



SAN MATEO COUNTY **PROBATION DEPARTMENT**

STARVISTA ANNUAL EVALUATION

2022-2023



ABOUT THE RESEARCHER

Applied Survey Research (ASR) is a nonprofit social research firm dedicated to helping people build better communities by collecting meaningful data, facilitating information-based planning, and developing custom strategies. The firm was founded on the principle that community improvement, initiative sustainability, and program success are closely tied to assessment needs, evaluation of community goals, and development of appropriate responses.

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Program Descriptions

Four StarVista programs are contracted by San Mateo County Probation Department (Probation) under two funding streams:

- StarVista Insights, Victim Impact Awareness (VIA), and Parenting Support Group funded under Juvenile Justice Crime Prevention Act (JJCPA)
- StarVista Strengthen Our Youth (SOY) funded under Juvenile Probation Camp Funding (JPCF)

STARVISTA INSIGHTS

StarVista Insights (Insights) is an outpatient adolescent counseling program funded by JJCPA that provides services for substance abuse treatment/recovery and mental health issues. This year Insights has been able to provide a hybrid model to meet client's preference for in person and/or telehealth services. The Insights program offers support to community youths and families at the point when adolescents are at risk of substance-related and/or behavioral issues. The program also provides services to many adolescents who have legal issues and have had problematic substance use experiences. Many of these youths also experience co-occurring mental health issues associated with many traumatic experiences that have become common in their communities.

The Insights program continues to be a low-cost referral for outpatient adolescent counseling. Both sites are also Medi-Cal, and Drug Medi-Cal approved locations. Therapeutic services for those presenting with co-occurring issues remain a limited resource in San Mateo County. Some individuals and families receiving services at Insights may not have obtained these services elsewhere due to financial challenges. If a family at any time expresses hardship with making payments, fees are reduced or waived. If families have no health insurance, they are directed to the process that will help them obtain Medi-Cal through the Health Plan of San Mateo.

Youths receiving services at Insights are typically between the ages of 12 and 21. Most youths are enrolled in high school, although an occasional youth is enrolled in middle school or has achieved a high school diploma or equivalent. Insights' youths experience challenges with school attendance, relationships with authority, positive school-related activities, and healthy peer support. Additionally, several youths report gang involvement.

Insights continues to emphasize the provision of support to schools in the area. Youths referred by their schools have typically been caught in some substance engaging behavior at or around the school. They are strongly encouraged to participate in counseling to remain in good standing with the school administration. This can be seen as a positive progression toward a restorative approach to school discipline, as opposed to a punitive approach in which school officials expel students and/or involve the police, which could lead to arrest. The youths referred by their schools appear to be taking their participation seriously and are actively working to improve their behavior.

Insights continues to serve families from various socioeconomic, racial, and familial backgrounds. The Daly City outpatient population (north San Mateo County) appears to show more uniformity in its socioeconomic status,

with a majority falling into the low to lower-middle-income brackets. Youths served at the Redwood City office who reside in South San Mateo County tend to represent a broader socioeconomic range.

STARVISTA VICTIM IMPACT AWARENESS (VIA)

VIA is a trauma-informed, strengths-based educational program designed to teach empathy as it relates to the experience of trauma from victimization. StarVista hosts VIA classes using a curriculum that includes activities, videos, discussions, and guest speakers, all designed to help participants gain a better perspective on what it's like to be a victim of the crimes in which they have been charged. Information is limited on this program in this report for fiscal year (FY) 2022-23.

STARVISTA PARENTING SUPPORT GROUP

The Parent Program serves parents and guardians of court-ordered or court-directed youth age 13 or older. In this 10-week parent training program parents learn how to increase communication, strengthen positive parent-teen relationships, improve teen's school performance, intervene with substance abuse, and apply techniques for active listening and discipline. During the first quarter program staff provided one group in English (in a hybrid model) and one in Spanish (in a telehealth model) based on interest and need.

STARVISTA STRENGTHEN OUR YOUTH (SOY)

StarVista's Strengthen Our Youth (SOY) program serves the needs of at-risk students and families at three high schools and two middle schools in Daly City, South San Francisco, and Half Moon Bay. SOY is an early intervention program designed to increase developmental assets, school engagement, and family functioning. The SOY program has three main components: 1) substance use prevention, 2) individual and group therapy, and 3) parent support and education. In addition to the program's main components, SOY staff also provide family therapy, brief crisis intervention, and case management, which aids in connecting students and their families to community resources.

This past year, the SOY program served 100 clients. Services emphasized substance use prevention by offering individual and group sessions that focused on education about the effects of substances and skills for positive decision making. There was an increase in the number of students presenting with serious distress, including suicidal ideation and recent or ongoing incidents of abuse. Additional themes in individual and group sessions included healthy communication and relationships, managing conflict, emotion regulation, empowerment, identity development, and negotiating aspects of the current social and political climate.

Programmatic Challenges

StarVista staff noted the following challenges for youth and for their programs in FY 2022-2023.

STARVISTA INSIGHTS

Due to the reduction of court involved youth being referred, Insights has faced a reduction of referrals and clients served. With the unused funds due to reduced clients Insights worked alongside probation to amend the contract where unused funds from fiscal years 2020-21 & 2021-22 have been reallocated into FY 2022-23 to provide services under the Parenting Support Group. Insights continues to collaborate with Behavioral Health and Recovery Services (BHRS) and Probation services to increase clients served and presenting concerns supported. Insights provided alternative methods of delivery, which were positively received, as Insights is able to provide a hybrid model for services. Also, Insights has worked closely with the Probation Department to highly encourage in person services this upcoming fiscal year to best support the youth and ensure they receive the best care individually and group wise.

Despite challenges, Insights described successes for the year, during which the residual effect of the pandemic and reduction of court involved referrals has impacted service provision:

- Insights has continued to provide services to clients in telehealth with success rates. Services through telehealth break the barrier of transportation. Clinicians have completed more screenings and assessed youths in their various life domains to ensure Insights provides services that best meet youth needs.
- Insights provides in-person services if preferred by the client. Offices have safety protocols and supplies in place to reduce the risk of infection. For some clients the in-person services provide the normalcy of a structured space that provides that separation that some clients prefer.
- Insights continues to ensure prompt enrollment into the program by scheduling an intake appointment within two weeks of a first phone call to intervene quickly for high-risk clients, ensuring the provision of services while the motivation is still fresh, and increasing validation by showing the importance of their needs being met in a timely manner.
- Insights has continued to utilize and improve their file-keeping system to be paperless, utilizing electronic chart systems.

Clinicians have observed positive group dynamics within the groups, and youth appear to be forthright. StarVista staff continue to support youth around these concerns and offer alternative coping strategies/behaviors that will help establish pro-social behavioral responses to external factors.

In general, Insights program staff and clinicians continue to notice challenges in the community around high-risk behavior, including but not limited to gang involvement, drug dealing, breaking and entering, robbery, and excessive drug use. Conflicts appear to escalate very quickly, whether it be an internal or external escalation. After transition from Shelter-In-Place, program staff has continued to see the lingering effects COVID-19 has had on the youth such as depression, anxiety, and interpersonal issues. Throughout this time, there has been a higher risk for overdoses, which is accounted for by increases in suicide attempts and ideation in the communities.

Clinical staff have also observed that substances are easily accessible and often used as medication for the internal suffering many youths experience. Youths can find substances with relative ease, whether it is in the community or on the internet. This places further emphasis on educating youths about wellness and healthy living, hoping to give young people the appropriate tools and information to make healthy decisions for themselves and their futures.

Substances that continue to present amongst Insights' youths are cannabis, alcohol, cocaine, Xanax, and opiate derivatives (pills and syrups). Cannabis use in different forms (oils, edibles, vaporizing) is most prevalent and makes it easier to avoid detection in public, thus making casual use easier and getting caught more difficult. Legalized adult use of cannabis enables greater accessibility, including creating another avenue for youths to obtain cannabis. In addition, youth may also obtain legalized substances like alcohol from adults and thus create conditions for youths to put themselves at risk. Taken together, the risks associated with easier access to substances puts an even greater emphasis on need for early intervention and education about substance use.

Staff also reported a clear need for youths to be educated around the risks of cannabis use at an early age. Youths appear to be using cannabis with a level of casual display and fearlessness that exemplifies a clear lack of understanding of the risks and/or disregard for any potential consequences. Additionally, Insights' clinicians continue to hear reports regarding the ease with which the youth are vaping. Finally, Xanax abuse remains prevalent and is being used in dangerous amounts. Obtaining prescribed Xanax is often too difficult, and youth resort to finding black market or fake Xanax, which is more dangerous.

STARVISTA PARENT SUPPORT GROUP

StarVista Insights described the following challenges:

- Currently, challenges include lack of referrals. Insights can facilitate a total of four groups: one Redwood City English Group and one Redwood City Spanish Group for those parents that live in South County; for parents living in North County, Insights can facilitate one Daly City English group and one Daly City Spanish Group. Insights is working with Probation to see how to increase referrals.
- Lack of availability to attend sessions. Some clients have two or more jobs or other conflicts that prevent participation. Insights has flexibility and working with parents to explore availability to encourage attendance.
- Parents not prioritizing the support group. Some parents have asked if it is required and as it is only "highly encouraged," some parents have not prioritized participation. Insights continues to work with probation to increase referrals and work towards further establishing and highlighting the strengths and usefulness of the Parent Support Group.

