guardian/Family Participation in Assessment and Response to Recommendations

Further Evaluations Needed

☐ None Indicated   ☐ Psychiatric   ☐ Psychological   ☐ Neurological   ☐ Medical   ☐ Educational

☐ Vocational   ☐ Visual   ☐ Auditory   ☐ Nutritional   ☐ AoD Assessment   ☐ Other:

Level of Care/Indicated Services Recommendation

Signatures

Provider Signature/Credentials	Date
Provider Signature/Credentials Rendering Diagnosis, if different than Above (ODADAS only)	Date

Client Name (First, MI, Last)	Client No.
Alisha Test	011111

Supervisor Signature/Credentials (if applicable)	Date

Supervisor Signature/Credentials	Date

Date of Service	Staff ID No.	Loc. Code	Prcdr. Code	Mod 1	Mod 2	Mod 3	Mod 4	Start Time	Stop Time	Total Time	Diagnostic Code

Client Name (First, MI, Last)	Client No.
Alisha Test	011111

SQ-O4-040 **ADULT DIAGNOSTIC ASSESSMENT** Page 8 of 8

Mental Health Assessment Supplement (2 pages)

Mental Health Assessment Supplement

Client Name: _____   Client Number: _____

Date of Current
Homlessness: _____   Program Point of   -Street Outreach
                                          (circle):   -Shelter Only

MHA Date: _____

1. Foster Care HX:

| Total Placements (circle): | 1 | 2 | 3 to 5 | 5+ |

| Years in care (circle): | < 1 year | 1-2 years | 3+ years | | Open care, no foster care? | Y | N |

2. Kinship Care HX: Has client been in care of other family member(s) in the past | Y | N |

3. Adoption: Is client legally adopted? | Y | N |

4. Abuse HX:

Type	Severity 1-5 (Mild - Severe)	Frequency 1 -5 (Rarely - Weekly)	By family member?	Non-related
☐ Physical (no injury)	1 2 3 4 5	1 2 3 4 5	☐	☐
☐ Physical (injury)	1 2 3 4 5	1 2 3 4 5	☐	☐
☐ Physical Neglect	1 2 3 4 5	1 2 3 4 5	☐	☐
☐ Emotional Neglect	1 2 3 4 5	1 2 3 4 5	☐	☐
Sexual				
☐ Age: _____	1 2 3 4 5	1 2 3 4 5	☐	☐
☐ Age: _____	1 2 3 4 5	1 2 3 4 5	☐	☐
☐ Age: _____	1 2 3 4 5	1 2 3 4 5	☐	☐
☐ Age: _____	1 2 3 4 5	1 2 3 4 5	☐	☐
☐ Witness to Domestic Violence in home		1 2 3 4 5	☐	☐
☐ Witness to Community Violence		1 2 3 4 5		
Family/Friend killed:	Yes	No	Don't Know	
Parent(s)	Yes	No	Don't Know	

