



Friends of the Children – Portland

Annual Evaluation

July 2008 – June 2009

Executive Summary



Submitted to:

Terri Sorensen, Executive Director

Friends of the Children – Portland

44 NE Morris Street

Portland, OR 97212

Submitted by:

Carrie J. Furrer, Ph.D.

Katherine Kissick, B.A.



4380 SW Macadam Ave., Ste. 530
Portland, OR 97239
(503)243-2436
www.npcresearch.com

November 2009

EXECUTIVE SUMMARY

Program Overview

The *Friends of the Children* program works with those children and youth who are very likely to have been abused or neglected at home, and who are most in danger of school failure, juvenile delinquency, gang and drug involvement and teenage pregnancy. *Friends of the Children* provides full-time, paid adult mentors, called *Friends*, to ensure that each child has at least one positive, consistent, and supportive adult in his or her life.

Friends of the Children – Portland program (*FOTC* – Portland) is an intensive relationship-based mentoring program that serves kindergarten through 12th grade high risk youth in Portland, OR. The program proactively selects kindergarten children based on a targeted assessment process, and serves these children through high school. Following best practice models, *FOTC* – Portland employs screened, full-time paid mentors who receive ongoing support and training from the program. Mentors work with children to teach life skills, model healthy behavior and problem-solving skills, instill positive attitudes, nurture interests and talents, and expose them to a variety of new places and experiences. Activities such as doing chores, playing and reading together, or going on special outings provide a context for the mentoring relationship to develop, and to work on other issues facing the child.



Program Outcomes

FOTC's three long-term program outcomes are to help youth to:

- **Graduate from high school**
83%, or 10 of the 12 *FOTC* program graduates received a high school diploma, GED, or were on track to graduate in the next 6 months
- **Avoid teen parenting**
99%, or 168 out of 170 youth ages 10 and older avoided teen parenting
- **Avoid involvement with the juvenile justice system**
97% avoided being convicted of a crime (according to *Friends*) in the past year

Description of Population Served

FOTC – Portland served 302 youth during the 2008-09 program year, divided evenly by gender (51% boys and 49% girls). Youth ranged from 7 to 19 years old (average = 11.5 years old), grades 1 through 12 (and not attending school). Youth were predominantly African American (51%), and the remaining youth were Caucasian (30%), Multiracial (9%), Hispanic (8%), Native American (1%), and Other (1%).



The table below shows the proportion of *FOTC* youth facing various types of risks, including parental incarceration and substance abuse, domestic violence, food insecurity, and child abuse and neglect.

Risk	% <i>FOTC</i> Youth
Qualify for free or reduced lunch *	93%
Known to have been affected by domestic violence in their lifetimes	65%
Known to have been raised by a single parent	84%
Have at least one parent with known history of substance use	69%
At least one parent is known to have been incarcerated	59%
Have a parent that was under 18 when first child was born	58%
At least one parent does not have a high school education	54%
Have lived in a home where there has not been enough food to eat	38%
Have had a report of abuse or neglect filed on their behalf	39%
Has lived in foster care or with relatives	30%
Less than yearly contact with biological father	45%
Of those youth with biological fathers involved in their lives:	
➤ Fathers have known history of criminal activity	65%
➤ Fathers have known history of incarceration	66%

Notes. Estimates are based on *Friend* reports. Youth were coded as having a above risk factor if there was an indication of the risk factor in the last 3 years of program data.

* Information provided by the *FOTC* – Portland program, and is based on 213 students attending Portland Public Schools in 2008-09.

Program Services

Friends spend **at least 4 hours per week** in one-on-one or structured group activities with each child.

In the context of the youth-*Friend* relationship, *Friends*:

- Set positive goals and expectations
- Teach life skills
- Model healthy behaviors and problem-solving skills
- Instill positive attitudes
- Nurture interests and talents
- Expose youth to new experiences
- Engage in community service activities

Examples of youth-*Friend* activities:

- Arts & crafts
- Cooking
- Outdoor activities (e.g., hiking, beach outings)
- Attend events (e.g., concerts, theater)
- Doing chores
- Playing together
- Reading

Program Innovations

The *FOTC* – Portland program strives to continually improve its services to meet the changing needs of its youth population. The following program innovations have been implemented in the past several years.

