

APPENDIX J

Perceptions of Caregivers and Youth

Interviews were conducted with caregivers and youth about six months after the youth was discharged from the pilot program. Caregivers and youth were paid to participate in these interviews. The number of interviews conducted reflects a combination of families' refusal to participate, the inability to locate families, and difficulties with interviewer staffing. Findings reported herein are based on the number of responses in the Table below.

Table 1. Number of Interviews

	Sterling Pilot	Denver MST	Total
Caregiver Interviews	23	28	51
Youth Interviews	22	17	39

Interview results are presented in the following areas:

Caregiver:

- Reason for enrollment in the pilot program
- Age of onset, types of problems and experience with other agencies and programs
- Desired changes in youth behavior as a result of the pilot program
- Helpfulness of the pilot program
- Parent and family involvement in the pilot program
- Suggestions to improve the pilot program
- Most helpful/unhelpful service received from service systems
- Advice for parents, providers, and decision makers
- Additional helpful and needed services

Youth:

- Most serious difficulty upon enrollment in the pilot program
- Age of onset, types of problems experienced, and help received when younger
- Youth description of the pilot program
- Changes as a result of the pilot program
- Helpful/unhelpful aspects of the pilot program and suggestions to improve it
- Most helpful/unhelpful service received from service systems
- Additional helpful and needed services

STERLING PILOT PROGRAM

Caregiver View

Reason for Enrollment in the Pilot Program

Most families in years 1, 2 and 3 reported that youth were ordered to participate in the pilot program. All (100%) of caregivers and youth in year 3 said their participation was court ordered.

Age of Onset, Types of Problems and Experience with Other Agencies/Programs

Caregivers reported a relatively narrow range for age of onset of problems. As in year 1, Year 3 caregivers identified ages ranging from 12 to 16 as when their child's serious problems began. The age of onset for most youth, though, was between the ages of 12 to 14, or during middle school.

Typical problems reported at onset for all three years were:

- Youth associating with "bad" friends
- Temper and anger issues
- Defiance including disrespect for parents and lack of cooperation at home

Other issues were:

- Lying
- Missing school
- Illegal activities, such as theft and drug use
- In year three, youth also seemed to have a higher incidence of legal problems.

Prior to enrollment in the pilot program, caregivers cited special education teachers as the only service that was at all helpful for their children. Caregivers rated most services though as being of "no help". Some caregivers reported that the middle school's faculty had a "terrible" attitude and that they hindered rather than helped their children. Caregivers also reported that the drug counseling youth received prior to the pilot program was not particularly helpful.

Desired Changes in Youth Behavior as a Result of the Pilot Program

Most caregivers said that they wanted their child to be less angry, more responsible, able to focus on school, and to stop using drugs.

Helpfulness of the Pilot Program

Overall, year 1, 2 and 3 caregivers were pleased with the help their child received from the program. Their comments were consistent over the three years. Most of the parents cited the pilot program as the most helpful service their child had ever received.

One parent said, "She [therapist] was willing to do anything to help him out." Some described improved communication between the youth and caregiver. They also reported that their children had become "themselves" again, demonstrating greater control of their anger and improved coping mechanisms.

"He was very negative and angry when he started and when he stopped the program he was pot free and very much in control of himself. He learned many different coping mechanisms to help get through."

Other differences the majority of caregivers reported about their youth were:

- Increased understanding of the consequences of their behavior
- Gains in self-respect
- Increased cooperation with family members, including handling family responsibilities
- Improved child and family overall happiness and contentment

A few caregivers reported that not much had changed as a result of the program. One parent reported that the youth had quit school and was still using drugs. A couple of parents reported that their child had shown improvement during and immediately after the program, but their behavior quickly deteriorated thereafter. Prior to year 3, caregivers reported the incidence of pregnancies and the lack of employment (or underpaid employment) for youth as formidable problems. No mention was made of these problems in year 3.

The majority of caregivers reported that they had also benefited from the services they had received from the program. Several caregivers reported they had received needed emotional support during the time that their child was in the pilot program and that their involvement demonstrated parental commitment to their children. A few reported having learned better methods of communication that extended throughout the entire family.

Parent and Family Involvement in the Pilot Program

In year 1, almost all caregivers would have liked more involvement with the pilot program. Few year 1 caregivers participated in regular family sessions. The primary barriers cited to parent and family involvement in year 1 were the cost of gas, the inability to attend sessions that interfered with work schedules, and the perception that the program was primarily for youth and not parents.

Year 2 caregivers were more involved in the program than year 1 caregivers. Most year 2 caregivers participated in weekly family sessions. Yet, year 2 caregivers also reported that they would have liked to have had more involvement.

In year 3, caregivers gave the most conflicting comments about parent and family involvement. The majority of caregivers stated that they were satisfied with their level of involvement in the program. They cited being involved in family counseling, participating in weekly groups and sessions with youth and their siblings. A couple caregivers even reported how the pilot helped coordinate services with other agencies.

Conversely, a fair number of year 3 caregivers reported that they wanted more involvement in the pilot program. These caregivers, however, offered no suggestions on how to improve this area of the program. Further, one caregiver reported having no knowledge of any opportunities for involvement in the program. These caregivers described feeling excluded, having no communication with the program, and leaving messages without having their phone calls returned.

Suggestions to Improve the Pilot Program

Most of the caregivers' suggestions for program improvement related to some type of program expansion. The most often cited suggestion was the need for more one-on-one counseling and greater parent involvement. Caregivers also expressed the need for more information on adolescent behavior. They suggested that some components of the program be made available in the schools, and that the program should work more closely with probation. Several parents requested that the program keep youth very busy to keep them out of trouble.

Most Helpful/Unhelpful Service Received from Service Systems

The majority of caregivers reported that the most helpful service they had received was the pilot program. One parent said that it was the, “parenting group and the education it provided. We were taught how to use reflectors and words that de-escalate conflict. Also, how not to get baited, to stay calm and not to take rebellion personally.” Another parent said the program helped their child communicate with others better, worked on respect and trust issues, helped him develop goals and to be more responsible and accountable, and worked on building skills for employment. Several parents mentioned the “Trail Head” program saying this provided a wealth of information and guidance. Several others reported the youth’s probation officers and probation department as very helpful – “The officer was wonderful and really believed in my child.”

Few caregivers from the pilot program responded to the question about the least helpful services received. Of those that answered, it was reported that youth group experiences were not as effective as individual counseling, and the middle school, specifically its faculty, was not at all helpful. Finally, a caregiver reported that County Social Services personnel were inexperienced, unprofessional, uninformed, and lacking in motivation to best help each youth. The caregiver said, “If it cost money they created road blocks.”

Advice for Parents, Providers, and Decision Makers

Caregivers offered advice to parents that was more personal in nature than the question suggested. The question focused on seeking services and care for their children. However, caregivers suggested that parents avoid social services, be patient and love their children, and be cautious when working with some schools because they tend not to care about children with real problems. The majority of advice focused on getting help right away before problems arise. Their message to parents was “get the system involved as soon as possible”.

Caregivers offered advice to providers and decision makers in various sectors that serve youth and families. The majority of responses mentioned were to find ways to involve parents. They also suggested that more data and information be provided to schools, the justice system and legislators in order for more money and resources to be devoted to troubled children and mental health in general.

“Educate people regarding mental health and its services so society knows that ‘normal’ people need help too.”

Additional Helpful and Needed Services

Caregivers in years 1, 2 and 3 reported that their children still needed additional services. They identified these additional services as:

- Ongoing Counseling and
- Anger Management.

Year 3 caregivers cited several other services that would be potentially useful for both themselves and their children. The primary need stated was to have services readily available at the first sign of a problem – before youth are in trouble. They suggested that a program like the pilot be available to all families when their children are 11 or 12 years old.

Additional needs identified were:

- Information about birth control
- Counseling for returning to school
- “Boot Camp” program where “children see the real world”

Youth View

Most Serious Difficulty When Starting the Pilot Program

The most serious difficulties reported by youth when starting the pilot program were drugs and anger. This included authority issues such as fighting with parent(s).

Other difficulties noted were involvement with the law and trouble with school. When asked what other people thought their most serious issue was youth reported the same difficulties.

Age of Onset, Types of Problems Experienced and Help Received When Younger

Year 1 youth reported an earlier onset of problems than did the caregivers. Some stated that onset began as early as age 3.

Year 3 youth also reported a wider age range at onset of problems than did caregivers. Ages ranged from 8 to 16 years old, with the majority ranging from 12 to 13, during middle school.

In year 3, problems reported were similar to those cited by caregivers, except no youth reported having “bad” friends. Typical problems reported were:

- Anger
- Depression
- Drugs and Alcohol
- Authority Issues
- Fighting
- Stealing
- Attention Deficit Hyperactivity Disorder (ADHD).

One youth reported having been molested at 8 years old with problems beginning in middle school. All youth reported having received help when they were younger.

Youth Description of the Pilot Program

Youth described the pilot program as one where teens were encouraged to be involved in fun, positive activities. They reported that the program was time consuming, but helpful.

The pilot program offered drug and anger management classes. They also said it helped youth keep away from drugs.

Changes as a Result of the Pilot Program

Youths’ responses were almost all overwhelmingly positive about what has changed for them as a result of being in the pilot program. Year 1, 2 and 3 youth reported the program had helped them to:

- Grow up
- Improve their behavior
- Manage their anger
- Improve their family relationships.

Year 3 youth reported having learned about consequences and thinking before they act as well. Several youth reported that they are now off drugs. One youth said, “I’m trying. A lot’s changed since I’ve been in the Pilot – I’ve grown up a lot more and think about consequences.” Another said,

“I see things differently now. My anger is not so bad and I’m not in trouble so much and don’t look for it.”

Helpful/Unhelpful Aspects of the Pilot Program and Suggestions to Improve It

The majority of year 1, 2 and 3 youth agreed with caregivers in that they found the pilot program to be the most helpful service they had received. Year 1 youth reported that individual counseling, group therapy, and structure were most helpful. Year 2 youth cited as important to them help with drug abuse, GED classes and hands-on activities.

Year 3 youth said that what they liked best about the pilot program was the opportunity and encouragement to talk about issues. They said they were able to talk about everything and the staff was always understanding. One youth said, “They would listen to us and not judge.” In year 3, the issue that surfaced most frequently was the desire for more one-on-one sessions with counselors. Some youth commented that on recreation days, much of the equipment was in need of repair.

Most Helpful/Unhelpful Service Received from Service Systems

Youth cited their parole officers as those providing the most helpful service. Some commented that the officers had pointed them in the right direction, were caring, encouraging and respectful and had even helped one youth find a job. Other helpful services included getting the right medication and learning how to control their anger through the pilot program.

The greatest liability or unhelpful service described by the youth was going to jail. One youth said, “Getting sent to jail – it took me back a lot of steps – when I did try, it just took me back to step one.” Another said, “Jail – how am I gonna fix my problem in jail?” Several other youth commented that, “being locked up doesn’t help anything.”

Additional comments primarily addressed how unhelpful their middle school was. Youth commented that the school gave them no support, did not listen to parent concerns, and labeled them as “bad” and “stupid.”

Additional Helpful and Needed Services

A greater number of youth in year 3 than in years 1 or 2 reported that they needed additional services. These services were continued encouragement and ongoing counseling.

In year 3, when asked what services youth need to become successful adults, the youth responded with tangible suggestions, such as needing a dependable car to get to work, getting a job as a mechanic, and staying out of jail. Others said they needed an education and wanted to be responsible. One youth said, “To be a man. Follow the law. Be normal.”

It was all really helpful. I didn’t want to go to any of it, but it was an eye-opener. Since the program, I have succeeded in everything I want to do right now – have a job, taking care of my kid, doing everything I’m supposed to.