5. School HX:
- ☐ IEP?   ☐ HS Graduate
- ☐ Held Back?   ☐ GED?

Highest Grade Completed: _____

6. Mental Health HX:

- ☐ Prior Hospitalization

No. of Hospitalizations: _____

Number in past year: _____

Primary Diagnosis (DSM): _____

GAF at Admission: _____

Cognitive Impairment: | Y | N |

PTSD Assessment: | Y | N |

7. Exisiting Link to Services:
- ☐ Agency: _____   ☐ Agency: _____
- ☐ Agency: _____   ☐ Agency: _____

Mental Health Assessment Supplement

8. Biological/Family of Origin Alcohol/Drug HX:
☐ Father ☐ Mother ☐ Both

9. ClientAlcohol/Drug HX:
☐ Current Substance Abuse Issues ☐ Current Use ☐ Dependency
☐ Experimentation ☐ Abuse

10. Chronic/Serious Medical Issues: ☐ History of Issues?
☐ Curr Health Issues: _____ ☐ Under Physician's Care?

Taking Medication AS PRESCRIBED	Y	N	N/A
Managing Chronic Health Issues?	Y	N	N/A

11. Sexual Orientation: ☐ Hetero ☐ Gay ☐ Lesbian ☐ Bisexual ☐ Transgender
☐ Sexually Active?

12. Reproductive HX:

No. of Pregnancies: _____

No. of Children:	0	1	2

No. of Miscarriages: _____   No. of Terminations: _____

13. Siblings:

0	1	2	3	4	5	6	7	8+

14. Family Composition (Most Recent):
☐ Single Parent ☐ Two Parents ☐ Non-Family

15. Family Socio-Economic:

Most recent household parent/guardian work?	Y	N	Disabled	Unknown

16. Legal (charges) HX:

Level of offense(s) (if any):

None	Mis	Felony

Offense	Check all that applies	
	Juvenile	Adult
Unruly Conduct	☐	☐
Disorderly Conduct	☐	☐
Theft	☐	☐
Assault	☐	☐
Burgulary	☐	☐
DUI	☐	☐
Sexual	☐	☐
Domestic Violence	☐	☐
Other	☐	☐

Type	Probation	
	Current	In Past
Juvenile	☐	☐
Adult	☐	☐

If 'Other', what was it?

17. Trafficking:
☐ Involved with Trafficking?
☐ Trafficked in labor force?

Traded sex/campanionshionship/labor for:

Food	Shelter	Drugs	Other

Completed by: _____

Date: _____

Depression/Anxiety Checklist (1 page)

Client Name: _____ Date: _____ Initial/6mos/Transfer/Annual/Termination

Please check all that apply/have applied to you and when:

Feeling or thought	Right now	In the past	A lot	A little	Not at all
Feeling sad, down in the dumps?					
Feeling hopeless about the future?					
Feeling worthless, like a failure?					
Feeling guilty?					
Feeling inadequate?					
Self-blaming or critical?					
Difficulty in making decisions?					
Feeling angry and resentful?					
Lack of interest in friends, family, activities?					
Feeling overwhelmed?					
Critical about appearance?					
Loss or gain in appetite?					
Difficulty sleeping?					
Feeling exhausted, sleeping a lot?					
Loss of interest in sex?					
Worrying a great deal about health?					
Feeling that life is not worth living?					
Feeling nervous, worrisome or fearful?					
Feeling things are strange or unreal?					
Feeling detached from your body?					
Feeling suddenly panicked?					
Have a sense of impending doom?					
Feeling tense or on edge?					
Difficulty concentrating?					
Racing thoughts or hard to focus?					
Feeling like you are losing control?					
Fear of going crazy?					
Fear of fainting or passing out?					
Fear of illness or dying?					
Fear of looking foolish?					
Fear of being alone or isolated?					
Fear of criticism or disapproval?					
Fear that something terrible will happen?					
Pain or tightness in chest?					
Stomach pains or butterflies?					
Constipation or diarrhea?					
Restlessness or jumpiness?					
Heart skipping or racing?					
Trembling or shaking?					
Difficulty breathing or smothered feeling?					
Lump in your throat?					
Hot flashes or cold chills?					
Headaches, neck or back pain?					
Feeling dizzy or lightheaded?					
Weakness in legs or jelly legs?					

Comments:

June 15, 2011

Face sheet (2 pages)

<div align="center">

FACE SHEET
(to be completed with every situation)

</div>

Client Name_____ **Client #**_____

☐ **6 months**   ☐ **Annual**   ☐ **18 month**   ☐ **24 month**

☐ **Initial HSG Entry**   ☐ **HSG Transfer**   ☐ **Exit from HSG**

Check items to be completed at this interval if applicable: (this area is to assist you on knowing other items to complete at intervals)

☐ Ansell Casey (always)   ☐ 40 Assets (always)   ☐ Depression Anxiety (always)

☐ ISP Annual   ☐ ISP Review   ☐ Satisfaction Survey (annual & exit)

☐ Montgomery County Outcomes (initial at MH or Outreach pre housing, 6 months, annual, exit)