STARVISTA SOY

StarVista SOY was unable to fill all staff positions this year. For that reason, SOY was unable to provide services at Ben Franklin Intermediate School. Additionally, a clinician at South San Francisco High School could only provide 20 of the 40 hours that the school-based services contract was intended to cover. This was despite SOY's prioritizing these positions in hiring efforts. SOY struggled with the reality that the number of positions for

mental health clinicians and trainees in California exceeds the qualified work force. For FY 2023-24, however, SOY has been successful in finding clinicians for all placements in the coming fiscal year.

This year clinicians noticed an increase in student stress, related to the return to the social environment of school after years of distance learning during COVID-19. In addition, students exhibited increased anxiety related to the highly publicized school and community shootings, as well as in response to stressful incidents that occurred at some of the schools (i.e., multiple deaths of current and former students, a community event that resulted in high police presence near the school, an active shooter threat that resulted in heavy police response). Gun and gang violence and drug overdoses were common topics in therapy. Clinicians were prepared to help students and personnel deal with these upsetting events, and provided space for them to process feelings about the disturbing events. Clinicians also noticed an increase in psychiatric hospitalizations of students, CPS reports, police reports, students with co-occurring substance use disorders and histories of trauma, and conflicts between students and teachers and between students.

Accompanying the increase in student stress and distress noted this year, there was an ongoing theme of burnout among many students, teachers, and administrators. Clinicians worked with students on identifying stressors and triggers that contribute to burnout, and taught prevention and coping strategies (e.g., self-care techniques, self-advocacy skills, setting healthy boundaries, creating a dedicated support system among trusted peers, family members, and teachers). Many students were faced with the task of completing large quantities of unfinished assignments. This created overwhelming feelings of guilt and shame because of low motivation, procrastination, and the inability to focus on academic priorities. The clinicians' main objectives were to decrease feelings of shame, to collaborate with the students in creating a realistic plan of action, to increase self-compassion, and to initiate a healthy work/life balance.

Clinicians used an array of therapeutic interventions, selected to address specific presenting challenges. They worked within trauma-informed care and utilized strengths-based modalities. They often included expressive art techniques to enhance the therapeutic experience (e.g., a lunch-time event where students could come and write a letter to families who had experienced loss; creating a "magic box" filled with small notes, each containing a coping mechanism that had previously worked for the student). Clinicians worked with students in establishing healthy coping skills, better advocating for their needs, and expressing their thoughts and feelings with friends and family members. Clinicians helped students with suicidal ideation and self-harm behavior share their experiences in a safe space, linked them to outside crisis services, and did extensive safety planning with them. Many of the students had complex trauma histories, and clinicians provided psychoeducation around trauma and the impact trauma has on attachment and brain functioning.

As was true last year, it sometimes was difficult to obtain consent to provide services that students wanted/needed. Once a clinician received a referral, they reached out to the student and/or parent to explain services, obtain consent, and schedule therapy sessions. Due to multiple challenges, including overall burnout of both parents and students, clinicians sometimes did not hear back from either and were unable to initiate mental health services with some of the referred students.

Clinicians also experienced challenges related to attendance. Many of the most at-risk students often had poor attendance, which disrupted rapport and trust building. For these students, effort was made to identify the reasons for school refusal and to teach coping skills the student could utilize at school to lower their levels of anxiety.

Evaluation Methods

Programs provided by StarVista are funded by San Mateo County Probation's (Probation) JJCPA and JPCF. StarVista monitors programs and reports client, service, and outcome data to Probation and its evaluator, Applied Survey Research (ASR). The methods and tools used to collect this data from funded programs include:

- **Participants and Services:** Funded programs collected demographic data (e.g., race/ethnicity, gender, etc.) and service data (e.g., type of services, hours of services, etc.) for individual participants. Program staff entered these data elements into their own data systems prior to transferring the data to ASR for analysis.
- **Risk Factors (JJCPA and JPCF only):** Funded programs used two assessments, the Juvenile Assessment and Intervention System (JAIS) and the Child Adolescent Needs and Strengths (CANS) assessment, to provide a standard measure of risk, life functioning, and areas of strength and need for youths:
 - **JAIS:** Funded programs used the Juvenile Assessment and Intervention System (JAIS) to provide a standard measure of risk for youths. This individualized assessment is a widely used criminogenic risk, strengths, and needs assessment tool that assists in the effective and efficient supervision of youths, both in institutional settings and in the community. It has been validated across ethnic and gender groups. The JAIS consists of a brief initial assessment followed by full assessment and reassessment components (JAIS Full Assessment and JAIS Reassessment). The JAIS assessment has two unique form options based on the youth's gender. Probation has elected to administer the JAIS to all youths receiving services in community programs for at-risk and juvenile justice involved youth. The JAIS Girls Risk consists of eight items, and the JAIS Boys Risk consists of ten items. Each assessment yields an overall risk level of 'low,' 'moderate,' or 'high.'
 - **CANS:** This is a multi-purpose tool developed for children's services to support decision-making in determining level of care and service planning, to facilitate quality improvement initiatives, and to allow outcome monitoring. The CANS consists of items scored on a four-point scale of 0-3, with a score of two or three indicating an actionable need. The assessment groups items into several core modules, including Youth Strengths, Risk Behaviors, Behavioral/Emotional Needs, Life Functioning, Caregiver Strengths and Needs, and Acculturation. Secondary modules that can be triggered by answers to specific core module items include School, Trauma, Substance Use, and Juvenile Justice.
- **Outcomes:** Like all JJCPA-funded programs, StarVista reports on five justice-related outcomes for JJCPA program participants occurring within 180 days post entry. They are:
 - Arrests;
 - Probation violations;
 - Detentions;
 - Court-ordered restitution completion; and
 - Court-ordered community service completion.

The outcome measures reported for StarVista include Arrests and Probation Violations. The prior year’s cohort of program participants serves as the reference or comparison group to interpret FY 2022-23 outcomes.

Additionally, StarVista also collects 11 program-specific outcome measures to track progress toward its goal of improving outcomes for youths. Lastly, for FY 2022-23, StarVista Insights collected two outcome measures for clients participating in the Parent Support Group.

- ***Evidence-Based Practices:*** JJCPA and JPCF-funded programs are encouraged to follow evidence-based practices. To augment Probation’s knowledge of which programs are being implemented by funded partners, each program has provided a catalog of its practices since the FY 2017-18 evaluation period. After receiving this information, ASR runs the cataloged practice reported through several clearinghouses¹ to determine whether the practice is an:
 - Evidence-based theory or premise;
 - Evidence-based model, shown by multiple experimental or quasi-experimental studies to be effective;
 - Evidence-based practice or modality shown to promote positive outcomes; and
 - Evidence-based tool or instrument that have been validated (concurrent and predictive).

¹ For the full list of evidence-based practice clearinghouses used to evaluate programs, please see the JJCPA/JPCF Comprehensive Report for FY 2022-23.

Evaluation Findings

FISCAL YEAR 2022-23 HIGHLIGHTS

- The total number of youths served by StarVista programs was 157 youths who were served for an average of 13.2 hours and spent 4.1 months in the program.
- The total number of adults served by Insights Parenting Support Program was 16 who were served for an average of 5.9 service hours and spent 1.3 months in the program.
- Insights served youths across the risk spectrum (47% scored “low”, 50% “moderate”, and 3% “high” risk) while SOY primarily served youths who scored ‘low’ risk (93%) on the JAIS assessment.
- Insights assessed 46% of the youths using the CANS. Results from the 23 youths with baseline assessments in the current fiscal year indicate 52% had three or more actionable needs when they entered the program, primarily in Life-Functioning (57%), School (40%), and Behavioral/Emotional Needs (30%) modules. Fewer youths with Risk Behavior needs, including Juvenile Justice needs, had these needs on follow-up assessments compared to baseline assessments.
- SOY assessed 45% of the youths using the CANS. Results for the 47 youths with baseline assessments in the current fiscal year indicate 45% had three or more actionable needs when they entered the program, primarily in Life-Functioning (64%), School (41%), Behavioral/Emotional Needs (40%), and Caregiver Strengths and Needs (40%) modules. The number of youths with needs related to Caregiver Strengths and Needs were lower on follow-up assessments compared with baseline assessments.
- A larger percentage of JJCPA-funded youth served by Insights were arrested for a new violation or had a probation violation in FY2022-23 than in the prior fiscal years.

PROFILE OF CLIENTS SERVED

During FY 2022-23, StarVista served a total of 157 unique youths and 16 adult clients: Insights served 52 youths, 16 adult clients, and SOY served 105 youths.