RANDOMIZED CONTROL TRIAL

In August 2007, the National Institute of Child Health and Development (NICHD) awarded \$2.9 million to Oregon Social Learning Center (OSLC) and Public Private Ventures (P/PV) to conduct the first 5-year phase of a longitudinal, randomized controlled trial of the *Friends of the Children* program. *Friends of the Children* – Portland is one of four *FOTC* chapters to participate in the study in which 256 highly vulnerable children were enrolled and randomly assigned to a control group or to a match with a *Friend*. Selection of study children will occur over a 2-year period and began in spring of 2008. This longitudinal study is designed to determine the efficacy of the *Friends* model through the most rigorous means possible, as well as address critical gaps in mentoring research including the need to: 1) examine the characteristics and qualities of successful mentoring relationships and how they relate to youth outcomes, 2) follow the progress of mentored children for more than one year, and 3) study the impact of mentoring that exclusively targets youth identified as highest risk for long-term negative outcomes.

CAMP FRIENDS

Summer 2009 marked the sixth year of *Camp Friends*, a 2-week day camp for elementary school children, a collaboration with George Fox University. *Camp Friends* for middle school youth is in its fourth year and is now three separate camps: 1) a 2-week camp targets our lowest achieving adolescents and focuses on reading and writing skills development; 2) staff from Oregon Children's Theater deliver a two-week performance-based camp; and 3) an outdoor exploration week. In 2009, 117 youth were served.

RISK ASSESSMENT

Since 2007-08 program year, the *FOTC* – Portland program has employed a risk assessment to evaluate appropriate services, referrals and follow-up intervals for youth that are engaging in risky behavior. The assessment covers key individual and environmental factors for evaluating threat of harm to self or others. Progress with youth is monitored in a weekly Child Services meeting that takes place the day following a meeting in which *Friends* meet with supervisors to discuss success and challenges encountered while working with youth. The risk assessment process is managed by the Child Services Manager (a licensed social worker) and allows the program to take a more preventative approach to managing risk.

ADOLESCENT FRIENDS

Adolescent *Friends* are now in their second year, a position that requires a specialized skill set to meet the developmental needs of the adolescent age group. At 6th grade, the majority of program children enter a Ritualized Transition period when they are thoughtfully transitioned to an Adolescent *Friend* and begin to participate in formal group programming. This innovation grew from *Friends*' insight that it was necessary to engage and support program adolescents through relationships with adult role models and positive peer networks at a time when peer influence is great.



Key Findings: Service Delivery

TIME SPENT WITH YOUTH

Friends of the Children spent a total of 46,764 hours serving 300 youth (indirect and direct service hours from *Friends*) between July 1, 2008 and June 30, 2009 (excluding January 2009¹).

Over the past 5 years, *Friends* have consistently served youth an average of 15 to 16 hours per month. The percentage of time spent on making good choices has ranged from 13-19%, school success has ranged from 14-15%, and plans and skills for the future has ranged from 7-12%. None of these differences were statistically significant. Time spent on social and emotional development increased significantly between 2004-05 and 2006-07 and has remained at that level. Time spent on improved health care decreased significantly between 2004-05 and 2005-06, and has been steadily increasing.

¹ Service hours data for January 2009 were corrupted and lost.

Time Spent with Youth: Monthly Averages	Hours	% Total	Change over time?
Total Monthly Average	15.6	---	No
Social & Emotional Development	8.2	55%	Yes
Average Monthly Hours Spent: Making Good Choices	1.9	13%	No
School Success	2.3	15%	No
Improved Health Care	1.4	9%	Yes
Plans & Skills for the Future	1.2	8%	No

QUALITY OF SERVICES PROVIDED

The vast majority of youth had high quality relationships with their *Friends*, according to *Friends*, adolescents, and parents/guardians. *Friends* had good or excellent relationships with 3 out of 4 parents/guardians. Approximately 3 out of 4 youth (1st – 8th graders) had teachers who agreed that *Friends* in the classroom were supportive, and that 1 out of 2 youth showed noticeable improvements in their school performance because of *Friends*.