☐ RHYMIS (entry completed at outreach pre housing/if client from shelter entry needs completed-also complete at exit from hsg)
☐ Macsis (initial at MH or at Outreach pre housing & clinical termination)
☐ Termination Summary (clinical exit only)

<div align="center">

Current Issues

</div>

<u>Current</u> Primary Diagnosis code_____   **<u>Current</u> GAF**_____

Current Substance Abuse Issues   ☐ Yes   ☐ No

Level of Substance Use: ☐ Current use   ☐ Experimentation   ☐ Dependency   ☐ Abuse

Client report using safe sex practices   ☐ Yes   ☐ No

Client report multiple sex partners   ☐ Yes   ☐ No

Current health issues   ☐ Yes   ☐ No   **Under physician's care** ☐ Yes   ☐ No

Taking medication as prescribed   ☐ Yes   ☐ No   ☐ NA

Managing chronic health issues   ☐ Yes   ☐ No   ☐ NA

Client pregnant ☐   **Client parenting** ☐   **How many children** _____

At this time client is in need of these additional areas to be address:

☐ None   ☐ Relationships   ☐ Parenting   ☐ ATOD   ☐ Domestic Violence   ☐ Anger management

Since last Face Sheet interval has client been <u>NEWLY</u> involved with the Justice System?

☐ Yes   ☐ No   **Type of Case(s):**   ☐ Criminal   ☐ Civil

Last updated 11/1/11   over

Employment/School

Employment status: ☐ Full time ☐ Part time ☐ Unemployed

Date of hire: month_____ year _____

Monthly Income-Employment_____

Current School status: ☐ Attending ☐ Not enrolled **Active IEP if in school** ☐

Last Grade Achieved_____ **HS diploma** ☐ Yes ☐ No **GED** ☐ Yes ☐ No

Currently enrolled in GED/OGT class if no diploma ☐ Yes ☐ No

Goals of pursuing higher education ☐ Yes ☐ No

Enrolled in program to pursue higher education ☐ Yes ☐ No

Benefits

Receiving Mainstream Services ☐ Yes ☐ No

			Amount				**Amount**
Medicaid	☐ Yes	☐ No		OWF	☐ Yes	☐ No	_____
WIC	☐ Yes	☐ No		SSI	☐ Yes	☐ No	_____
Food Stamps	☐ Yes	☐ No	_____	WIA	☐ Yes	☐ No	_____
SSDI	☐ Yes	☐ No	_____	TANF	☐ Yes	☐ No	_____
Other	☐ Yes	☐ No	_____	SS	☐ Yes	☐ No	_____

Medicaid: _____Pending _____Active _____Not Eligible

Private Insurance: _____YES _____NO

STAFF SIGNATURE_____Date_____

Ansell-Casey Life Skills Assessment (client version – 15 pages)

Client name _____ DATE _____

Ansell-Casey Life Skills Assessment
Youth Level IV — Version 4.0

Instructions: These questions will ask you about what you know and can do. Please try to answer all the questions.

I am: ☐ Male   ☐ Female

My current age (years): _____

My grade in school:
- ○ 1ˢᵗ grade
- ○ 2ⁿᵈ grade
- ○ 3ʳᵈ grade
- ○ 4ᵗʰ grade
- ○ 5ᵗʰ grade
- ○ 6ᵗʰ grade
- ○ 7ᵗʰ grade
- ○ 8ᵗʰ grade
- ○ 9ᵗʰ grade
- ○ 10ᵗʰ grade
- ○ 11ᵗʰ grade
- ○ 12ᵗʰ grade
- ○ Trade school
- ○ In college
- ○ Not in school
- ○ Other

My race/ethnicity: (Please mark *all that apply* to you.)
- ○   American Indian or Alaskan Native
- ○   Asian Indian
- ○   Black, African-American
- ○   Chinese

- ○ Filipino
- ○ Guamanian or Chamorro
- ○ Hispanic/Latino/Spanish
- ○ Japanese
- ○ Korean
- ○ Native Hawaiian
- ○ Other Asian
- ○ Other Pacific Islander
- ○ Other Race _____
- ○ Samoan
- ○ Vietnamese
- ○ White