- **Insights (JJCPA):** Youths served by Insights received an average of 12.2 service hours per youth and an average service duration of 2.6 months. The average age of youths was 17.2 years. The majority of youths served by Insights were male (88%) with 12% identifying as female. Insights served a high percentage of Hispanic/Latino (79%) youths, followed by 8% identifying as Asian/Pacific Islander or multi-racial/multi-ethnic, 2% identifying as White/Caucasian, or 4% as another race. Two-thirds (63%) received individual counseling, 38% received group counseling, and 4% received family counseling.
- **Insights Parenting Support Program (JJCPA):** Sixteen adults, for 12 youths (four youths had two parent participants), were served by Insights Parenting Support Program and received an average of 5.9 service hours per adult and an average service duration of 1.3 months. The average age of the adults was 45.2 years. Three out of four adults served by Insights were female (75%) and 38% of adults identified as Asian/Pacific Islander or Hispanic/Latino, or 25% identified as White/Caucasian.
- **SOY (JPCF):** Youths served by SOY received 13.6 hours of service on average per youth and spent 4.9 months in the program. The average age of youths was 15.9 years, and three-fourths of youths

identified as female (75%) and 25% identified as male. SOY served a high percentage of Hispanic/Latino (52%), followed by 25% of youths who identified as Asian/Pacific Islander, 14% identified as White/Caucasian, 3% identified as Black/African American, multi-racial/multi-ethnic, or as another race. Sixty-six percent received behavioral health assessment, 60% received individual counseling, 55% received case management and/or collateral contact, 27% received alcohol or other drug counseling, 20% received crisis, and 9% received group counseling.

Exhibit 1. StarVista Youth Services, All Probation Youths

YOUTH SERVICES	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23
All Probation Youths (JJCPA, JPCF)					
Youths Served	Data not collected in prior fiscal years		212	247	152
Average Hours Served	Data not collected in prior fiscal years		12.9	12.8	13.2
Average Time in Program (Months)	Data not collected in prior fiscal years		4.9	5	4.1

Exhibit 2. StarVista Youth Services, by Program

YOUTH SERVICES	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23
INSIGHTS (JJCPA)					
Number of Youths Served	107	92	72	40	52
Average Number of Hours Served	16.5	16.6	19	15.7	12.2
Average Time in the Program (Months)	5.1	5.7	5.5	3.7	2.6
SOY (JPCF)					
Number of Youths Served	224	86	125	203	105
Average Number of Hours Served	5.8	19.5	10.5	11.9	13.6
Average Time in the Program (Months)	3.5	7.2	4.2	5.2	4.9

Exhibit 3. StarVista Youth Race/Ethnicity Profile, by Program

PROGRAMS	HISPANIC/LATINO	WHITE/CAUCASIAN	BLACK/AFRICAN AMERICAN	ASIAN/PACIFIC ISLANDER	MULTI-RACIAL/MULTI-ETHNIC	ANOTHER RACE
Insights	79%	2%	0%	8%	8%	4%
SOY	52%	14%	3%	25%	3%	3%

Note: SOY n=105; Insights n=52. Percentages may not total 100 due to rounding.

Exhibit 4. StarVista Youth Gender and Age Profile, by Program

PROGRAMS	MALE	FEMALE	TRANSGENDER/ANOTHER GENDER IDENTITY	AVERAGE AGE OF YOUTH
Insights	88%	12%	0%	17.2
SOY	25%	75%	0%	15.9

Note: SOY n=170; Insights n=40. Percentages may not total 100 due to rounding.

According to VIA attendance information, of the 42 youths who participated in at least one session, almost three quarters (76%) graduated from the VIA program. Quarterly counts of youths who graduated are provided below.

Exhibit 5. Youth Services – VIA

	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
Number of Youths Served	6	9	8	9

RISK INDICATORS

Insights evaluated three risk indicators upon entry—whether the youth had an alcohol or other problem, a school attendance problem, and/or a suspension or expulsion from school in the past year. In FY 2022-23, approximately one in three (34%) youths had an alcohol or other drug problem at entry, an increase of 24 percentage points from FY 2021-22 (Exhibit 6). Additionally, one fifth (21%) of youths had an attendance problem (a decrease from 42% in the prior fiscal year), and 38% had been suspended or expelled in the past year (an increase of 23 percentage points from the prior year).

Exhibit 6. Risk Indicators at Program Entry, StarVista Insights

RISK INDICATORS AT PROGRAM ENTRY	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23
Alcohol or Other Drug Problem	74%	61%	38%	10%	34%
Attendance Problem	29%	33%	49%	42%	21%
Suspension/Expulsion in Past Year	45%	48%	33%	15%	38%

Note: FY 2022-23 n=29.

In FY 2022-24, StarVista Insights served clients across the risk spectrum (Exhibit 7). The 32 participants assessed using the JAIS had criminogenic risk levels predominantly at the “moderate” (42%) and “low” (47%) risk classification level, with 4% scoring as ‘high’ risk.

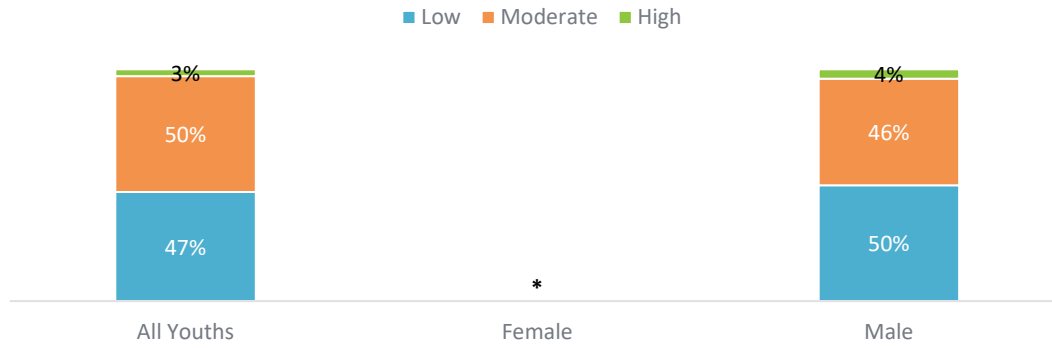
Exhibit 7. JAIS Risk Levels, StarVista Insights

JAIS RISK LEVEL	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23
Low	46%	33%	57%	54%	47%
Moderate	43%	49%	39%	42%	50%
High	11%	17%	4%	4%	3%

Note: FY 2022-23 n=32. Percentages may not total 100 due to rounding.

When disaggregated by gender, half of self-identified males scored ‘low’ (50%) on the criminogenic risk scale, while a similar proportion scored “moderate” (46%) and one youth who scored “high” (4%) risk (Exhibit 8). Only four females were assessed with the JAIS Girls Risk Assessment, and their scores have been suppressed due to sample size limitations.

Exhibit 8. Criminogenic Risk Level by Gender, StarVista Insights



Note: All Youths n=32, Female n=4, Male n=28. *Indicates that data were suppressed due to a sample size below five.

In FY 2022-23, SOY primarily served youths who scored “low” risk on the criminogenic risk spectrum (93%, Exhibit 9). As would be expected for a prevention-based service and similar to previous years, SOY has continued to serve youths who score ‘low’ on their JAIS Risk Assessment.

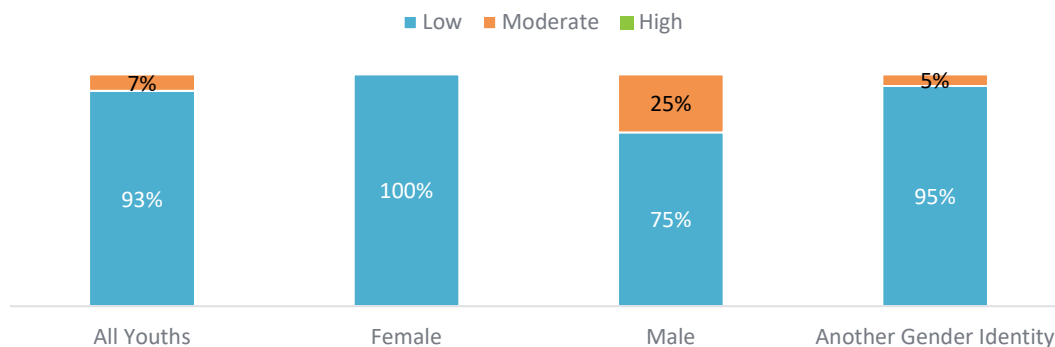
Exhibit 9. JAIS Risk Levels, StarVista SOY

OJAIS RISK LEVEL	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23
Low	88%	89%	99%	96%	93%
Moderate	11%	12%	1%	4%	7%
High	2%	0%	0%	0%	0%

Note: FY 2022-23 n=69. Percentages may not total 100 due to rounding.

Exhibit 10 shows that when the data were disaggregated by gender, all self-identified female youths scored “low” risk while three quarters of self-identified males scored “low” (75%). Additionally, almost all youths who self-identified as another gender identity scored within the “low” (95%) risk classification.

Exhibit 10. Criminogenic Risk Level by Gender, StarVista SOY



Note: All Youths n=69, Female n=32, Male n=16, Another Gender Identity n=21. Risk scores for another gender identity combine risk scores for youths who did not self-identify as exclusively male or female, including transgender, gender nonconforming, nonbinary, genderqueer, questioning, and those who declined to answer. Percentages may not total 100 due to rounding.

YOUTH STRENGTHS AND SERVICE NEEDS

In FY 2022-23, StarVista Insights and SOY programs gathered CANS assessment data achieving a completion rate of 45% (70 of 157) across programs; Insights assessed 24 of the 52 (46%) participants² served at baseline and/or follow-up and SOY assessed 47 of 105 (45%) participants served at baseline and/or follow-up. A total of 70 youths had baseline assessments in the fiscal year (23 from Insights, 47 from SOY), and 58 youths had both a baseline (from any fiscal year) and follow-up assessment (within the fiscal year; Exhibit 11).

Exhibit 11. Number of Youths with CANS assessments by StarVista Program

PROGRAM	BASELINE FY 22-23	BASELINE AND FOLLOW-UP
TOTAL	70	58
Insights	23	17
SOY	47	41

STARVISTA INSIGHTS

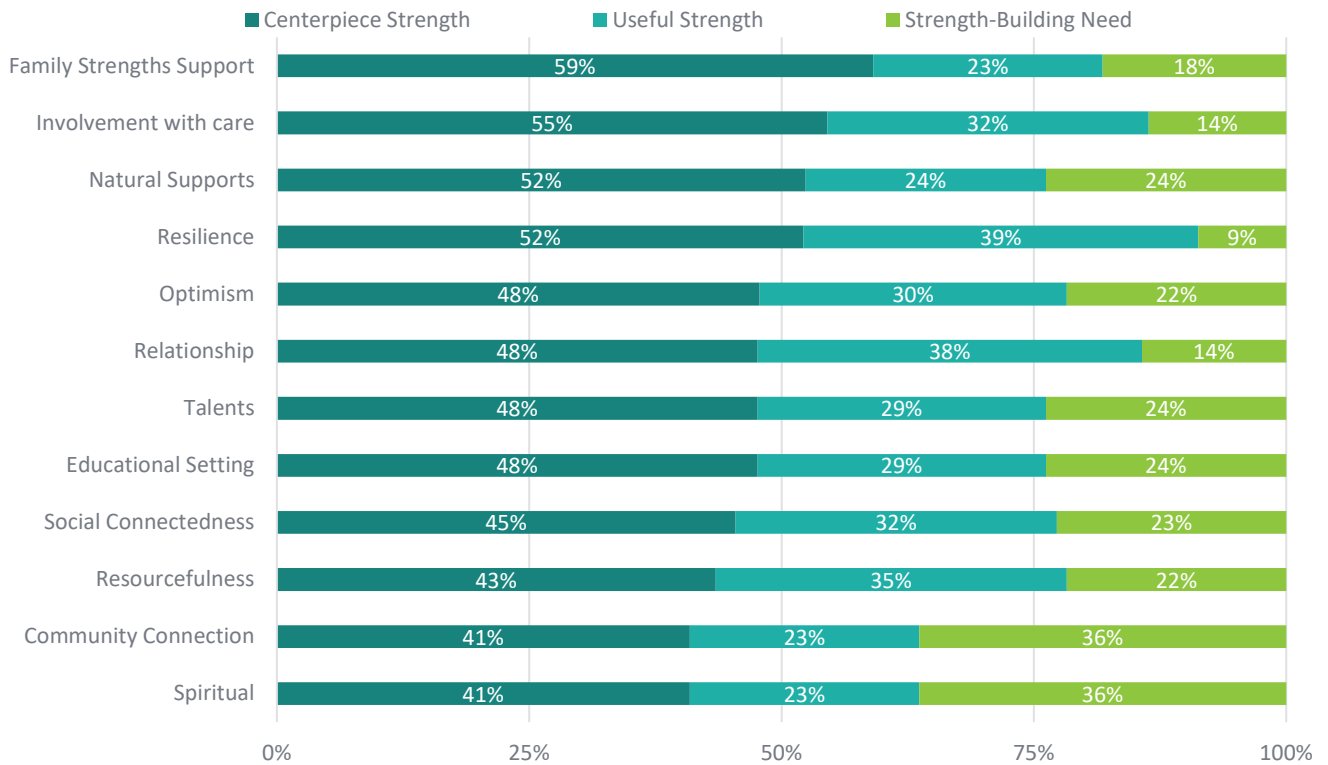
Baseline Assessment

The average number of centerpiece or therapeutically useful strengths identified at baseline per youth was 8.9 out of 12, with 100% of youths identified with at least one strength. The data show that half of the youths served by Insights begin services with a centerpiece strength including family support, personal involvement in care, and the presence of adult allies in their lives (Natural Support). The majority of youth also have strengths involving individual resilience (91%) and relationship permanence (86%).

The data on youths' strengths also suggest that, similar to other grantee programs, over a third of Insights youth have strength-building needs for spiritual or religious involvement (36%) and connection to their community (36%).

² StarVista Insights reported that only youths served for more than 6 weeks were assessed (n=35). The completion rate for this subsample was 69%.

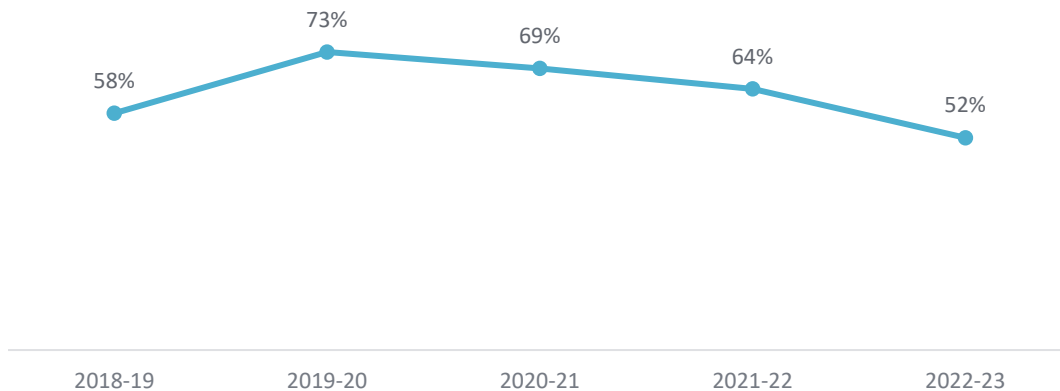
Exhibit 12. Percentage of Insights Youths with Each Strength at Baseline



Note: n=21-23. Percentages may not total 100 due to rounding.

On baseline assessments (Exhibit 13), 52% of youths had three or more actionable needs, which is the lowest percentage in the last five fiscal years.

Exhibit 13. Percentage of Insights Youths with Three or More Actionable Needs at Baseline

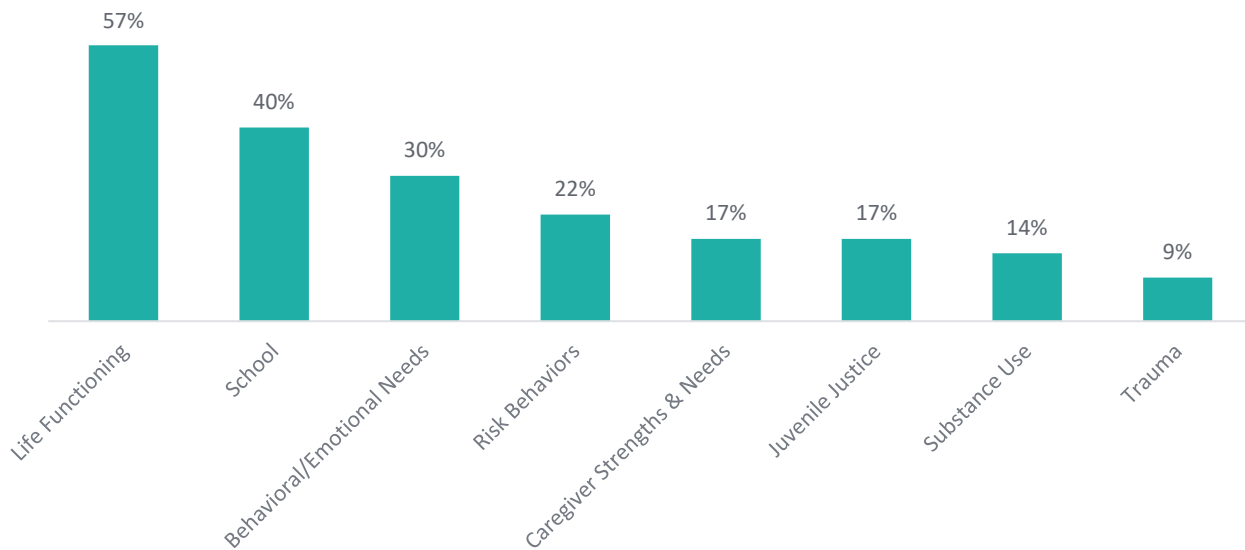


Note: n=23.

Exhibit 14 presents the percentage of youths administered a baseline CANS assessment having at least one actionable need in that module. A moderate number of youths had actionable needs in the areas of Life

Functioning (57%), School (40%), and Behavioral and Emotional Needs (30%). These results indicate that compared to the prior year, fewer youth were identified with needs across all items.

Exhibit 14. Percent of Insights Youths with at Least One Moderate or Significant Need Per CANS Module at Baseline



Note: n=22-23 for all modules except School (n=13).

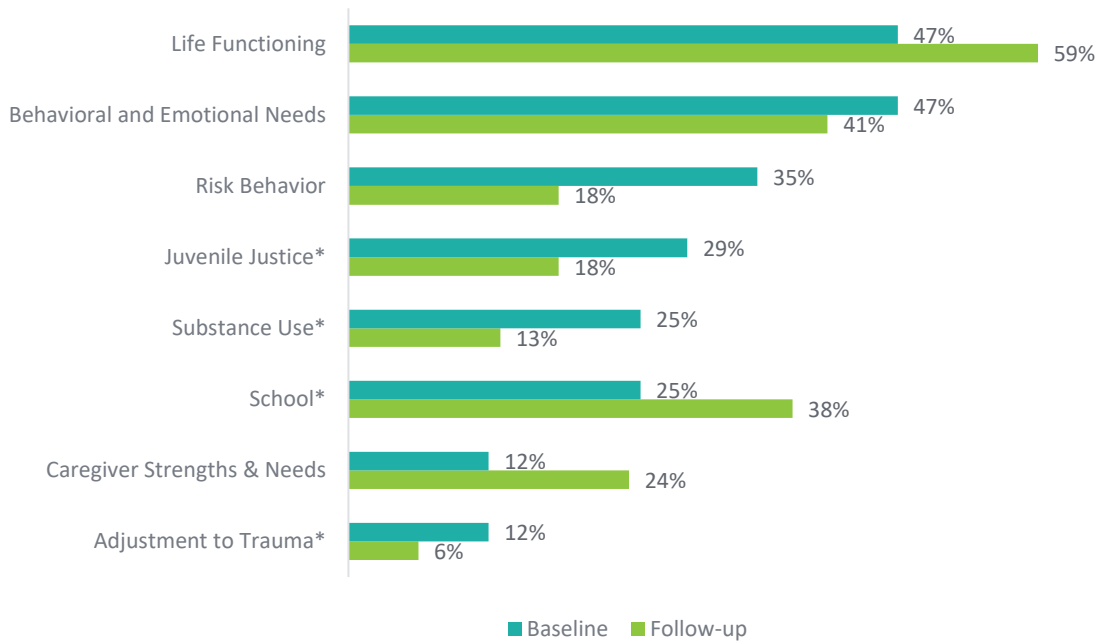
Change Over Time

To evaluate change in actionable needs over time, ratings from the 17 youths who had a baseline (from any fiscal year) and a follow-up assessment in this fiscal year were compared. Only data from youths with at least one baseline and one follow-up assessment were included in these analyses.

The number of centerpiece strengths identified for the 15 youths with this data stayed the same over time at 73%. However, all youth had at least one strength at both timepoints.

Exhibit 15 shows the percentage of youths with at least one actionable need at baseline and follow-up. Some areas declined in the percentage of youths with needs over time indicating some youth no longer had needs (e.g., Risk Behavior, 35% of youths at baseline with needs and 18% at follow-up, with similar declines for Juvenile Justice and Substance Use). There were also trends indicating an increase of need over time in the areas of Life Functioning, School, and Caregiver Strengths and Needs, suggesting increased need for some youths served. None of these changes were statistically significant.

Exhibit 15. Change in Percentage of Insights Youths with CANS Actionable Needs Over Time



Note: n= 16-17 for all modules except School (n=8). *Results include needs identified on core items or secondary modules.

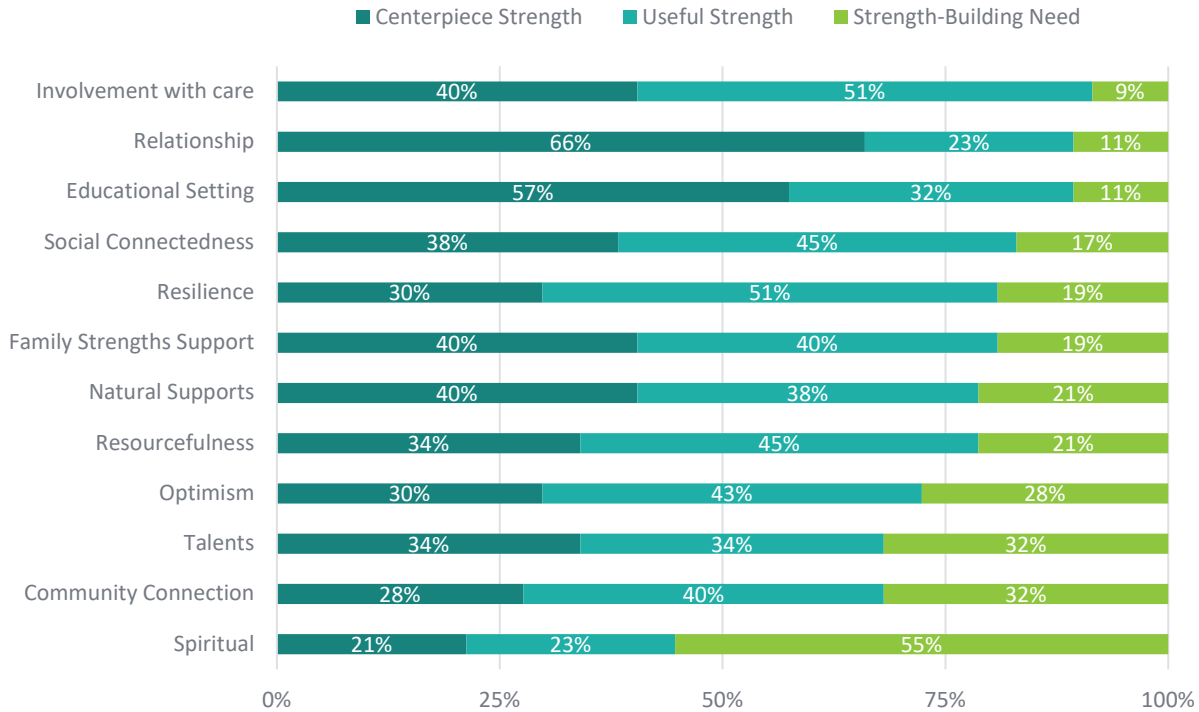
STARVISTA SOY

Baseline Assessment

The average number of centerpiece or therapeutically useful strengths identified at baseline for the 47 youths was 9.3 out of 12, with 100% of youths identified with at least one strength. The data show that nine out of 10 youth are actively involved in services with SOY (Involvement with Care, 91%), and began services embedded in stable family units (Relationship Permanence, 89%), as well as had their Educational Setting (89%) as a strength. Furthermore, 83% of youths had Social Connectedness as a strength.

Many SOY youths have yet to build developmental assets in spiritual or religious involvement (Spiritual, 55%), a connection to their community (Community Connection, 32%) and identify their own interests and talents (Talents, 32%) as strengths.

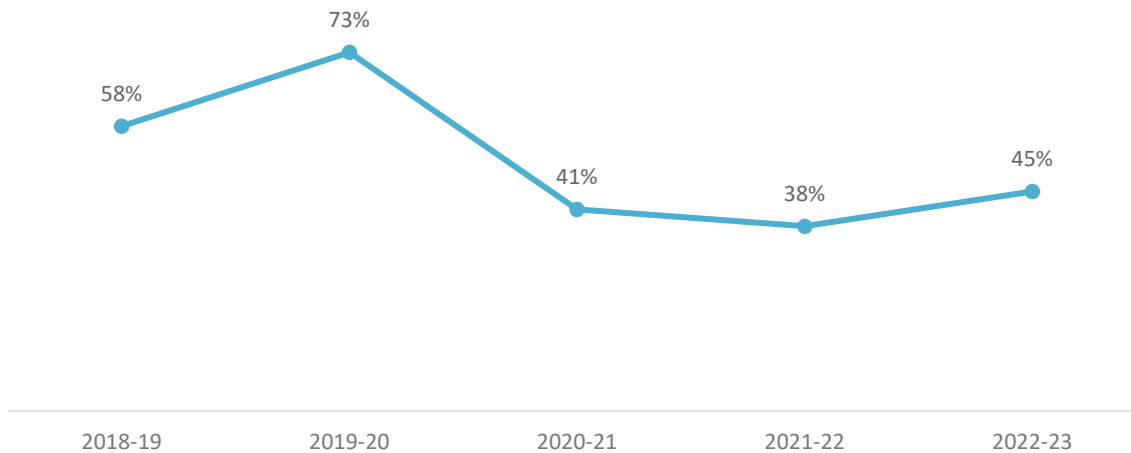
Exhibit 16. Percentage of SOY Youths with Each Strength at Baseline



Note: n=47. Percentages may not total 100 due to rounding.

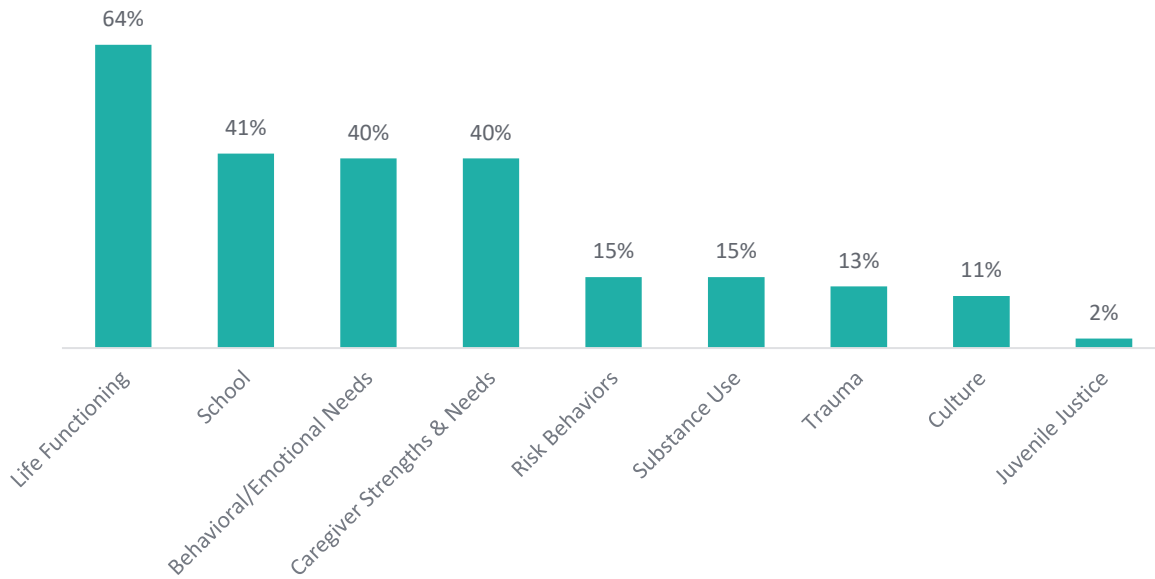
On baseline assessments (Exhibit 17), 45% of youths had three or more actionable needs, a slight increase over the last three fiscal years.

Exhibit 17. Percentage of Youths with Three or More Actionable Needs at Baseline



Note: n=47.

Exhibit 18 presents the percentage of youths administered a baseline CANS assessment having at least one actionable need in that module. Nearly two-thirds (64%) of the youths served had actionable needs in Life Functioning, meaning that a need to improve how they were functioning across individual, family, peer, school, and community realms was identified. This need was followed by around 40% of youths needing to address School-related issues, Behavioral or Emotional issues, and Caregiver-related needs.

Exhibit 18. Percent of Youths with at Least One Moderate or Significant Need Per CANS Module at Baseline

Note: n= 47 for all modules except School (n=22).

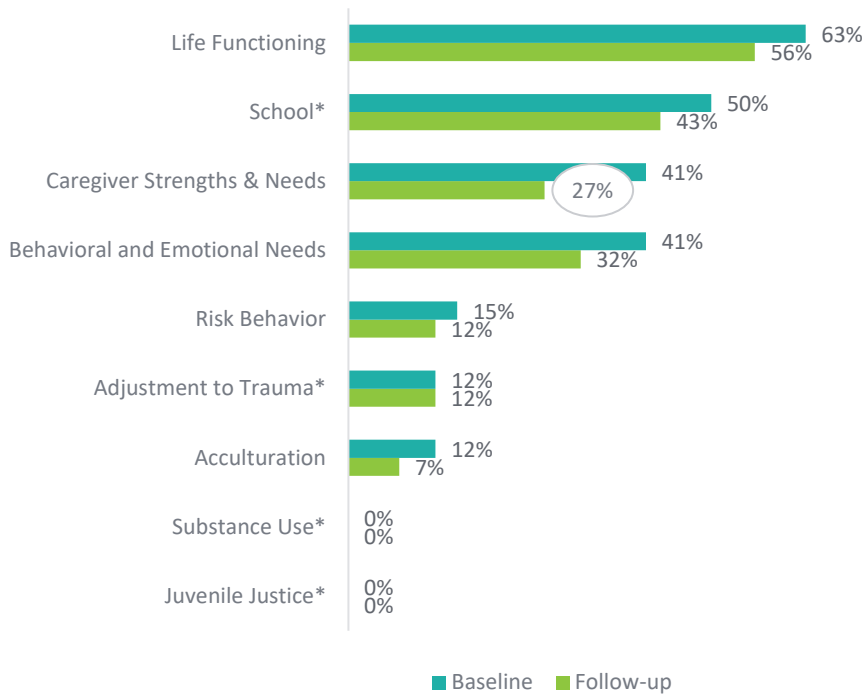
Change Over Time

To evaluate change in actionable needs over time, ratings from 41 youths who had a baseline (from any fiscal year) and a follow-up CANS assessment (in FY 2022-23) were compared. Only data from youths with at least one baseline and one follow-up assessment were included in these analyses.

The number of centerpiece strengths identified for youths served by SOY dropped slightly over time, from 93% to 90%. This suggests that many youths in the program came with actionable strengths and these remained fairly consistent over the year.

Exhibit 19 shows the percentage of youths with at least one actionable need at baseline and follow-up. The results indicate one statistically significant decrease of 14 percentage points in the proportion of youths with caregiver-related needs. There were no other statistically significant findings.

Exhibit 19. Decrease in Percentage of SOY Youths with CANS Actionable Needs Over Time



Note: n=41 for all modules except School (n=14). Circles indicate statistically significant decreases from baseline to follow-up assessment using paired T-tests, p < .05. *Results include needs identified on core items or secondary modules.

JUSTICE OUTCOMES

Exhibit 20 presents justice-related outcomes for 17 youths whose six-month post-entry evaluation milestone occurred in FY 2022-23, of which all 17 were on formal probation. As presented below, the percentage of youths arrested for a new law violation and youths with a probation violation increased from FY 2021-22.

Exhibit 20. Justice Outcomes (StarVista Insights, 180 Days Post Entry)

JUSTICE OUTCOMES	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23
Youths Arrested for a New Law Violation	15%	18%	2%	0%	6%
Youths with a Probation Violation	29%	33%	20%	6%	29%

Note: FY 2022-23 Total n=17; n=1 for Youths Arrested for a New Law Violation, n=5 for Youths with a Probation Violation.

PROGRAM SPECIFIC-OUTCOMES

StarVista’s goal for CANS completion rate for the youth participants was 95%. They fell short of that goal, at 45% (Exhibit 21). StarVista was also to have all of their users and trainers current with their certification, and they nearly met that goal with 11 out of 12 (92%) staff certified for most or all of the year.

Exhibit 21. Program-Specific Outcomes – CANS

CANS DATA COLLECTION	FY 22-23 TARGET	FY 22-23 RESULTS
CANS Completion Rate	95%	45% ³
CANS Users/Trainers Current with (Re)Certification	100%	92%

- This year Insights came close to meeting their program goals for their youths to achieve over the course of the fiscal year (Exhibit 22): progress toward an identified goal and improvements in decision-making.
- The VIA program (Exhibit 23) exceeded one of their three goals: youth having an increased understanding of the impact of their criminal behavior. Regarding the goal of youth engaging in mediation and accomplishing a plan of reparation with their victims, at least six of the victims declined mediation, which contributed to them not meeting their goal.
- SOY (Exhibit 24) had three measures based on the CANS assessment: decrease in needs in life function domains, in risk behaviors, and behavioral/emotional needs. Although not a statistically significant change, fewer youths had these needs at the end of the year than at the beginning; thus SOY did meet their goal for improvement in these areas.
- StarVista exceeded both goals for their new contract for the parent group: participants report improved relationship with their child and improvement in their daily life (Exhibit 25).

Exhibit 22. Insights Program Outcomes

PROGRAM-SPECIFIC OUTCOMES	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23 TARGET	FY 22-23 RESULTS
Percentage of participants showing progress toward an identified goal	97%	92%	84%	90%	80%	78%
Percentage of participants showing improvement in decision making	96%	88%	84%	80%	80%	78%
Percentage of participants showing improved relationship skills	93%	93%	81%	60%	N/A	70%

Exhibit 23. VIA Program Outcomes

PROGRAM-SPECIFIC OUTCOMES	FY 20-21	FY 21-22	FY 22-23 TARGET	FY 22-23 RESULTS
Percent of youth who demonstrate an increased understanding of the impact of their criminal behavior on victims and the community	75%	100%	85%	100%
Percentage of youth who engage in mediation and accomplish a plan of reparation with their victims	60%		35%	22%
Youth self-report survey completion rate	75%	N/A	95%	N/A*

Note: *Youth self-report surveys have not been collected during telehealth.

³ Using a revised sample of only youths served for at least 6 weeks, the completion rate was 69%. However, this rate did not meet the goal of 95%.

Exhibit 24. SOY Program Outcomes

PERFORMANCE MEASURE: Percentage of students who demonstrate...	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23 TARGET	FY 22-23 RESULTS
Decrease in needs in life function domains	52%	31%	15%	46%	70%	12%
Decrease in risk behaviors	36%	8%	69%	50%	70%	17%
Decrease in behavioral/emotional needs	46%	24%	0%	53%	70%	24%

Exhibit 25. StarVista Parent Program Outcomes

PROGRAM-SPECIFIC OUTCOMES	FY 22-23 TARGET	FY 22-23 RESULTS
Percentage of participants that report an improvement in their relationship with their child	75%	100%
Percentage of participants that report an improvement in their daily life functioning	75%	100%

EVIDENCE-BASED PRACTICES

In FY 2022-23, JPCF, JJCPA and YOBG-funded programs were asked to provide the models, curricula, or practices employed in their programs. ASR then evaluated the given information to determine whether they were evidence-based or promising practices by running the items through evidence-based practice clearinghouses including SAMHSA Evidence-Based Practices Resource Center and the Office of Juvenile Justice and Delinquency Prevention Model Programs Guide. Exhibits 26-28 details the practices that YMCA reported for their JPCF, JJCPA and YOBG-funded programs and the evidence base for each.

Exhibit 26. Insights – Evidence-Based Practices

CURRICULUM	CURRICULUM IMPLEMENTATION	RATING
Seeking Safety	Seeking Safety is a present-focused therapy to help people attain safety from symptoms of trauma/PTSD and substance abuse. Topics most commonly applied at Insights include safety, self-empowerment, substance use, high-risk behavior, honesty, asking for help, healthy relationships, community resources, compassion, creating meaning, self-care, coping skills, identifying triggers, and life choices. Insights clinicians receive	Promising research evidence according to The California Evidence-Based Clearinghouse for Child Welfare, with a rating of 3 on a scale from 1 to 5 (with 1 as well-supported with evidence and 5 as concerning). ⁴

⁴ California Evidence-Based Clearinghouse for Child Welfare. (2020). Seeking Safety (Adolescent version). <https://www.cebc4cw.org/program/seeking-safety-for-adolescents/>

	on-going training and continue to develop creative and interactive ways of engaging clients in the material, using various modalities of therapy.	
Motivational Enhancement Therapy (MET)	Insights clinicians utilize principals of Motivational Interviewing and MET to support clients who may be ambivalent about changing maladaptive behaviors. The therapist meets the client where they are and does not attempt to change the client in any way. Rather, the therapist supports the client in identifying values and goals, and how these align or not with their current behaviors and thought processes.	Noted as evidence-based by program but could not be confirmed. MET uses evidence-based motivational interviewing, which is evidence-based practice according to the Center for Evidence-Based Practices. ⁵ Elsewhere it is rated as research-based for children in mental health treatment ⁶ , but the Office of Justice Programs rates the use of motivational interviewing for juvenile substance abuse as having “no effect” for clients age 14-19. ⁷
Mindfulness-Based Substance Abuse Treatment (MBSAT)	Insights clinicians also utilize the MBSAT for adolescent curriculum to enhance youth awareness around multiple areas of need. Clinicians work together to continue to develop creative and interactive ways of engaging clients in the material in all modalities of therapy.	A promising practice based upon scientific literature. ⁸
Trauma-Informed Practice	Therapists are trained in understanding the impact of complex trauma on the youth and effective ways to address this as an integral part of the therapy.	The Trauma-Informed approach is evidence-based practice according to SAMHSA. ⁹

Exhibit 27. SOY – Evidence-Based Practices

CURRICULUM	CURRICULUM IMPLEMENTATION	RATING
Seeking Safety	Najavits, L.M. (2002). Seeking Safety is a coping skills approach to help people attain safety from trauma and/or addiction. It is present-focused and designed to be safe, optimistic, and engaging. Key principles include: safety as the overarching goal; integrated treatment; focus on ideals to inspire	Promising research evidence according to The California Evidence-Based Clearinghouse for Child Welfare, with a rating of 3 on a scale from 1 to 5 (with 1 as well-

⁵ Center for Evidence-Based Practices (2018). Motivational Interviewing. Case Western Reserve University. <https://www.centerforebp.case.edu/practices/mi>

⁶ Washington State Institute for Public Policy. (2020). Updated Inventory of Evidence-Based, Research-Based, and Promising Practices: For Prevention and Intervention Services for Children and Juveniles in the Child Welfare, Juvenile Justice, and Mental Health Systems. http://www.wsipp.wa.gov/ReportFile/1727/Wsipp_Updated-Inventory-of-Evidence-Based-Research-Based-and-Promising-Practices-For-Prevention-and-Intervention-Services-for-Children-and-Juveniles-in-the-Child-Welfare-Juvenile-Justice-and-Mental-Health-Systems_Report.pdf

⁷ OJJDP Model Program Guide. (2011). Practice Profile: Motivational Interviewing (MI) for Substance Abuse Issues of Juveniles in a State Facility <https://www.crimesolutions.gov/ProgramDetails.aspx?ID=180>

⁸ Marcus, M. T., & Zgierska, A. (2009). Mindfulness-Based Therapies for Substance Use Disorders: Part 1 (Editorial). Substance Abuse: Official Publication of the Association for Medical Education and Research in Substance Abuse, 30(4), 263. <http://doi.org/10.1080/08897070903250027>

⁹ SAMHSA. (2014). SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach, p10. Pub ID#: SMA14-4884. <https://store.samhsa.gov/product/SAMHSA-s-Concept-of-Trauma-and-Guidance-for-a-Trauma-Informed-Approach/SMA14-4884>

	<p>hope; cognitive, behavioral, and interpersonal content; and attention to clinician processes.</p>	<p>supported with evidence and 5 as concerning).¹⁰</p>
<p>Dialectical Behavior Therapy (DBT)</p>	<p>Linehan, M. M. (2015). Developed in the 1980s, DBT was originally designed to help people suffering from borderline personality disorder. However, it has also been effective for mood disorders and changing harmful behavioral patterns. As a modified form of Cognitive Behavioral Therapy, DBT focuses on the dialectics of acceptance and change to help both the client and clinician through difficult presenting issues.</p>	<p>Research-based for youth in state institutions and self-harming behavior. Promising for substance use disorder.¹¹</p>
<p>Trauma-Informed Systems</p>	<p>The National Child Traumatic Stress Network (2016). A trauma-informed child and family service system is one in which all parties involved recognize and respond to the impact of traumatic stress on those who have contact with the system including children, caregivers, and service providers. Programs and agencies within such a system infuse and sustain trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies. They act in collaboration with all those who are involved with the child, using the best available science, to maximize physical and psychological safety, facilitate the recovery of the child and family, and support their ability to thrive.</p>	<p>The Trauma-Informed approach is evidence-based practice according to SAMHSA.¹²</p>

¹⁰ California Evidence-Based Clearinghouse for Child Welfare. (2020). Seeking Safety (Adolescent version). <https://www.cebc4cw.org/program/seeking-safety-for-adolescents/>

¹¹ Washington State Institute for Public Policy. (2020). Updated Inventory of Evidence-Based, Research-Based, and Promising Practices: For Prevention and Intervention Services for Children and Juveniles in the Child Welfare, Juvenile Justice, and Mental Health Systems. http://www.wsipp.wa.gov/ReportFile/1727/Wsipp_Updated-Inventory-of-Evidence-Based-Research-Based-and-Promising-Practices-For-Prevention-and-Intervention-Services-for-Children-and-Juveniles-in-the-Child-Welfare-Juvenile-Justice-and-Mental-Health-Systems_Report.pdf

¹² SAMHSA. (2014). SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach, p10. Pub ID#: SMA14-4884. <https://store.samhsa.gov/product/SAMHSA-s-Concept-of-Trauma-and-Guidance-for-a-Trauma-Informed-Approach/SMA14-4884>

Exhibit 28. Parent Group – Evidence-Based Practices

CURRICULUM	CURRICULUM IMPLEMENTATION	RATING
Cognitive Behavioral Therapy (CBT)	Using psychoeducation to address automatic negative thoughts, including practice worksheets, giving assignments, and assigning activity projects	Evidence-based for child trauma and anxiety. Research based for children with depression prodromal psychosis. Not statistically significant for relevant outcomes for court-involved youth and children with ADHD. ¹³
Mindfulness-Based Interventions	Insights clinicians utilize the Mindfulness-Based Interventions to enhance awareness around multiple areas of need. Clinicians work together to continue to develop creative and interactive ways of engaging clients in the material in all modalities of therapy.	Evidence-based model according to empirical evidence. ¹⁴
Motivational Enhancement Therapy (MET)	Insights clinicians utilize principals of Motivational Interviewing and MET to support clients who may be ambivalent about changing maladaptive behaviors. The therapist meets the client where they are and does not attempt to change the client in any way. Rather, the therapist supports the client in identifying values and goals, and how these align or not with their current behaviors and thought processes.	Noted as evidence-based by program but could not be confirmed. MET uses evidence-based motivational interviewing, which is evidence-based practice according to the Center for Evidence-Based Practices. ¹⁵ Elsewhere it is rated as research-based for children in mental health treatment ¹⁶ , but the Office of Justice Programs rates the use of motivational interviewing for juvenile substance abuse as having “no effect” for clients age 14-19. ¹⁷
Trauma-Informed Practice	Therapists are trained in understanding the impact of complex trauma on the youth and effective ways to address this as an integral part of the therapy.	The Trauma-Informed approach is evidence-based practice according to SAMHSA. ¹⁸

¹³ Washington State Institute for Public Policy. (2020). Updated Inventory of Evidence-Based, Research-Based, and Promising Practices: For Prevention and Intervention Services for Children and Juveniles in the Child Welfare, Juvenile Justice, and Mental Health Systems. http://www.wsipp.wa.gov/ReportFile/1727/Wsipp_Updated-Inventory-of-Evidence-Based-Research-Based-and-Promising-Practices-For-Prevention-and-Intervention-Services-for-Children-and-Juveniles-in-the-Child-Welfare-Juvenile-Justice-and-Mental-Health-Systems_Report.pdf

¹⁴ Hofmann, S. G., & Gómez, A. F. (2017). Mindfulness-Based Interventions for Anxiety and Depression. *The Psychiatric clinics of North America*, 40(4), 739–749. <https://doi.org/10.1016/j.psc.2017.08.008>

¹⁵ Center for Evidence-Based Practices (2018). Motivational Interviewing. Case Western Reserve University. <https://www.centerforebp.case.edu/practices/mi>

¹⁶ Washington State Institute for Public Policy. (2020). Updated Inventory of Evidence-Based, Research-Based, and Promising Practices: For Prevention and Intervention Services for Children and Juveniles in the Child Welfare, Juvenile Justice, and Mental Health Systems. http://www.wsipp.wa.gov/ReportFile/1727/Wsipp_Updated-Inventory-of-Evidence-Based-Research-Based-and-Promising-Practices-For-Prevention-and-Intervention-Services-for-Children-and-Juveniles-in-the-Child-Welfare-Juvenile-Justice-and-Mental-Health-Systems_Report.pdf

¹⁷ OJJDP Model Program Guide. (2011). Practice Profile: Motivational Interviewing (MI) for Substance Abuse Issues of Juveniles in a State Facility <https://www.crimesolutions.gov/ProgramDetails.aspx?ID=180>

¹⁸ SAMHSA. (2014). SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach, p10. Pub ID#: SMA14-4884.

<https://store.samhsa.gov/product/SAMHSA-s-Concept-of-Trauma-and-Guidance-for-a-Trauma-Informed-Approach/SMA14-4884>

CLIENT STORIES

StarVista Insights and SOY staff provided client stories to help illustrate the effect of their services in FY 2022-23 (Exhibits 29-31).

Exhibit 29. Insights Client Story

Name of Client	Warren (pseudonym)
Age and Gender	18-year-old, male
Reason for Referral	Warren and his mother were referred to the Insights program in late 2022 after a physical altercation between the two of them. Warren was arrested and spent two nights in Juvenile Hall. Warren and his mother successfully completed family counseling through StarVista’s Insights program in June 2023.
Client’s Behavior, Affect, and Appearance When They First Started in the Program	<p>Warren lives with his mother in a one room pool house that they rent from mother’s friend. Mom is 42, originally from Brazil, attends a Christian church of predominantly Brazilian families, and does not have any family living in this country. Warren’s biological father lives in the same geographic location, but they have never had a relationship.</p> <p>Initially, Warren was hesitant to attend family counseling because of the time commitment. In addition to attending school, Warren works at a fast-food restaurant after school and on weekends. He has limited time off and said that he would prefer to relax, but also said that he was committed to working on his relationship with his mother.</p>
Activity Engagement and Consistency	<p>At the beginning of therapy, Warren reported that he had challenges with drugs use over the last two years, marijuana specifically, and hanging out with the wrong crowd at school. He stated that these issues are the reason why he and his mother did not get along. Mother reported that she does not trust Warren, and she is worried that he will continue to use drugs and will not graduate from high school.</p> <p>Both mother and Warren stated that they want to improve their relationship and go back to the way things were before all this happened. Prior to Warren’s recent challenges with drugs, school, and getting arrested, Warren and his mother reported that they had a strong and loving relationship, but that for the last two years they have struggled with how to communicate or relate to each other.</p> <p>In early sessions, Mother would often cry for much of the session and found it difficult to find positive things to say about Warren. Warren would shut down and state that he did not like sharing his feelings or talking about himself. Initially, they worked on validating each other’s experience, working through recent conflicts, and increasing empathy. Additionally, mother and son learned mindfulness practices, practiced interpersonal relationship skills in session, and worked on ways to increase emotional regulation.</p> <p>About halfway through the program, Warren began opening up in sessions and sharing how he was feeling with his mother. He told Laura how he appreciated everything she did for him, how he loved</p>

	<p>her, and he began expressing his need for privacy. Mother, due to cultural expectations, stated that she wanted Warren to share more details of his life with her and that she found it to be a trust issue if he held back anything from her.</p> <p>Although there was still disagreement between Warren and his mother on certain issues, this was the beginning of the two of them being able to make requests of each other openly and honestly without it turning into a conflict.</p>
Client’s Behavior, Affect, and Appearance Toward the End of the Program	<p>This family made significant progress during family counseling. Trust, communication, and empathy were increased. They both stated that they felt closer to each other, knew how to validate each other’s experiences, and were actively making time to communicate and spend time with each other. And mother has worked on allowing for more privacy for Warren, while Warren has agreed to share important events with his mom. Warren also committed to not smoking marijuana and his grades significantly improved in the spring semester, with Mother celebrating Warren on this achievement.</p>
What The Client Learned as a Result of the Program	<p>They began sharing what they appreciated about each other at the end of each session. This helped to increase positive experiences from a strengths-based approach. Often, they would hug at the end of each session and share words of love and support in their native language with each other.</p>
What the Client is Doing Differently in Their Life Now as a Result of the Program	<p>Due to the support from the program, they have learned how to monitor physical aggression and use the skills learned in family counseling to regulate their emotions and deescalate disputes.</p>
The Value of the Program in the Client’s Words	<p>At the last session, they reflected on how far they have come since starting therapy how this was a strong foundation for their continued growth.</p>

Exhibit 30. Insights Parent Support Group Client Story

Name of Client	Jackie (pseudonym)
Age and Gender	Adult caregiver, female
Reason for Referral	<p>Jackie was referred to StarVista Insight's Parenting Group by her child’s probation officer. She was initially referred to do the program with her ex-husband, but he dropped out of the program within a couple of weeks. Jackie was experiencing distress over her child’s legal issues, having her child at a long-term residential program, and not having a support system that understood her unique challenges with her child.</p>

Client’s Behavior, Affect, and Appearance When They First Started in the Program	Jackie was withdrawn during the first few sessions and careful in what she shared. It became evident that this had to do with her ex-husband being present during these groups. She was kind to the other parents and expressed empathy for their experiences. Once her ex-husband stopped attending the groups, Jackie was more noticeably calm and relaxed, and she began sharing more openly.
Activity Engagement and Consistency	Jackie attended all 10 of the parenting group sessions, was actively engaged, and provided helpful ideas and empathic support to the other members.
Client’s Behavior, Affect, and Appearance Toward the End of the Program	Each session included psychoeducation and Jackie was curious about the topic and how it applied to her situation. She became more confident over time as was evident by the questions she asked and the vulnerability in what she shared. Jackie began bringing in material that she thought would benefit the group and became a group leader in many ways. At the last session, she encouraged the parents to share contact information so they could continue supporting each other.
What The Client Learned as a Result of the Program	Jackie expressed gratitude for the support of the group, being able to form relationships with other parents going through similar situations, and the topics shared in group. Specifically, Jackie found the group’s focus on trauma and how drugs impact the developing brain to be helpful.
What the Client is Doing Differently in Their Life Now as a Result of the Program	Recently, Jackie contacted Insights to share how much the parenting group meant to her. She encouraged Insights to reach out to more parents and community parents and has volunteered to be an advocate in this regard. Insights is working with her to make this happen.
The Value of the Program in the Client’s Words	Jackie felt alone and unsupported prior to the parenting group. The greatest value she noted was the support of other parents going through a similar experience, the psychoeducation, and the belief that she is not helpless. Restored hope is the most impactful quality she was able to take from the program.

Exhibit 31. SOY Client Story

Name of Client	Finn (pseudonym)
Age and Gender	17-year-old, gender non-conforming
Reason for Referral	Finn initially was referred for services due to issues making connections with peers and extreme symptoms of anxiety and depression. Finn had fallen behind in school during the year and found themselves not able to fully engage with academics due to lack of interest and motivation. Finn also had not fulfilled the required 30 hours of community services for graduation, which was a sore topic to discuss.
Client’s Behavior, Affect, and Appearance When They First Started in the Program	Initially, Finn presented as uncomfortable and somewhat disengaged. They were reluctant to share thoughts and emotions. Although it took a little longer to build rapport with Finn it was evident that they lacked any safe space to freely share emotions and concerns.

<p>Activity Engagement and Consistency</p>	<p>The counselor soon discovered that Finn was incredibly intelligent and had many creative pursuits that included writing short stories, baking, drawing, writing poetry, and a love for theater. Through the strengths-based model the counselor highlighted Finn’s creative pursuits as foundational for learning to express emotions, communicating with others, reducing stress, and used these activities for self-exploration and identity building during sessions. The counselor and student explored many options after high school. Finn enjoyed taking the trades courses their high school has to offer such as woodworking and welding. Finn thought if anything they could go into the trades and do welding because they just did not have the mental bandwidth to continue along the path of regular education. Counselor recognized Finn’s needs to not have sessions solely focused on updates of academic progress and instead focused on the activities Finn participated in that fed their sense of self-discovery. Finn brought into session what was meaningful to them, and counselor oftentimes worked with them in learning skills around better communication with peers and processing their emotions. Finn was presented with the opportunity to volunteer with the local repertory theater to build sets for the upcoming production.</p>
<p>Client’s Behavior, Affect, and Appearance Toward the End of the Program</p>	<p>During the last session Finn’s affect was different, there was an overall feeling of hope as they shared their uncle told them about an out of state welding school. Counselor and Finn researched during the last session and soon discovered there was a huge theater scene and many opportunities to build skills in the field of creative arts.</p>
<p>What The Client Learned as a Result of the Program</p>	<p>Finn came to realize that there was a place within the creative fields that needed trades people. Working alongside professionals in set design Finn soon found that a career in theater and the arts could be possible and is within reach.</p>
<p>What the Client is Doing Differently in Their Life Now as a Result of the Program</p>	<p>Finn completed all the requirements for graduation and is better acquainting themselves to trades programs.</p>
<p>The Value of the Program in the Client’s Words</p>	<p>Upon completing therapy, Finn acknowledged ways he had grown in self-confidence and self-worth through the process of therapy.</p>