Key Findings: Progress in *Milestone Categories*

The stated *Milestone Categories* are to help the youth in the following areas:

- **Social and Emotional Development** – strong relationships with adults, peers and community; improved emotional skills and mental/emotional health.
- **Making Good Choices** – reduced aggression and problem behaviors; avoidance of substance abuse and other risky behaviors.
- **School Success** – academic performance and progress, including attendance, appropriate classroom behavior, and promotion.
- **Improved Health Care** – improved access to health care services, including physical, mental and reproductive when appropriate, and nutrition and exercise.
- **Positive Plan and Skills for the Future** – individual, positive plan for the future post-high school, and skills needed to achieve the plan.

In this section we summarize the results from data collected in 2008-09 for indicators of each *Milestone Category*. Based on this summary, we outline the successes and challenges experienced by *FOTC* youth over the past year. Finally, we make recommendations for the continued success and improvement of the *FOTC* – Portland program, as well as for future evaluation efforts.

SOCIAL AND EMOTIONAL DEVELOPMENT

Helping promote social and emotional development in program youth involves 1) building strong relationships with adults, peers, and community, and 2) improving mental and emotional health.

- **87% of youth exhibited predominantly socially competent behavior.** This pattern has remained stable over the past 5 program years. Socially competent behavior, according to *Friends*, was more prevalent among youth of other ethnicities.
- **81% of youth were confident and had self-esteem.** The increase in confidence and self-esteem between 2004-05 and 2006-07 was maintained in 2008-09, but the trend was not statistically significant. *Friends* reported that African American youth and youth of other ethnicities had higher self-esteem/self-confidence than Caucasian youth.
- **48% of FOTC adolescents did not report any of serious symptoms of depression in the past year.²** There was a decrease in the proportion of adolescents reporting no serious symptoms of depression from 2007-08.

MAKING GOOD CHOICES

Another program goal is to help youth make good choices resulting in reduced aggression and problem behaviors such as high risk sexual behavior and substance use.

- **96% of FOTC youth often, very often or almost always respected classroom rules.** This has remained stable over the past 5 program years. Respecting classroom rules was more prevalent for girls, Caucasian youth, and youth of other ethnicities.
- **83% of FOTC adolescents have never smoked a whole cigarette, 49% have never had more than a few sips of alcohol, and 67% have never used marijuana in their lifetimes, according to their own reports.** The proportion of youth who reported using these substances has not changed significantly over the past 5 years, with the exception that there was a small increase (not statistically significant) in lifetime marijuana use in 2008-09. Youth of other ethnicities were more likely, and African American youth were less likely, to have used alcohol in their lifetimes and in the last 30 days.
- **73% of FOTC adolescents were not involved in physical fighting, attacking out of anger, carrying a weapon, threatening someone with a weapon, and/or gangs, according to *Friends*.** Boys were more likely to be involved in violent behaviors than girls.

² Symptoms of serious depression included 1) depressed fairly often, very often or almost always; 2) seriously considered suicide in the past year; and 3) were sad or hopeless for at least two weeks in a row. These responses were counted for each youth to create a composite score ranging from 0 (no symptoms) to 3 (all three symptoms).

- **63% of FOTC adolescents reported that they have never had sexual intercourse; of those who had sexual intercourse, 50% used condoms during their last intercourse experience.** Lifetime sexual intercourse rates have been consistent over the past 5 program years. Adolescents in 9th – 12th grade were significantly more likely to have had sexual intercourse than 6th – 8th graders.

SCHOOL SUCCESS

School success is defined not only as academic performance, but also as behavioral, emotional, and cognitive engagement in the classroom and in other school activities.