My *primary* race/ethnicity: (*Please mark only one*)

- ○ American Indian or Alaskan Native
- ○ Asian Indian
- ○ Black, African-American
- ○ Chinese
- ○ Filipino
- ○ Guamanian or Chamorro
- ○ Hispanic/Latino/Spanish
- ○ Japanese
- ○ Korean
- ○ Native Hawaiian
- ○ Other Asian
- ○ Other Pacific Islander
- ○ Other Race _____
- ○ Samoan
- ○ Vietnamese
- ○ White

If you are American Indian, Native American, or Alaska Native, please write your Tribal or Community Affiliation on the line below.

_____

Postal (zip) code of your home address (for research purposes): _____

Mark the answer that best describes your current living situation:
- ○   On my own (alone or shared housing)
- ○   With my birth (biological) parents
- ○   With my birth (biological) mother or father
- ○   With my adoptive parent(s)
- ○   With my foster parent(s) who is/are unrelated to me
- ○   With relatives (not foster care)
- ○   With relatives who are also my foster parents
- ○   In a group home or residential facility
- ○   In a juvenile detention or corrections facility
- ○   With a friend's family (not foster care)
- ○   At a shelter or emergency housing
- ○   With my spouse, or partner, or boyfriend or girlfriend
- ○   Other

How many years have you been in your current living situation? (If less than one year, enter "1")

_____ year(s)

I have a Social Security card:	☐ Yes	☐ No
I have a copy of my birth certificate:	☐ Yes	☐ No
I have a photo ID:	☐ Yes	☐ No

When completing this assessment, I am at the following location:
- ○   Employment or vocational agency
- ○   Youth/family community service agency
- ○   School library, classroom, or computer room
- ○   Public library
- ○   Foster care agency
- ○   Recreation facility (like YMCA, Boys/Girls Club)

- ○ Where I live
- ○ University
- ○ Church, synagogue, temple, mosque, or religious facility
- ○ Juvenile detention or corrections facility

Knowledge and Behavior Items   Please circle the number (1, 2 or 3) that describes you best:

	Not like me	Somewhat like me	Very much like me
Career Planning			
1. I have used school resources to investigate different types of employment	1	2	3
2. I discuss education plans with teachers, employers, or counselors	1	2	3
3. I know of resources in the community that provide tutoring	1	2	3
4. I have explored work-related internships	1	2	3
5. I read to improve my work skills	1	2	3
6. I know the education required for the work I am interested in doing	1	2	3
7. I sometimes read materials to further my knowledge in a specific area	1	2	3
8. I have a career plan	1	2	3
9. I can find financial aid resources to further my education	1	2	3
10. I can name two reasons why personal contacts can be important in finding a job	1	2	3
11. I know where to find information about job-training	1	2	3
12. I can explain the difference between assertive and aggressive behavior	1	2	3
13. I can demonstrate two positive ways for dealing with discrimination	1	2	3

Daily Living

	Not like me	Somewhat like me	Very much like me
1. I plan nutritious meals	1	2	3
2. I evaluate my diet for nutritional balance	1	2	3
3. I eat a variety of healthy foods each day	1	2	3
4. I think about how what I eat impacts my health	1	2	3
5. I look at calories and fat content on product labels	1	2	3
6. I eat some vegetables each day	1	2	3
7. I use a shopping list at the grocery store	1	2	3
8. I compare prices to get the best value	1	2	3
9. I clean kitchen equipment after meal preparation	1	2	3
10. I can make meals using a recipe	1	2	3
11. I follow the directions on cleaning products	1	2	3
12. I check clothing-care directions when doing laundry	1	2	3
13. I use good table manners	1	2	3
14. I can access the internet	1	2	3
15. I can set up a free email account	1	2	3

Housing and Money Management

	Not like me	Somewhat like me	Very much like me
1. I can calculate the costs of car ownership (e.g., registration, maintenance)	1	2	3
2. I can describe how to monitor a checking account balance	1	2	3
3. I can describe how to develop a good credit rating	1	2	3
4. I can name three disadvantages of purchasing with credit	1	2	3
5. I know the typical fee charged for ATM transactions	1	2	3
6. I understand what is covered by liability car	1	2	3

	Not like me	Somewhat like me	Very much like me
insurance			
7. I know where to find tax information on a pay stub	1	2	3
8. I know how to find out about my credit rating	1	2	3
9. I can calculate housing start-up costs (e.g., application fee, security deposit)	1	2	3
10. I know where in my community one can get help for completing tax returns	1	2	3
11. I know the advantages and disadvantages of buying from a "rent-to-own" store	1	2	3
12. I know what information is asked for in an apartment rental application	1	2	3
13. I balance my bank statement regularly	1	2	3
14. I can use an Automatic Teller Machine (ATM)	1	2	3
15. I understand the consequences of breaking a lease	1	2	3
16. I can explain the benefits of having homeowner or renter's insurance.	1	2	3
17. I have completed an income tax form	1	2	3
18. I plan for the expenses that I must pay each month	1	2	3
19. I can name two ways to invest money	1	2	3
20. I can identify two ways to put money into savings	1	2	3
21. I keep a record when I pay bills	1	2	3
22. I can complete a money order	1	2	3
23. I can get to an appointment by myself, even if I have not been to that location before	1	2	3
24. I can describe two or more ways to search for housing	1	2	3
25. I know the necessary steps for getting a driver's license	1	2	3
26. I can compare housing choices based on cleanliness and costs	1	2	3

	Not like me	Somewhat like me	Very much like me
27. I have developed a budget	1	2	3
28. I compute discounts, for example, how much a $12.90 item would cost after a 15% discount	1	2	3
29. I know the consequence of driving without insurance in my state	1	2	3

Self Care

	Not like me	Somewhat like me	Very much like me
1. I can identify two signs of pregnancy	1	2	3
2. I can identify two community resources that provide prenatal care	1	2	3
3. I can identify two ways to avoid peer pressure to use drugs	1	2	3
4. I can identify three methods of birth control	1	2	3
5. I can explain ways to protect myself from sexually transmitted diseases (STDs)	1	2	3
6. I know how to talk to a partner about sexually transmitted diseases (STDs)	1	2	3
7. I can describe two strategies for responsible drinking	1	2	3
8. I can explain what to do when a fever doesn't improve	1	2	3
9. I can resist pressure to have sex	1	2	3
10. I can explain how hygiene affects one's health	1	2	3
11. I can explain when it is best to make a doctor's appointment instead of visiting the emergency room	1	2	3
12. I know how to make a dental appointment	1	2	3
13. If illegal drugs are offered to me I can refuse them	1	2	3
14. I treat simple injuries like cuts, bites, stings and splinters	1	2	3
15. I know where I could go to get help with depression or other emotional problems	1	2	3

	Not like me	Somewhat like me	Very much like me

Social Relationships

	Not like me	Somewhat like me	Very much like me
1. I share my thoughts and feelings with my friends	1	2	3
2. I turn to others for support when I have family problems	1	2	3
3. I am part of a group, besides my family, that cares about me	1	2	3
4. I show others that I care about them	1	2	3
5. I encourage others to talk about their feelings	1	2	3
6. I am comfortable with the number of friends I have	1	2	3
7. I can identify two or more people I can turn to for help	1	2	3
8. I usually receive feedback without getting angry	1	2	3
9. I can safely interact with others on the internet	1	2	3

Work Life

	Not like me	Somewhat like me	Very much like me
1. I demonstrate the behaviors required of a good employee (e.g., being on time)	1	2	3
2. I understand what is appropriate behavior in a job interview	1	2	3
3. I accept supervision and direction	1	2	3
4. I can ask a supervisor for help if I need it	1	2	3
5. I have completed a job application	1	2	3
6. I get along with co-workers	1	2	3
7. I manage my time to complete tasks	1	2	3
8. I thank people when they do things for me	1	2	3