- **92% of FOTC youth attended school regularly** during the 2007-08 school year (based on data received from the Portland Public School District and published in the 2007-08 School Addendum). Data for the 2008-09 school year will be included in the 2008-09 Education Report forthcoming in Winter 2010.
- **57% of FOTC 3rd through 10th graders met or exceeded grade level standards in reading, and 49% in math,** during the 2007-08 school year (based on data received from the Portland Public School District and published in the 2007-08 School Addendum). Data for the 2008-09 school year will be included in the 2008-09 Education Report forthcoming in Winter 2010.
- **73% of FOTC youth were engaged in school according to *Friends*.** There have been no significant changes in school engagement over the past 5 program years. Girls were more engaged in school than boys.
- **69% of FOTC youth avoided receiving a discipline referral, 78% avoided suspension, and 97% avoided expulsion from school, according to *Friends*.** There were no significant changes in the proportion of youth who received discipline referrals or who were suspended, and very few youth have been expelled, over the past 5 program years. Children in grades 1 through 5 were less likely to have been suspended than 6th – 8th graders, and less likely to have been expelled than 9th – 12th graders. Girls were also significantly less likely than boys to have received a referral or to have been suspended.

IMPROVED HEALTH CARE

Improved health care is defined as healthy lifestyle choices, including routine preventive health care and proper nutrition and exercise.

- **91% of youth had a check-up with the doctor and 83% visited a dentist for preventive health care in the past year, according to *Friends*.** There were no significant changes in this pattern over the past 5 program years. Preventive health care did not differ based on grade, gender, or race/ethnicity.
- **44% of FOTC youth ate fruit and vegetables daily, according to *Friends*.** The proportion of youth who ate fruit and vegetables daily declined significantly between 2004-05 and 2006-07, and then increased significantly in 2008-09.

- **43% of FOTC youth exercised daily, according to *Friends*.** This estimate has remained stable over the past 5 program years.

Positive Plan and Skills for the Future

FOTC – Portland seeks to help each child/youth to develop a positive plan for the future, and to promote the skills necessary to carry out that plan.

- **55% of older youth (grades 6 and up) had realistic plans for the future.** This pattern has remained stable over the past 5 program years. *Friends* more strongly agreed that girls had more realistic plans for the future.
- **61% of younger children (grades 1 through 5) had high hopes for the future.** This pattern has remained stable over the past 5 program years.
- **91% of 1st – 5th graders knew not to talk to strangers, and 86% of adolescents knew how to keep themselves safe in a dangerous situation, according to *Friends*.** There were no significant changes in this pattern over the past 5 program years.

Comparing FOTC Youth to Multnomah County Youth

Responses from the Oregon Healthy Teens (OHT) Survey were compared with responses from *FOTC* adolescents. We focused on a non-high risk sample of 8th and 11th graders from Multnomah County who participated in the OHT Survey in 2005/2006.

- **FOTC adolescents looked better than Multnomah County youth on:**
 - lifetime and last 30-day alcohol use (9th – 12th graders only)
 - daily exercise
 - preventive doctor visits (9th – 12th graders only)
 - substance use initiation – *FOTC* youth looked similar to Multnomah County youth until age 15 when smaller proportion of *FOTC* youth had started using cigarettes, alcohol, and/or marijuana
- **FOTC adolescents were comparable to Multnomah County youth on:**
 - past year arrests
 - suicide ideation and attempts
 - lifetime and last 30-day cigarette/tobacco use
 - lifetime and last 30-day alcohol use (6th – 8th graders only)
 - lifetime marijuana use
 - lifetime sexual intercourse
 - condom use at last sexual intercourse
- **FOTC adolescents were more vulnerable than Multnomah County youth on:**
 - feeling sad or hopeless in the past year

- sexual intercourse initiated at an earlier age
- physical fighting
- preventive dental care
- daily fruit and vegetable consumption

In general, these findings are quite encouraging. It is interesting to note that previous in previous years *FOTC* youth engaged in substance use earlier than Multnomah County youth but this was not true in 2008-09. Moreover, *FOTC* adolescents in 2007-08 were more likely to have been arrested in the past year, but the two groups were similar in 2008-09. The OHT sample of 8th and 11th graders is non-high risk so it would be expected that these youth would have better outcomes than a high risk group of youth selected for *FOTC*. As suggested in previous years, it may be that involvement in the *FOTC* – Portland program helps youth to follow a more “normative” developmental path than would be expected from high risk youth.

Program Successes

Taken as a whole, the data reported for the 2008-09 program year pointed to a number of *FOTC* – Portland program successes.

- **Preventing early initiation of tobacco and alcohol.** In past years, a larger proportion of *FOTC* youth first used tobacco and alcohol before age 15 than a comparison sample of non-high risk Multnomah County youth. In 2007-08 and 2008-09, *FOTC* youth looked similar to a comparison sample of non-high risk Multnomah County youth.
- **Initiation of substance use and sexual intercourse.** *FOTC* youth who had not yet used substances (tobacco, alcohol, marijuana, and other drugs) and/or engaged in sexual intercourse at age 15 were *less likely* than a non-high risk sample of Multnomah County youth to initiate those behaviors at ages 16 and older.
- **Adolescents largely abstained from substance use.** Approximately 4 in 5 *FOTC* adolescents had never smoked a whole cigarette, 2 in 3 had never tried marijuana, and half had never had more than a sip or two of alcohol. *FOTC* youth looked very similar to a non-high risk sample of Multnomah County youth on last 30-day tobacco, alcohol, and marijuana use (a *smaller* proportion of *FOTC* 9th – 12th graders used alcohol in the last 30 days).
- **Adolescents largely abstained from sexual intercourse.** Two in 3 *FOTC* adolescents reported that they had never had sexual intercourse. *FOTC* youth looked very similar to a non-high risk sample of Multnomah County youth on sexual intercourse initiation.
- **Youth were engaged and made adequate progress in school.** Three in 4 youth were engaged in school (e.g., tried hard, did not skip classes), according to *Friends*. Half of the 1st through 8th graders made good or excellent progress as a student, which is an improvement since 2004-05.

- **Youth had less need for academic services.** Compared to 2004-05, there was a decline in the proportion of *FOTC* youth who *needed* tutoring, services for learning problems, and special education testing. However, the *receipt* of these services has not changed significantly over the past several years.
- **Youth achieved positive social and emotional skills.** Most youth were socially skilled and had a strong sense of self. This has been consistent over the past several program years.
- **Youth received health care when necessary and for preventive reasons.** Very few youth had untreated physical health issues, according to *Friends*. The vast majority of youth received routine preventive health care (according to *Friends* who knew about their preventive health care).
- **Youth improved their eating and exercise habits.** There was an increase in *Friend*-reported daily fruit and vegetable consumption since 2006-07 (nearly half of *FOTC* youth ate fruits and vegetables daily). Moreover, almost all *FOTC* adolescents reported that they exercised for at least 20 minutes at least twice a week, and half exercised daily.
- **Youth developed optimism and skills for the future.** Most program participants had hope for the future, placed importance on education, and had plans to continue their education after high school. Three in 5 youth participated in extracurricular activities.
- ***FOTC* youth were comparable to a non-high risk sample of Multnomah County 8th and 11th graders.** *FOTC* youth looked more like (or better than) a non-high risk Multnomah County youth population on a variety of indicators rather than exhibiting more difficulties as might be expected from a group of youth who face more challenges.

Program Challenges

FOTC youth face challenges every day, so it is not surprising that some *FOTC* youth struggled with a variety of issues and had difficulty getting their needs met. The following list is a summary of the challenges that *FOTC* – Portland youth faced in 2008-09.

- **Depression and untreated mental health issues.** One in 5 *FOTC* adolescents reported that they were depressed *very often* or *almost always* in the past year, and *FOTC* adolescents were also more likely than a non-high risk sample of Multnomah County youth to have felt sad or hopeless almost every day for at least 2 weeks in a row in the past year. *Friends* agreed that 1 in 3 youth appeared unhappy, sad, or depressed in the past year. Moreover, *Friends* reported that 1 in 12 youth had untreated mental health problems.
- **Violent behavior, especially physical fighting.** Three in 4 adolescents reported that they were involved in violent behaviors in the past year, which is an increase over previous years. *FOTC* adolescents were also more likely (3 in 5) to have been in a

physical fight than a non-high risk sample of Multnomah County 8th and 11th graders.

- **Substance use.** Over half of *FOTC* adolescents have used tobacco, alcohol, and/or marijuana, and there were small increases in lifetime marijuana, inhalant and other drug use. Of those youth who had tried these substances, 2 in 3 used tobacco and 2 in 5 used alcohol and/or marijuana in the past month.
- **Sexual activity and condom use.** About 1 in 3 adolescents reported having had sexual intercourse, and half of the adolescents did not use a condom during their last sexual intercourse experience (a declining trend since 2004-05).
- **Early initiation of high risk behaviors.** On average, *FOTC* adolescents were 12 years old when they first tried tobacco or alcohol, and 13 years old at their first marijuana and/or their first sexual intercourse. Inhalant use among a small number of *FOTC* adolescents started at age 10. *FOTC* youth started having sexual intercourse earlier than a comparison sample of non-high risk Multnomah County youth.
- **Difficulty concentrating in the classroom.** Almost all *FOTC* youth had room to improve their classroom concentration (only 3% of youth *almost always*, and only an additional 21% *very often*, worked hard and concentrated in the classroom).
- **Behavioral challenges in school.** About 1 in 3 *FOTC* youth had a discipline referral and 1 in 5 was suspended during the 2008-09 school year. Moreover, half of 1st through 8th graders had fair, poor, or failing classroom behavior, according to teachers.
- **Adolescent nutrition.** Only half of the adolescents reported eating fruits or vegetables every day. There was a decline in adolescent-reported fruit and vegetable consumption since 2005-06. *FOTC* adolescents were also less likely to eat fruits and vegetables daily than a non-high risk sample of Multnomah County youth.

Program Recommendations

- ***FOTC* – Portland should continue to develop programming addressing involvement in violent behavior.** *FOTC* adolescents may be more likely to experience physical threats and other types of violence, which would explain their higher rates of engagement in violent behavior. The *FOTC* – Portland program should continue to develop its programming for youth, including afterschool programs; promoting negotiation and nonviolent conflict resolution skills; challenging community norms around violence; and including siblings or peers in positive youth development events when possible.
- ***FOTC* – Portland should continue to offer academic support services.** Perhaps as a result of the *FOTC* – Portland program's efforts to provide academic support, youth showed some signs of improvement in school (lower academic service need, better progress). It is also evident that *FOTC* youth continue to experience behavioral problems in school, have difficulty concentrating in the classroom, and do not receive needed academic services. The *FOTC* – Portland program should continue to regularly monitor youths' academic and social progress in school, and provide School Coordinator services and

advocacy. Offering tutoring services, structured study time, study skills training, or support for credit recovery may also be useful for many *FOTC* youth.

- ***FOTC – Portland should continue to find ways to support youth suffering from depression and other mental health issues.*** Results from the 2008-09 evaluation suggest that *FOTC* adolescents experienced more symptoms of depression than in past years, and mental health issues for a number of youth have gone untreated. The *FOTC – Portland* program should continue to develop staff skills for recognizing mental health issues in youth, talk about mental health issues with youth and their families, refer youth and their families to appropriate service providers, and advocate for youth who are experiencing mental health issues, especially those that are potentially life-threatening. It should be noted that *Friends* can act as advocates, but it is ultimately up to the parents/guardians to access mental health services for their children.
- ***FOTC – Portland should consider ways to address the early initiation of high-risk behaviors, including substance use and sexual intercourse.*** Although there have been improvements in early initiation of risky behaviors over the past few years, *FOTC* adolescents continue to engage in these behaviors. On average, adolescents initiated one or more of these behaviors before the age of 14. The *FOTC* program could, for example, train *Friends* how to talk about substance use and sexual behavior with their youth, or provide more structured opportunities for *Friends* and/or youth to learn about the effects of substance use and high risk sexual behavior.
- ***Friends should continue to develop programming that addresses the health care needs of their youth.*** *Friends* did not know about the health care practices of 10-16% of their youth, and there is evidence that youth continue to have difficulty accessing health care, eating nutritious foods, and exercising regularly. Results from the 2008-09 evaluation suggest some improvements in health care and the program should continue to provide opportunities for youth to get involved in cooking, healthy eating, community gardening, and physical activities. It may also be important to encourage *Friends* to model health care practices, healthy eating, and exercise.
- ***Friends should continue to refine the transition to adolescent programming.*** Many parents/guardians and youth expressed concerns around transitioning to Adolescent *Friends* during a time when other school changes are taking place (e.g., transition to middle school). The *FOTC* program could improve communication with parents/guardians and youth about the 6th grade transition and perhaps start planning for it with youth in grades 3 through 5.