Extra Items

	Not like me	Somewhat like me	Very much like me
1. I know where a fire extinguisher is located where I live	1	2	3
2. I know the rights and responsibilities of a tenant	1	2	3

	Not like me	Somewhat like me	Very much like me
3. I know how to get emergency assistance to pay utilities	1	2	3
4. I know whom to contact to get low income housing	1	2	3
5. I know where in my area I can go to access the Internet	1	2	3
6. I can explain the benefits of doing volunteer work	1	2	3
7. I can use resources other than the newspaper to find job openings	1	2	3
8. I have written my resume	1	2	3
9. I know where the nearest state employment office is located	1	2	3
10. I know how to use a computer	1	2	3
11. I understand what is included in employee benefits	1	2	3

Performance Items: Please mark the best answer for each of the following questions:

Career Planning

1. Which of the following is an award of money that a qualified undergraduate student does not need to repay?

    A. An e-studentloan.com award
    B. A Federal Pell Grant
    C. A Sallie Mae grant
    D. A Nellie Mae grant

2. What is the most important reason why personal contacts are important in finding a job?

    A. Personal contacts can hire you themselves
    B. Personal contacts may know of good job openings that might fit you
    C. Personal contacts may know the job market better than you
    D. All of the above

3. Which of the following should not appear on a resume?

    A. Your name and address

B. Your e-mail address and phone number
C. Your age and race
D. Your work and education experience

Daily Living

4. If you buy milk that has a label stating that "best used by September 15th," this means?

   A. You need to use the product by September 1st
   B. You need to use the product by September 15th
   C. You need to buy the product by September 15th
   D. You need to use the product by October 1st

5. A recipe requires you to add "4 tsp. of flour." How much flour should you add?

   A. 4 cups
   B. 4 eyedropper drops
   C. 4 tablespoons
   D. 4 teaspoons

6. To get the best prices at the grocery store, you should?

   A. Shop when you are hungry
   B. Take a grocery list and compare prices on the items you want to buy
   C. Buy only the products that are on sale, no matter what they are
   D. Buy only enough for what you plan to eat that day

Housing & Money Management

7. All taxable income, less IRS allowable adjustments to income, is called?

   A. Net income (NI)
   B. Adjusted Gross Income (AGI)
   C. FICA
   D. Annual Percentage Yield (APY)

8. A large extra payment that may be charged at the end of a loan or lease is called?

   A. A surprise payment
   B. A Balloon Payment
   C. An amortization
   D. An Adjustable Rate Mortgage (ARM)

9. The period of time between the date a loan payment is due and when it is late is called?

A. A grace period
B. Float time
C. Index
D. Liability on an account

Self Care

10. Which of the following blood-alcohol levels is defined as legally drunk in all of the United States?

A. .08 or more
B. .06
C. .04
D. .02

11. If you have a severe sharp pain on the right side of your abdomen, you should...?

A. Ignore it; it is probably indigestion
B. Pay close attention to it; it may be appendicitis
C. Lay down until it goes away
D. Eat something because this means you are hungry

12. If a woman missed her period, starts to have an enlarged abdomen, and experiences some nausea and vomiting, what is very likely true about her?

A. She may have the flu
B. She may have a venereal disease
C. She may be pregnant
D. She may need to see a psychotherapist

Social Relationships

13. The most important ingredient to a successful personal relationship is?

A. Sex
B. Financial wealth
C. Trust
D. Humor

14. What is the ideal number of close friends to have?

A. 1
B. 2
C. 3
D. None of the above; the ideal number varies from person to person

15. If someone you know worships differently than you, you should?

    A. Avoid them
    B. Think you are better than they are
    C. Respect them as much as anyone else
    D. Try to make them your best friend

Work Life

16. This helps you to remember to carry out all necessary job tasks, tackle the most important ones first, and not get stressed out by unimportant tasks:

    A. A to-do List
    B. A desk calendar
    C. A calculator
    D. A diary

17. A job application will probably ask for the following:

    A. Your name
    B. Your social security number
    C. Your proof of eligibility to work in the country
    D. All of the above

18. If a job ad says "must be a self-starter," this means that you will probably?

    A. Have a great deal of direction from your supervisor
    B. Have very little direction from your supervisor
    C. Be doing direct sales
    D. Be doing a great deal of planning and forecasting in your job

Extra Items

19. When you're hired to a new job, you usually?

    A. Will have probationary status
    B. Will get retirement benefits
    C. Will get a raise within the first two weeks
    D. Will get a vacation within the first 3 months

20. The best way to clean a wool sweater is to?

    A. Machine wash it in hot water, with mild detergent
    B. Machine wash it in cold water, with regular detergent

C. Take it to a dry cleaner or hang it to air out
D. Hand wash it in hot water, with regular detergent

21. If you eat a steady diet of fast food, you will probably?

    A. Forget how to cook
    B. Have more time to do things you'd rather do
    C. Have more friends
    D. Gain weight

Assessment Evaluation

Not counting today, how many times have you taken an ACLSA assessment?

_____ times

I filled out this assessment (please mark all that apply):

☐ with an adult   ☐ by myself   ☐ with a friend

How did you like this assessment?

☐ I liked it   ☐ It was OK   ☐ I didn't like it

Additional Questions

This section is for use with questions provided by your school, agency or caregiver.

If no questions have been given to you, you may stop here. Thank you.

	A	B	C	D	E
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Search Institute's 40 Developmental Assets (2 pages)

Client Name:_____ **Date:**_____

Initial/6 months/Transfer/Annual/Term

Please read each sentence and put a check in the white box next to each sentence that sounds like what you are thinking or feeling right now.   **Clinician only in gray**

Client's response

		1. I receive high levels of love and support from family members.
		2. I can go to my parent(s)/guardian(s) for advice and support and have frequent, in-depth conversations with them.
		3. I know some non-parent adults I can go to for advice/support.
		4. My neighbors encourage and support me.
		5. My school provides a caring, encouraging environment.
		6. My parent(s)/guardian(s) help me succeed in school.
		7. I feel valued by the adults in my community.
		8. I am given useful roles in my community.
		9. I serve in the community one hour or more per week.
		10. I feel safe at home, at school, and in the neighborhood.
		11. My family sets standards for appropriate conduct and *mo*nitors my whereabouts.
		12. My school has clear rules and consequences for behavior.
		13. Neighbors take responsibility for monitoring my behavior.
		14. Parent(s) and other adults model positive, responsible behavior.
		15. My best friends model responsible behavior.
		16. My parent(s)/guardians and teachers encourage me to do well.
		17. I spend three hours or more per week in lessons or practice in music, theater or other arts.
		18. I spend three hours or more per week in school or community sports, clubs or organizations.
		19. I spend one hour or more per week in religious services or participating in spiritual activities.
		20. I go out with friends with nothing special to do two or fewer nights per week.

Please read each sentence and put a check in the white box next to each sentence that sounds like what you are thinking or feeling right now.   **Clinician only in gray**

Client's response

		21. I want to do well in school.
		22. I am actively engaged in learning.
		23. I do an hour or more of homework each school day.
		24. I care about my school.
		25. I read for pleasure three or more hours per week.
		26. I believe it is really important to help other people.
		27. I want to promote equality and reduce world poverty and hunger.
		28. I can stand up for what I believe in.
		29. I tell the truth even when it is not easy.
		30. I accept and take personal responsibility.
		31. I believe it is important not to be sexually active or to use alcohol or other drugs.
		32. I am good at planning and making other decisions.
		33. I am good at making and keeping friends.
		34. I know and am comfortable with people of different cultural/racial/ethnic backgrounds.
		35. I can resist negative peer pressure and dangerous situations.
		36. I try to resolve conflict non-violently.
		37. I believe I have control over many things that happen to me.
		38. I feel good about myself.
		39. I believe that my life has a purpose.
		40. I am optimistic about my future.
Clinician Signature:		

Comments: