City of Oxnard CalGRIP Final Local Evaluation Report

Prepared by:

Resource Development Associates

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City of Oxnard CalGRIP Project

Final Local Evaluation Report

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About Resource Development Associates

Resource Development Associates (RDA) is a consulting firm based in Oakland, California, that serves government and nonprofit organizations throughout California as well as other states. Our mission is to strengthen public and non-profit efforts to promote social and economic justice for vulnerable populations. RDA supports its clients through an integrated approach to planning, grant-writing, organizational development, and evaluation.

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Executive Summary

Project Purpose

The Triple R Project is a community-based gang prevention and intervention program that dedicates collective community resources to services that embrace the City of Oxnard's gang-involved, gang-exposed, and gang-affiliated youth ages 15-24 and their families. Rooted in evidence-based and promising practices in youth development and violence prevention, the Triple R project was funded through a three-year California Gang Reduction, Intervention, and Prevention (CalGRIP) Program grant (2015-2017) for $439,700 per year or $1.3M total. The grant was managed by the City of Oxnard Office of Youth Safety (OYS) in partnership with a contracted community-based partner, Interface Children and Family Services (ICFS).

Triple R—which stands for Recover, Repair, Restore— aims to restore hope and create a safe and respectful environment for youth at risk of initial or recurring gang involvement. Through the implementation of case management, Moral Reconation Therapy (MRT), healing circles, and trainings with appropriate community-based providers, the project focuses on achieving individual behavioral changes and increasing the community's awareness of trauma-informed care. Thus, the anticipated results of the project are a personal transformation of the youth served rather than a citywide reduction in crime.

> **Triple R Project Goals**
>
> 1. City partners develop and sustain a trauma-informed approach to client assessment.
> 2. Gang-involved youth become aware of community support and move toward healing and purpose.
> 3. Gang-involved youth and families are given an opportunity for learning and access to community support.
> 4. Gang-involved youth who are motivated to heal from trauma will be provided with intensive counseling.
> 5. Oxnard will grow its own corps of transformed gang members to support and positively influence other gang-involved youth.

Local Need for this Project

City of Oxnard Police sources estimate that there are approximately 2,400 gang members in Oxnard. According to the Ventura County Juvenile Justice Plan, published in April of 2017, there is a continued need for supportive services and resources for families and gang involved youth throughout Ventura County.[1] Given that the Triple R Project focuses on cultivating prosocial behavior and creating access to supportive services for youth and their families, this program is meeting a current need as identified by community members. The Triple R Project builds on the city's past successes and lessons learned in addressing gang violence by providing a trauma-informed, evidence-based, and culturally responsive approach to personal transformation to meet youth where they are.

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[1]National Council on Crime and Delinquency (2017). Ventura County Juvenile Justice Plan Retrieved from: http://public.venturaprobation.org/images/vcpa/documents/plans/Ventura%20County%20Juvenile%20Justice%20Plan%202017.pdf

The Triple R Project targets gang-involved, gang-affiliated, and gang-exposed youth and young adults ages 15-24 and their families. Rather than try to reach young people who are perceived to be "at-risk," the Triple R Project casts a wide net among partner agencies, schools, and other programs to identify individuals who are "at-promise"—in other words, those who are motivated to make positive changes in their lives, and who express a commitment to embark upon a journey of transformation. "At-promise" youth can also be defined as resilient youth. Resilient youth possess positive motivating traits, such as a positive self-regard, high self-esteem, optimism, motivation, and an internal locus of control.[2] Additionally, resilient youth are found to have a greater opportunity for success when the number or quality of protective factors increase and the number of risk factors decrease.[3]

Project Outcomes

From the project start in November 2015 through the project end in December 2017, **the Triple R Project served 163 participants** through evidence-based case management and group programming. The following are key evaluation results that synthesize service delivery data, interviews, focus groups, and surveys from the two-year evaluation.

1. **Did the project work as intended?**

The Triple R Project achieved its intended goals of enhancing resilience factors such as a positive self-regard, high self-esteem, optimism, motivation, and an internal locus of control and increasing protective factors such as pro-social relationships with family and peers and connection to educational and employment opportunities. The personal and relational transformation experienced by project participants indicates that the Triple R project model holds promise as an effective approach to gang and violence prevention.

Triple R Project Theory of Change

Outreach to "at-promise" youth and young adults

Participants receive evidence-based and promising practices

Participants increase protective factors

Participants do not engage in gang activity

Crime and recidivism are reduced

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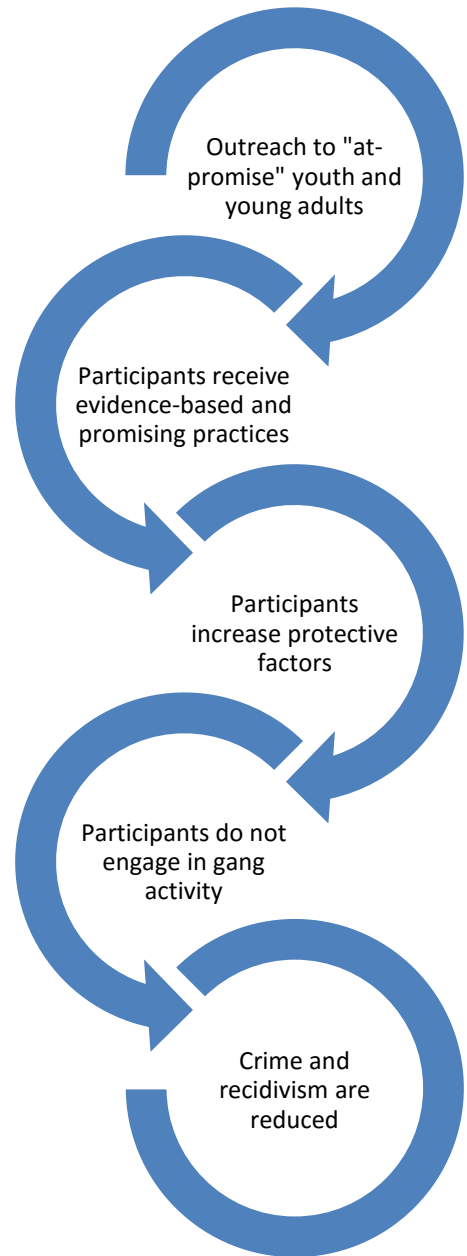
[2] McIntyre, K., White, D., and Yoast, R. (1990). Resilience among high risk youth. Madison, WI: Wisconsin Clearinghouse

[3] Sanders, Mavis G. (2012). Schooling Students Placed At-Risk. New York, NY: Routledge.

2. What were the project accomplishments?

The Triple R Project demonstrated positive strides in reaching its target population, providing individual case management and group services to participants, and developing a strong team of staff. Program participants, family members, and staff, along with local schools and the Ventura County Probation Department (Probation), commended the Triple R Project as an early intervention program. Below we discuss program accomplishments in the following areas: personal development, pro-social relationships and behavior, movement toward self-sufficiency, gang association, and justice system involvement.

Personal development. Participants experienced an increased sense of motivation, future orientation, and sense of responsibility. Youth indicated that since participating in MRT, they began to respect their parents more, saw the importance of telling the truth, and changed their behavior. Adult participants shared how after participating in the program, their perception of others began to change, and it helped them to have a more positive outlook on life. Participants demonstrated an increase in hopefulness, self-esteem, and motivation towards achieving personal goals. For instance, participants shared their determination to either graduate from high school, enroll in college, obtain a job, and/or continue to grow and mature as a young adult. Participants also exhibited an increase in emotional regulation, introspection, and self-awareness.

Comments from Triple R Participants

"[MRT] has been helping me with a lot of things, like being honest and being respectful and owning up to stuff. It helps me think more positive than the way I used to think."

"I came here to change myself. Ever since I came here, my anger issues haven't been that bad. I know how to control myself; it helped me change the way I am in life."

"I actually feel like I have a future now, like I can look forward to one. I look forward to giving my kids a better life than I had."

Pro-social relationships and behaviors. Participants demonstrated an increase in pro-social behavior and positive relationships with peers and adults. Parents of Triple R participants overwhelmingly shared that their relationship with their child, as well as their child's relationship with their siblings and teachers, have vastly improved as a result of participating in the program. Adult participants, who were previously more entrenched in the justice system than the youth participants, described feeling more trusting of others, more motivated to change, and less inclined toward substance abuse as a form of coping.

Movement toward self-sufficiency. Participants reported that Triple R case managers assisted them with school enrollment and helped them find more appropriate school placements, such as continuation high schools. Following the Triple R program, three more participants had completed their high school diploma or GED; one more participant had enrolled in post-secondary education; 10 more participants had a full time job; and four more participants had a part-time job.

Gang association and justice system involvement. Overall, there was a decrease in justice system involvement and gang affiliation after participation in the Triple R Project.

- There were **19 more participants with no gang involvement** at discharge.
- There was a **reduction in the number of participants** that self-identified as an **"active gang member" or a "member of gang but currently inactive"** at discharge.
- **16 fewer participants had contact with the justice system** in the 90 days prior to program discharge compared to the 90 days prior to intake.

"The program has changed my son's way of thinking. I've noticed he feels more important now; that replaced the gangs, which in the past made him feel important. Now, he feels other things are important, things like coming [to Triple R] and getting a job. When kids don't feel important, that's when they turn to gangs."

-Triple R Parent

3. Were the original goals and objectives accomplished?

The evaluation indicates that the Triple R Project met its original goals and objectives. Short-term participant outcomes measured at discharge suggest that participants experienced an increase in protective and resilience factors, a decrease in gang association and activity, as well as decreased contact with the juvenile and criminal justice systems for participants who had previous justice involvement.

4. What problems/barriers were faced and how were they addressed?

As a new program, there were inevitable challenges that arose throughout the program implementation period. Below we describe the barriers faced and how the Triple R Project addressed them. Question 6 below expands on the lessons learned from these challenges.

The program did not meet its target numbers served. First, this was partly because the original target numbers were unrealistic given the level of intensity of services provided. For example, staff spent significant time transporting youth to and from the program. Second, the program's outreach strategy evolved over the course of implementation. Initially, the program contracted outreach to outside partners, but the program and outreach staff struggled to align their vision and approach to outreach. Ultimately, outreach conducted directly by program staff, along with partnerships with outside organizations such as local schools and the Probation Department, attracted the most appropriate referrals, but the program ended before the positive relationship with the school district could fully come to fruition. In addition, reaching and engaging adult participants in the MRT program was difficult due to

personal scheduling constraints (e.g., work schedules). Seeing the potential for early intervention, program staff increased their focus on attracting high school aged youth to the program. Program staff also recognized that given that participation in the program was not mandated, it was sometimes difficult to engage youth to participate regularly. Initial challenges retaining participants were overcome by offering transportation, food, and incentives for participation. Program staff also emphasized that providing meals and snacks to youth, and at times their parents, encouraged participation.

A common reason that youth were unable to successfully complete the program was due to family instability and obligations. Youth often mentioned needing to spend time after school taking care of siblings instead of coming to Triple R. Some youth were preoccupied by troubled family dynamics and others had to move out of Oxnard after their parents lost employment. These findings underscore the importance of supporting both youth and families so that families have the stability required for youth to benefit from the program.

5.   What unintended outcomes were produced?

A potential unintended consequence of the program is that in motivating participants to stop spending time with peers who are poor influences on them, participants seem to have left many of their prior friendships. If those relationships are not replaced with new, positive friendships, youth risk being isolated without important peer support. Furthermore, program staff surmised that some MRT participants may have intentionally (or subconsciously) failed to complete steps so that they could stay in the program longer than needed, because they did not want to lose the supportive relationships they had developed with their case managers and peers.

6.   Were there any lessons learned?

The following are key lessons learned that underscore programmatic strengths and opportunities for improvement.

✓ **Program targets should take into account the level of intensity and duration of services.** Program targets should be set in collaboration with program providers based on the program's service delivery model.

✓ **Outreach with local schools and the probation department is effective.** Outreach conducted directly by program staff, along with partnerships with outside organizations such as local schools and the Probation Department, attracted the most appropriate referrals. As a physical location where children are already present, school sites offer a large pool of potential program participants and facilitate convenient access to the program. Repeated and regular contact with referring organizations, including law enforcement and community-based organizations, is a helpful strategy to maintain consistent referrals.

✓ **The target population is appropriate; however, there may be opportunity to expand the focus to younger youth.** The Triple R Project reached its target population of "at-promise" youth and young adults ages 15-24 who demonstrated a commitment to positive change. Seeing the potential for early

intervention, program staff and stakeholders recommended that the program expand its reach to a younger population (e.g., youth in middle school).

✓ **The ability to provide direct transportation, along with meals and incentives, are key to consistent participation.** Triple R staff had a work vehicle and regularly transported youth to and from MRT and case management services, which made the program accessible to more individuals. Program staff also emphasized that providing meals and snacks to youth, and at times their parents, was an important incentive for participation that not only served as a reward, but also met the needs of many families who struggled financially to make ends meet.

✓ **Services provided to families create a network of support for participants.** Case managers supported families by providing referrals to additional services, such as pro bono legal aid or mental health supportive services, when needed. A family support worker would enable the program to improve the stability of the whole family, thereby aiding families in caring for their children.

✓ **Program staff are the glue of the program.** Program Directors, Program Managers, and case managers cultivated a familial bond within their team, which helped them develop personal, trusting relationships with program participants. The Triple R Program hired case managers that are bilingual and from the city of Oxnard, which also contributed to building authentic relationships with participants; these positive relationships were key to participants' success in the program. Given the intensity of the program services, program staff recommended that the program be staffed with a full-time program manager, three full-time case managers, an additional full-time case manager to work directly with families, as well as a part-time assistant to support data entry and administration.

✓ **Voluntary participation can create challenges for program retention.** Given that participation was not mandated, engaging youth to participate regularly was sometimes difficult. Program staff attempted to reduce barriers by providing transportation, creating incentives by providing food, and collaborating with local schools and the Probation Department to create messaging on the importance of program participation for youth.

In sum, program staff and partners from local schools and the Probation Department reflected that the Triple R Project filled a crucial need in the community for early intervention and prevention programs related to gang involvement.

"The earlier we can intervene, the more helpful it is…. My understanding is that [the Triple R Project] is targeting youth that are at risk of being gang involved, and that is a necessary program for the population that we see. Probation serves all youth that come to our attention and we are trying to make an effort to work with youth that are more entrenched in the system. Having a program like this—having informal handling for youth that don't go to the court—would be a benefit. [Triple R] is kind of like a diversion program that works to keep youth out of the system.

– Probation Leadership

1. Project Description

Overview of the Project

The Triple R Project is a community-based gang prevention and intervention program that places collective community resources in services to embrace the City of Oxnard's gang-involved, gang-exposed, and gang-affiliated youth ages 15-24 and their families. Rooted in evidence-based and promising practices in youth development and violence prevention, the Triple R project was funded through a three-year California Gang Reduction, Intervention, and Prevention (CalGRIP) Program grant (2015-2017) for $439,700 per year or $1.3M total. The grant was managed by the City of Oxnard Office of Youth Safety (OYS) in partnership with a contracted community-based partner, Interface Children and Family Services (ICFS).

Triple R—which stands for Recover, Repair, Restore—aims to restore hope and create a safe and respectful environment for youth at risk of initial or recurring gang involvement. According to the Ventura County Juvenile Justice Plan, published in April of 2017, there is a continued need for supportive services and resources for families and gang involved youth throughout Ventura County.[4] The Triple R Project represents a shift in thinking that moves some of the emphasis from incarceration and retribution to transformation and restoration. The project focuses on achieving individual behavioral changes and increasing the community's awareness of trauma-informed care, thus the anticipated results will reflect a personal transformation of the youth served rather than a reduction of city crime. Building on past successes and lessons learned in addressing gang violence through collaboration, this trauma-informed approach to personal transformation meets youth where they are with culturally competent, evidence-based, evidence-informed, and promising practice interventions to address traumatization, isolation, hopelessness, and lack of opportunity. To increase the capacity of City partners' to deliver trauma-informed care for youth and their family members, the Triple R Project also delivers trainings to partners in trauma-informed assessment and care and the Community Resiliency Model (CRM).

Project Goals and Objectives

The Triple R Project aims to achieve several benefits at both the individual and community level. At the individual level, youth participating in Triple R will experience increased levels of self-efficacy, motivation, and a sense of purpose. At the community level, an increase in awareness and education of the importance of trauma-informed care will be achieved by building the capacity of community partners to deliver trauma-informed care.

[4]National Council on Crime and Delinquency (2017). Ventura County Juvenile Justice Plan Retrieved from: http://public.venturaprobation.org/images/vcpa/documents/plans/Ventura%20County%20Juvenile%20Justice%20Plan%202017.pdf

Target Population

City of Oxnard Police sources estimate that there are approximately 2,400 gang members in Oxnard. The Triple R Project targets gang-involved, gang-affiliated, and gang-exposed youth and young adults ages 15-24 and their families. Rather than try to reach young people who are perceived to be "at-risk" of gang membership and/or activity, the Triple R Project casts a wide net among partner agencies, schools, and other programs to identify individuals who are "at-promise"—in other words, those who are motivated to make positive changes in their lives, and who express a commitment to embark upon a journey of transformation.

"At-promise" youth can also be defined as resilient youth. Resilient youth possess positive motivating traits, such as a positive self-regard, high self-esteem, optimism, motivation, and an internal locus of control.[5] Additionally, resilient youth are found to have a greater opportunity for success when the number or quality of protective factors increase and the number of risk factors decrease.[6] Protective factors, such as a positive relationship with an adult, are positive factors that reduce adverse outcomes, while risk factors, such as substance use, increase the possibility of a negative outcome. The Triple R Project aims to increase protective factors for program participants in order to prevent and/or reduce gang involvement.

Implementing Evidence-Based Practices

Gang reduction efforts as part of the Triple R Project rely on validated, evidence-based practices, as well as several emerging evidence-informed practices that are believed to improve outcomes for the program's target population. Specific evidence-based programs that Triple R uses as part of wraparound services offered include Motivational Interviewing (MI) and Moral Reconation Therapy (MRT). Motivational Interviewing is a

Figure 1: Triple R Project Theory of Change

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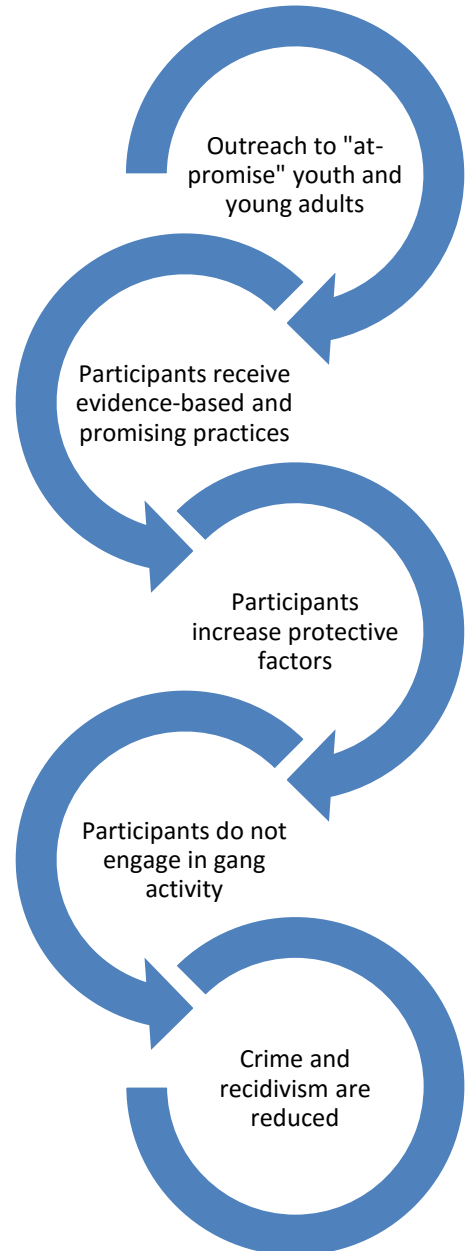
[5] McIntyre, K., White, D., and Yoast, R. (1990). Resilience among high risk youth. Madison, WI: Wisconsin Clearinghouse

[6] Sanders, Mavis G. (2012). Schooling Students Placed At-Risk. New York, NY: Routledge.

method that works on facilitating and engaging intrinsic motivation in order to change behavior, and it is found to have positive effects, such as a reduction in substance use for adolescents that are incarcerated.[7] MRT seeks to decrease reoccurring contact with the justice system by increasing moral reasoning, and research has found it to have a positive effect on reducing re-offense.[8] Additionally, evidence-informed practices used by Triple R include training in the Community Resiliency Model (CRM) of supporting community-members traumatized by violence, mindfulness practices to support healing and transformation, and using restorative justice-informed group circle facilitation methods to support community building, learning, and healing.

Program Model

The Triple R Project consists of four tiers with a progressively narrowing focus of services. Figure 2 depicts the program model. In Tier 1: Referral Network/Outreach, program staff and contracted providers reached out to youth and young adults who they recognized as having a high level of motivation to make a change in their lives. In Tier 2: Life Guidance, staff provided case management support to both participants and families. Within Tier 3: Restoration and Healing, staff provided more targeted services, including Moral Reconation Therapy (MRT) and healing circles. Lastly, under Tier 4: Transformation, participants graduate from the program and serve as a "navigator" to support other program participants.

Figure 2. The Triple R Project consists of four tiers.

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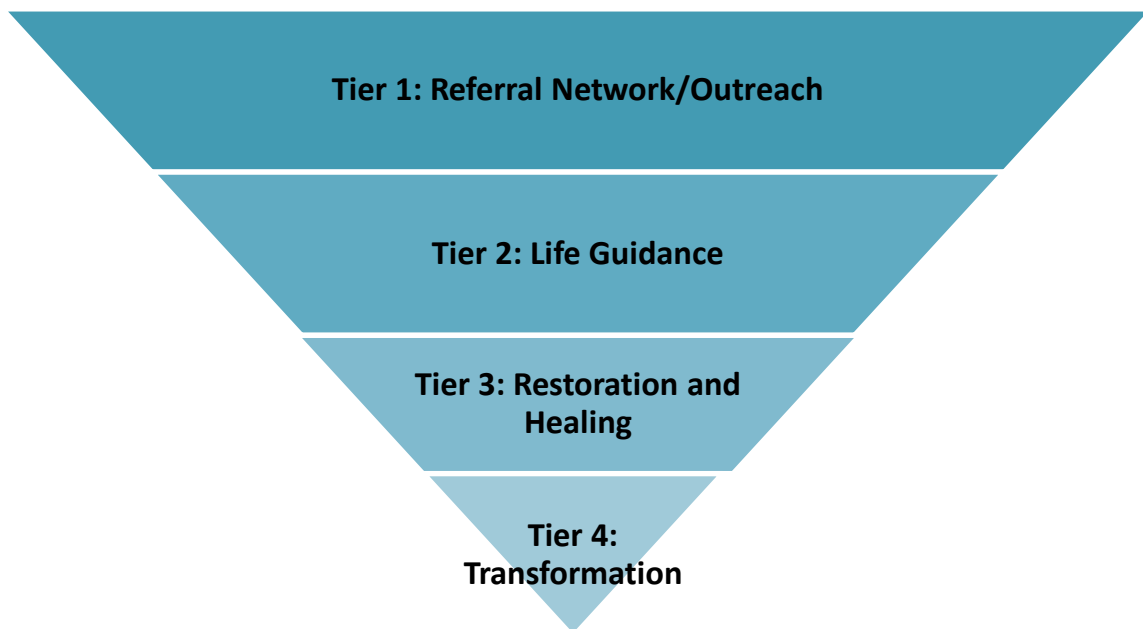
[7]Stein, L.A.R., Lebeau, R., Colby, S., Barnett, N., Golembeske, C. & Monti, P. (2011). Motivational Interviewing for Incarcerated Adolescents: Effects of Depressive Symptoms on Reducing Alcohol and Marijuana Use After Release. Journal of Studies on Alcohol and Drugs, 72(3), 497-506.

[8] Ferguson Myles, L. & Wormith, S. (2012). A Meta-Analysis of Moral Reconation Therapy. International Journal of Offender Therapy and Comparative Criminology, 57(9), 1076-1106.

Program Participation

Eligibility criteria for participation in the Triple R program include living in the City of Oxnard, being between the ages of 15-24, having been part of a gang, affiliating with gang members, being exposed to gang activity, or being at risk of exposure to gang activity. Criteria for successful completion in the program was based on an assessment of participant needs. As such, the length of the program varied depending on participants' specific needs but was designed so that participants could complete services within approximately six to nine months. Successful completion was determined when participants had met the goals set out in their case management plan. For participants in Tier 3, successful completion was defined as graduation from MRT. Participants who successfully completed the program as well as those who did not successfully complete the program were included in the evaluation study.

2. Research Design

Evaluation Methodology

The City of Oxnard contracted Resource Development Associates (RDA), a California-based consulting firm, to carry out the evaluation of the Triple R Project in collaboration with OYS and ICFS. The evaluation incorporated process and outcome evaluation components, and used a mixed methods approach that included both quantitative and qualitative data collection and analyses to assess the extent to which the Triple R Project was implemented with fidelity and achieved its desired outcomes. Employing a mixed methods approach across both process and outcome evaluation activities enabled a more in-depth understanding of program outcomes than could be achieved through either method alone. RDA used quantitative data to assess service delivery, participant demographics, and changes in participant outcomes from intake to discharge. RDA gathered qualitative data on program implementation, perceptions of the program quality, and perceptions of program outcomes. RDA then triangulated analyses to gain more in-depth descriptions of program experiences, to confirm findings across data sources, and to address any divergent findings.

Process Evaluation

The process evaluation documented the implementation of the activities proposed in the project's scope of work and assessed the quality of implementation from the perspectives of participants, staff members, and partners.

Process Measures

The process evaluation tracked a range of data points to assess the extent to which ICFS and other project partners implemented the program as intended, including: number of individuals that served in each tier of the program, services provided, participant demographics, staff capacity, implementation fidelity and adaptations, implementation successes and challenges, and participant satisfaction. The evaluation

assessed the following process measures for staff training (see Table 1) and services delivered (see Table 2).

Table 1. Staff Training Process Measures and Program Targets

Process Measures	Program Targets
1. Number/percent of Triple R Project staff and partners receiving orientation	All staff and partners trained
2. Number of staff and partners receiving youth capacity building and youth violence reduction training	Minimum of 80 staff/partners trained
3. Number/percent of outreach workers trained in Motivational Interviewing (MI) counseling	All outreach workers trained in MI counseling
4. Number/percent of project staff completing mindfulness practices training	Train all project staff in mindfulness practices
5. Number of staff and partners trained in facilitation of restorative/healing circles for staff and partners	Train appropriate staff and partners in use of healing circles
6. Number/percent of staff and partners receiving trauma informed care training	Train all staff and partners in trauma informed care
7. Number/percent of staff receiving coaching on trauma informed care, MI, and MRT for 'Life Guides' and 'Navigators'	Coaching and supervision provided for trauma informed care, MI, and MRT for all 'Life Guides' and 'Navigators'

Table 2. Service Delivery Process Measures and Program Targets

Process Measures	Program Targets
1. Number of gang-involved, gang-affiliated, or gang exposed youth aged 15-24 referred to Triple R Project (Tier 1)	Minimum 1,000 referrals
2. Percent of staff using the MI counseling approach to assess youth readiness for change	Staff will report using the MI counseling approach when counseling youth
3. Number of Triple R Project youth receiving case management (Tier 2)	Provide case management to a minimum of 200 Triple R Project target youth
4. Number of referrals for youth and families to appropriate partner agencies including job training and placement services	Refer participants and families to a minimum of 12 partner agencies
5. Number of participants provided with intensive counseling, MRT, and healing circles (Tier 3)	Intensive counseling, MRT, or healing circles provided to at least 50 youth
6. Leadership opportunities provided for Triple R Project 'Navigators' (Tier 4)	Create opportunities for at least 10 Triple R Project participants to become program 'Navigators'

Outcome Evaluation

RDA designed a methodological framework to evaluate the Triple R Project in an effort to isolate the link between Triple R Project participation and measurable outcomes. Since participants were not selected at random to participate in the Triple R Project, and because data has not been collected on a comparable control group, examining the impact of the Triple R Project through experimental or quasi-experimental design was not possible. As a result, RDA selected a longitudinal design that examined client outcomes at various phases including program intake, every six months thereafter, and upon program exit to assess clients' progress in the program. In this framework, measurable outcomes upon intake serve as the baseline against which client changes were measured over the course of the evaluation period. Repeated measures following client intake were intended to allow the evaluation to more closely estimate the link between program participation and participant outcomes.

Recognizing that many of the outcomes that the Triple R Project sought to achieve were difficult to measure quantitatively, RDA complemented the quantitative outcome analyses with qualitative data collection with program staff, participants, and family members. Qualitative data provided first-hand perspectives on the perceived outcomes of the program, the components of the program that were most impactful for participants, and the mechanisms by which client improvements occurred.

Participant Outcome Measures

Participant-level outcomes were measured by documenting participants' status on a variety of risk and protective factors, shown below in Table 3. Based on the research literature on gang prevention and criminogenic risk factors, participant growth was assessed by measuring participants' perceptions in five content domains including: 1) criminogenic thinking; 2) sense of hope and wellbeing; 3) community and family support; 4) pro-social attitudes; and 5) personal safety/health.

Table 3. Participant Outcome Measures

Quantitative Measures	Qualitative Measures
• Employment status	• Emotional regulation
• Educational status/progress	• Substance use behavior
• Access to shelter	• Emotional wellbeing
• Probation/parole status and violations	• Level of family conflicts
• Depth of gang involvement	• Level of safety in home environment
• Contact with justice system (suspect, arrests, incarceration)	

Community Outcome Measures

To examine the extent to which the Triple R Project developed capacity to sustain a trauma-informed approach to client assessment and programs, the evaluation measured changes before and after participants' completion of Triple R Project trainings. Specifically, the evaluation examines changes in community partners' levels of knowledge, skills, and confidence in delivering trauma informed care, building youth capacity, and using strategies to reduce youth violence.

3. Data Collection

RDA assessed the abovementioned measures through the sources shown in Table 4 and described below.

Table 4. Data Collection Sources

Primary Data Gathered by RDA at three points in time: April 2016, April 2017, December 2017	Data Gathered by ICFS
• Interviews with Triple R Project Director and Manager • Interview with School Counselor • Interview with Probation Department • Interview with Triple R Project Developer • Focus Groups with Triple R Project Case Managers • Focus Groups with Triple R Project Outreach Partners • Focus Groups with Youth MRT Participants • Focus Groups with Parents of Youth MRT Participants	• Service Delivery Data • Quarterly Participant Status Tracking • Intake and Discharge Youth Pre-Post Survey • Community Training Tracking • Community Training Survey

Process Evaluation

RDA gathered administrative client-level data to assess the extent of achieved outreach, recruitment, enrollment, and program graduation counts and distributions. We supplemented the administrative data with a variety of qualitative methods, including key informant interviews with Triple R program managers, school administrators, and Probation Department staff; focus groups with Triple R participants and family members; case studies with Triple R participants; and focus groups with Triple R Project case managers and contracted outreach workers. RDA also developed and implemented an online survey that gathered information about participants' satisfaction with the program.

In order to supply Triple R Project stakeholders with continual and actionable implementation data, RDA partnered with ICFS to conduct data collection activities throughout program implementation (2015-2017), with much of the data collection occurring on a semi-annual basis. This approach promoted the attainment of process-related information without waiting so long that participants could not recall their experiences and on a timeline that gave program staff and stakeholders time to evolve the program and processes over the course of the evaluation period. For the community training component of the evaluation, RDA developed a short training survey that asked participants to rate their satisfaction with the training content, materials, and trainer's knowledge.

Outcome Evaluation

RDA obtained individual-level outcome data from status reports completed quarterly by the Triple R case managers. RDA worked with staff from ICFS and OYS to develop a quarterly participant status report that assesses the measures defined in Table 3 above. In addition, RDA worked with ICFS and OYS to develop an online survey that youth filled out at program intake and at program discharge. The survey measured participants' perceptions in five domains based on the research on risk and protective factors for delinquency or criminal behavior: 1) Criminogenic Thinking/Emotional Regulation, 2) Sense of Hope and Wellbeing, 3) Community and Family Support, 4) Pro-social Attitudes, and 5) Personal Safety/Health. The

survey combines questions from several pre-existing tools into a 23-question survey using a four-point scale: *1-Not at all true; 2-A little bit true; 3-Mostly true; 4-Very true* (see Appendix D for the survey questions and their sources). Youth completed the survey confidentially using computers and/or tablets provided by case managers.

To assess community-level outcomes, RDA developed a retrospective post training survey that ICFS administered to community partners who received trainings through the Triple R Project. Participants were asked to rate their knowledge "before this training" and "after this training," according to the following questions: *How would you rate your knowledge of the specific skill/protocol/topic presented in this training? How would you rate your awareness of how this skill could be used with individuals and families you serve? How would you rate your comfort level in providing services to individuals and families using the skill covered in this training? How would you rate your awareness of research or supportive resources about this intervention? How would you rate your confidence in teaching others about this topic?*

Limitations and Challenges

RDA intended to use statistical methods including paired t-tests and repeated measures ANOVA to understand the relationship between program participation and identified outcome measures. Due to small sample sizes, there was not sufficient data to test for the statistical significance of changes in participant status before and after their program participation. Also due to small participation numbers in some of the program tiers, RDA was not able to utilize stratification procedures to understand differences between clients participating in different tiers of Triple R Project services. RDA used a mixed methods approach to this evaluation, recognizing that there are often sample size and other data limitations to conducting statistical tests in real-world evaluations. RDA was able to triangulate administrative data and qualitative data from program staff, participants, and parents to develop a well-rounded understanding of the program outcomes and the particular program components that appeared to have the strongest effect on participant outcomes. Due to a data entry error, RDA was not able to calculate the proportion of participants who completed the program.

The online youth survey that RDA developed to assess participant changes over time yielded unintended results. Of the 163 participants in the Triple R program, 104 completed an intake survey, and of these, 43 individuals had a follow-up survey. In examining the survey results from intake to follow-up, we found a moderating influence such that while the baseline showed a higher proportion of extreme values (1 or 4 on the response scale), the follow-up survey indicated respondents had moved toward the middle values (2 or 3 on the response scale). The fact that participants were more likely to report that a survey item was "mostly true" than "very true" at follow-up suggests that youth may have become more likely to respond honestly to the survey questions once they have developed rapport and trust with their case manager. While this is an interesting effect, because of this response trend, it is not possible to use the youth survey to accurately assess changes in youth attitudes, beliefs, and behaviors as a result of program participation, thus the youth survey results are not included in this report. Instead, youth outcomes are assessed primarily through quarterly case manager status reports as well as qualitative data collected at three time points during the program.

4. Results and Conclusions

This section discusses the implementation and outcomes of the Triple R Project from the program start in November 2015 through the end of the grant period in December 2017. Process evaluation findings are presented first, followed by outcome evaluation findings. The section concludes with lessons learned throughout the project period.

Process Evaluation Results

To understand the implementation of the Triple R Project, the evaluation team assessed the number and demographics of clients served, the depth of services clients received, and the completion rate of each service. In addition, the process evaluation incorporates qualitative findings on program implementation, including successes and challenges related to program outreach and staffing. The process evaluation also reviews data on the community trainings that were conducted as part of the Triple R Project.

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Key Program Implementation Findings

- The Triple R Project reached its **target population** of "at-promise" youth and young adults ages 15-24. Staff and stakeholders reflected that this was an appropriate target population, and some recommended lowering the eligibility age to include youth in middle school.
- The program's **outreach strategy** evolved over the course of implementation. Ultimately, outreach conducted by program staff, along with partnerships with outside organizations such as local schools and the Probation Department, attracted the most appropriate referrals.
- The program did not meet its **target numbers** served, in part because the original target numbers were unrealistic and in part because staff experienced challenges establishing contact with individuals and families who were referred to the program. Initial challenges retaining participants were overcome by offering transportation, food, and incentives for participation.
- The average **length of participation** in the program was four months, with many staying closer to 12 months. **Program completion** trends underscore the importance of supporting both youth and families so that families have the stability required for youth to successfully complete the program.
- The strong relationship between case managers and participants was key to participants' success—**program staff** were the "glue" of the program. The Triple R Project hired case managers that are bilingual and from the city of Oxnard, which contributed to building authentic relationships with participants.

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Numbers Served

The City of Oxnard set goals for the number of youth the Triple R Project aspired to reach. As shown in Figure 3, the goal for the "Referral Network/Outreach" phase (Tier 1) was to reach 1,000 clients within a year. Within the "Life Guidance" tier, which included case management support to participants and families, the goal was to serve at least 200 clients. Within the "Restoration and Healing" tier, staff aimed

to provide more targeted services, including Moral Reconation Therapy (MRT) and healing circles, to a goal of 50 clients. Lastly, the "Transformation" tier hoped to reach at least 10 program graduates to serve as a "navigator" to support other program participants.

Figure 3. The Triple R project aimed to outreach to a large number of clients while narrowing the number of clients served at each program tier.

Table 5 summarizes the number of clients served in each tier. The green shading represents tiers where the program met its target numbers, while the red shading represents tiers where the program targets were not met. Overall, the program met its outreach targets, but did not meet its other service targets due to two primary reasons. First, the program experienced challenging in enrolling referred individuals, either because the referrals were not suitable or program staff were unable to get in touch with the referred individuals. Second, upon reflection, program managers and staff believe the original targets were not realistic. Further detail on each tier is provided below.

Table 5. Many Triple R clients progressed through all tiers of the program model

Tier Level	Activities	Year 1	Year 2	Total
Tier 1	Number of Outreach Contacts	2,045	1,198	3,243
Tier 2	Number Received Case Management	82 (167 referred)	81 (196 referred)	163
Tier 3	Number Received MRT	13	17	30
Tier 4	Number of Navigators	7	14	21

Tier 1: Outreach and Referrals

As shown in Table 5, program staff successfully outreached to 2,045 clients and 1,198 clients during Year 1 and Year 2, respectively, thus exceeding the program's outreach goal. Though it is evident that the program was successful in reaching its targeted outreach goal, interviews with outreach workers and program staff illuminated challenges the program faced with acquiring referrals. At the outset of the contract, ICFS subcontracted with two outreach providers, City Impact and Victory Life. Triple R staff and the contracted outreach providers agreed that they had different approaches to outreach. For the subcontracted outreach workers, their focus was to conduct outreach to as many youth and young adults that they believed could benefit from the Triple R program, while Triple R staff were interested in ensuring that the targeted "at promise" population was met. Triple R staff reflected that they wished outreach workers could spend more time conducting motivational interviews with potential participants to determine their readiness for change. However, subcontracted outreach staff had difficulty targeting the program's population given their limited knowledge of the program's vision and their limited capacity for more intensive outreach and follow-up with potential participants. As a result, Triple R staff faced challenges with enrolling participants referred by the subcontracted providers.

> *"One of the frustrations we have faced is the handing over of our referrals. At first it would be getting a name of someone who was interested, but then it would come back to us that we need to let the parents know we are interested. Then it became a longer process to get youth, so we weren't getting many referrals."*
>
> — Contracted Outreach Staff

Triple R staff echoed similar sentiments that the program's initial outreach strategy may have not been the best fit for a program that wanted to ensure its participants were entering with a specific level of motivation for change. As a result, program staff pivoted their efforts and began to take the lead on outreach internally. Beginning in the first year and continuing through the second year, Triple R staff disseminated information about their program's services through presentations to schools, local community events, the Probation Department, and local churches. Thus, by Year 2, the program received 196 referrals, nearly reaching its targeted goal, resulting in a total of 363 total referrals by the program end date. Collaborating with local agencies, such as schools and the county Probation Department, helped streamline the referral process, given that these local agencies have an established rapport with prospective participants and access to updated contact information.

Collaboration with the Probation Department. Triple R staff described a mutually beneficial partnership with the Probation Department, wherein probation officers were a source of referrals for Triple R, and Triple R was a needed resource for probation officers. Probation staff interviewed for this evaluation commented that the program met the needs of a population that is not often targeted. The Probation Department deemed that Triple R could meet a youth's probation terms if the probation officer determined it to be a good fit for a child's probation requirements. Despite this strong partnership,

Probation leadership conceded that referrals from Probation to Triple R were lower than they could have been due to staff turnover and not all probation officers having knowledge of the program.

Collaboration with Local High Schools. According to Triple R staff, *"Going into the schools and getting referrals that way was a big [lesson learned]."* Because of outreach efforts, in Year 2 the Triple R Project began delivering services directly in schools, which staff noted was a promising service delivery model given the convenience of co-locating services in schools for both students and caregivers. School counselors affirmed that having access to the Triple R program was of benefit to them as well as to parents and students. School counselors became well versed in the Triple R referral process and maintained frequent communication with Triple R case managers. One school counselor shared: "*Sometimes a parent will call and they may share that the student is getting involved in gang I will refer that person. Triple R touches on truancy, behavior, failing grades and I am grateful that I can refer.*"

Program staff did express some worry about meeting their contracted numbers of referrals. While not an uncommon source of stress for grant-funded programs, this finding points to the importance of setting program targets collaboratively with program managers and staff who have a realistic understanding of the intensity of services and staff capacity to meet participants' needs.

Tier 2: Life Guidance

Although the number of referrals increased by Year 2, the program was unable to reach its stated goals across the subsequent Tiers, providing case management to 82 clients during Year 1 and 81 clients during Year 2 of the program (see Table 5). The most common barrier was that program staff were unable to get in contact with the potential client after the referral was made due to disconnected phone numbers or clients having moved residence. Staff noted the difficulty with bridging the gap from referral to enrollment. Some families face immediate life challenges, including lack of access to a connected phone, unstable housing, and lack of access to basic needs such that they are unable to focus on enrolling their child in the program despite benefits to the child from the program. Staff also suggested that families' immigration status might be a barrier due to fear of engaging in services.

For participants that staff were able to engage, case management activities included the following: relationship building, referrals to existing services, including mental health providers within ICFS (see Appendix A for a list of referrals made), employment assistance, and/or after school support. Case managers worked with clients to set goals and worked toward meeting those goals. Depending on each client's level of need assessed at intake, case managers met with their clients weekly, bi-weekly, or on a less frequent basis. Case managers generally met with clients once or twice a month at first, and the frequency decreased as clients gained more stability. Clients participated in an average of nine sessions with their case manager.

Tier 3: Restoration and Healing

For Tier 3, 13 clients received Moral Reconation Therapy (MRT) during Year 1, compared to a goal of 50 clients. Additionally, 17 were served during Year 2 of the program (see Tier 3 in Table 5). MRT was facilitated according to the evidence-based practice of completing the 12-step program in small groups. During interviews with staff and outreach workers, RDA learned that engaging adult participants in MRT

> *"It's hard getting folks to commit, especially this age group 14-24; they will wiggle out if they can, so we have to stay on top of them and that can be hard."*
>
> -Triple R Case Manager

services was challenging due to their work responsibilities and their priority for finding employment. MRT requires clients to participate in services for two hours, twice a week, which was challenging for adult participants. Additionally, staff shared that as the Triple R Project was the first in the city to conduct MRT with juveniles, and the lack of precedent to learn from was also a contributing factor to the challenges that they faced in enrolling participants.

Although staff were not able to enroll their target number of clients in MRT, program staff indicated that once individuals became engaged in MRT, they became devoted to the program. Of the youth that joined MRT, many remained in the program for six to 12 months with strong program attendance.

Triple R additionally offered healing circles to families experiencing challenges in their interpersonal dynamics. The Triple R staff led several healing circles with families during the project period. However, because of limited staff capacity, Triple R was not able to fully scale up the healing circle component of the program. Staff reported that it was easier to conduct healing circles during times of low program enrollment, because of the time commitment involved with planning and conducting the circles.

Tier 4: Transformation

Lastly, for Tier 4, the program set a goal of transforming 10 youth and/or adults into "navigators" to become mentors for incoming participants. Triple R nearly reached this goal, identifying seven participants as navigators during Year 1 and exceeded its goal by identifying 14 navigators during Year 2 (see Table 5). Navigators were involved in making outreach presentations about the Triple R Project to potential participants. Because navigators took approximately six to 12 months to graduate from the MRT groups, most did not have the chance to develop into mentors for incoming participants, given the limited two-year duration of the program.

Program Completion

Participants spent an average of four months in the Triple R program, with program durations ranging from less than one month to 18 months (see Figure 4). While MRT can generally be completed in three to six months in adult populations, there is less research on completion times in adolescent populations. The Triple R project found that participants more commonly spent six to 12 months in MRT, which included times when participants were "sent back" to previous steps. The Triple R facilitator surmised that some

MRT participants may have intentionally (or subconsciously) failed to complete steps so that they could stay in the program longer than needed, because they did not want the program to end. Similarly, program staff reflected that a number of youth enjoyed MRT and meeting with their case manager so much that they would have liked to remain in the program for longer than stated in their case management plan, suggesting that some participants were not getting their needs for social and emotional support met outside of the program. As a result, case managers and their clinical supervisor worked to define discharge timelines for participants to ensure that they did not stay in the program longer than needed, thus allowing new participants to enter the program caseload.

Figure 4. Participants spent an average of 4 months in the Triple R program

14 days
Shortest
Duration

4 months
Average
Duration

18 months
Longest
Duration
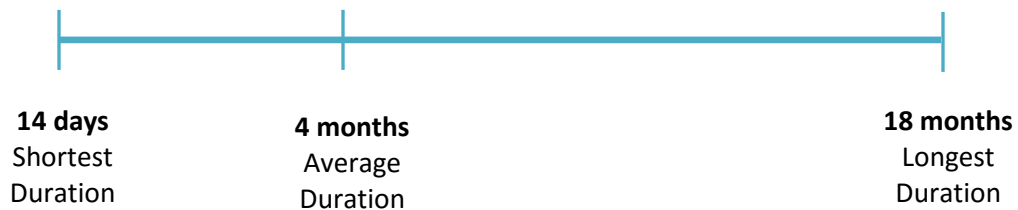
Due to data entry errors, RDA was not able to calculate the proportion of participants who successfully completed the program. However, it appears that slightly more than half of those who began the program did not complete it. Program staff highlighted that youth were commonly unable to continue participating in the program due to family instability and obligations resulting in large part from economic conditions. For example, youth who stopped participating in the program often mentioned needing to spend their time after school taking care of their siblings instead of coming to Triple R, since their parents worked long hours. Some youth were preoccupied by troubled family dynamics and felt they had no choice but to stop attending the program. Other youth had to move out of Oxnard after their parents lost employment. These findings underscore the importance of supporting both youth and families so that families have the stability required for youth to benefit from the program.

In addition, while a number of participants did not formally complete the program, this should not necessarily be considered a "failure to complete" because in many cases these participants still received some amount of mentoring and peer support. As a result, they may have progressed on personal goals like education or employment, turned away from gang association, or reduced contact with law enforcement.

Participant Demographics

The Triple R Project served 163 youth and adult participants from program start (November 2015) to program completion (December 2017).[9] This section provides a demographic overview of Triple R Project clients. As described in greater depth below, the client population is representative of the broader Ventura County population and is within the stated age of the target population.

Figure 5. Most participants were Latino/Hispanic (N=163)
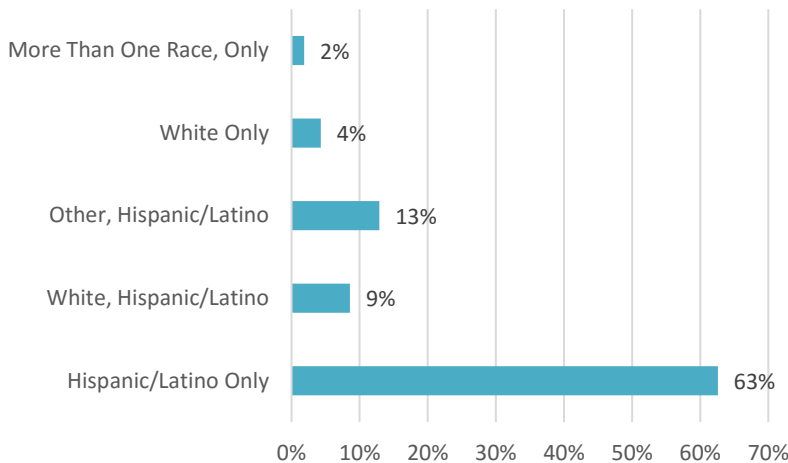
Figure 6. The majority of participants were male
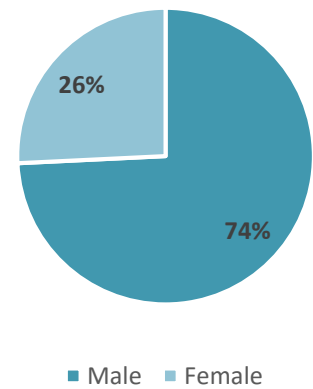
Figure 7. The average age of participants was 19

| **13** | **19** | **27** |
| Youngest | Average Age | Oldest |

Most of the Triple R Project participants served (63%) self-identified as Latino/Hispanic (see Figure 5), which is reflective of the racial composition of the city based upon 2010 U.S. Census data.[10] Additionally, three-quarters of the program participants served (74%) were male (see Figure 6). Data that RDA collected on the Probation population in Ventura County indicate that the population is approximately 70% male, which is consistent with the gender breakdown of clients served by the Triple R Project. The average age of program participants is 19, which demonstrates that the program met its goal of reaching youth and/or

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[9] The 163 participants includes all individuals that received an intake.
[10] United States Census Bureau population estimates V2017. Retrieved from https://www.census.gov/quickfacts/table/PST045215/0654652.

adults between the ages of 15 and 24 (see Figure 7). It is important to note that midway through the program, after receiving feedback from community based stakeholders and parents, program staff decided to expand its reach to the younger population to reach more youth within the middle schools.

Program staff shared that some of the participants face challenges with maintaining housing stability given the rising housing cost throughout Ventura County. As one Triple R staff member stated, *"[Parents of the participants that we serve] work long hours in the fields and can't step away from their work because they will lose their jobs. Ventura County is every expensive so you have people living in crammed spaces."*

Figure 8. Most participants have permanent housing. (N=78)[11]
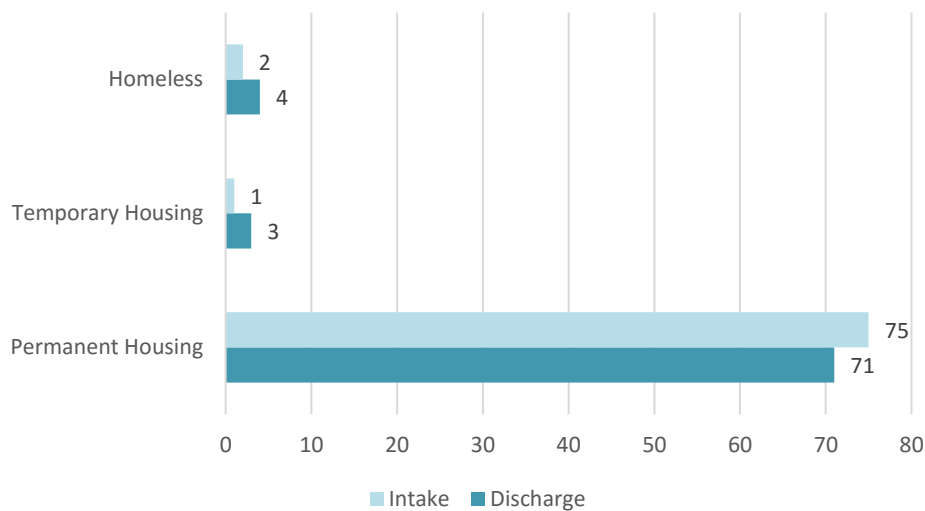
As shown in Figure 8, the program served a majority of participants that reported having permanent housing. However, four individuals moved from permanent housing at the start of programming to temporary housing (two) and homeless (two) at discharge.

Program Staffing

The Triple R Project staff consisted of one program manager and three staff who provided direct services to clients. They each had areas of specialization, which allowed them to address their clients' different needs. For example, one staff member had experience managing sober living homes for adults, another was previously working for the Ventura County Juvenile Specialty Court, and the other held expertise in facilitating groups such as MRT. One of the goals of the program was to ensure that staff have received training in evidence-based and promising practices. ICFS trained staff in the following skills:

- Moral Reconation Therapy (MRT)
- Motivational Interviewing

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[11] There were a total of 163 participants served throughout the entire program, however there is incomplete data on housing status for participants. Therefore, the N for housing status is less than the number of clients served.

- Mindfulness
- Restorative/Healing Circles
- Trauma Informed Care
- Racial and Ethnic Disparities

The composition of the staff was a critical piece towards the success of the program. According to program participants and their families, staff were the "glue" of the program. Most program participants and family members who participated in the evaluation similarly shared that the Triple R staff demonstrated a commitment to serving participants and their families, building trusting relationships, and cultivating a safe, supportive environment.

> *"[My case manager] is committed…It's a really different kind of way to work with people. We need this kind of program all over Oxnard. People and kids like us, we need someone to fall back on when we're struggling, we need a friend or someone we can turn to as a friend."*
>
> *- Triple R Adult*

Participants appreciated the casual, friendly manner in which staff interacted with them, speaking of their case manager as someone who truly cared about them and talked to them as they would talk to a friend. One participant compared the Triple R program staff to staff in other programs: *"It's like you're talking to someone you've been talking to for years; that's what I like about this program. Other programs are too formal."* Additionally, most program staff grew up in Oxnard, therefore they understand the challenges facing participants and their families and provide targeted support based on their awareness of community resources. In this vein, one participant shared, and many echoed the sentiment: *"They've been through what we've been through, they relate to us."*

> *"[My case manager] didn't talk to me like someone who's just trying to get people in a program – he talked to me like he was concerned about what was going on in my life, and helping me and trying to push me to get what I want."*
>
> *-Triple R Participant*

Staff also reflected that program staffing needs were underestimated at the beginning of the project. Given the intensity of the services, as well as the importance of supporting families' needs in addition to youth participants' needs, program staff recommended that the program be staffed with a full-time program manager, three full-time case managers, an additional full-time case manager to work directly with families, and a part-time assistant to support data entry and administration.

Participant Satisfaction

As discussed in the sections above, Triple R participants expressed high levels of satisfaction with the program, including the staff and the program services. Participants spoke about the program as their "second family," describing how Triple R staff set up a Thanksgiving dinner for families who may not have had a Thanksgiving meal.

"It's respectful, like our second family. They feed us, they celebrate with us."

-Triple R Participant

As shown in Table 6, out of the 56 participants who responded to the satisfaction portion of the online survey, all items measuring satisfaction toward the program were rated as "mostly true" or "very true" by more than 80% of respondents.

Table 6. Triple R Participant Satisfaction

	Not at all true	A little bit true	Mostly true	Very true
Staff listen to me (n=56)	4%	5%	**32%**	**59%**
Staff understand me and what I am going through (n=55)	7%	9%	**33%**	**51%**
The Triple R Project has helped me build skills that will help me in my future (n=56)	4%	13%	**34%**	**50%**
Overall, I like participating in the Triple R Project (n=56)	4%	9%	**29%**	**59%**

Community Trainings

In addition to providing clients with direct services and community referrals, Triple R provided community organizations with capacity building trainings to increase their ability to foster healthy communities. ICFS delivered five community trainings in English and Spanish to over 25 public and nonprofit agencies, with a total of 135 attendees spanning positions including CEOs and executive directors, therapists and case managers, school counselors, public health nurses, and community outreach workers and promotores. The full list of community trainings and attendees is presented in Appendix B.

Outcome Evaluation Results

As previously mentioned, the Triple R Project aimed to increase protective factors for program participants in order to prevent and/or reduce gang involvement and involvement in the justice system. As such, the evaluation sought to assess participant outcomes in the following areas: **personal development, pro-social relationships, self-sufficiency, and justice system involvement**. In order to evaluate participant outcomes, RDA collected quantitative data from a quarterly client status assessment tool[12] and qualitative data from focus groups and interviews with participants, program staff, and families.

Key Program Outcome Findings

- Participants experienced an increased sense of **motivation**, **future orientation**, and sense of **responsibility**.
- Participants and their families reported **improved relationships** and communication.
- Participants demonstrated an **increase in pro-social behavior** and positive relationships with peers and adults.
- Participants exhibited an increase in **emotional regulation**, **introspection**, and **self-awareness**.
- A number of participants **enrolled in school** and **obtained employment** with the assistance of their case manager.
- Overall, participants experienced a **decrease in justice system involvement and gang affiliation** after participating in the program.

Personal Development

Triple R participants, parents, and case managers all perceived that participants have experienced positive, personal development outcomes including improved self-esteem, increased motivation and future orientation, and improved control over their emotions.

Interviews conducted with clients and their parents indicated that many clients experienced positive transformations due to their participation in the Triple R Project. Youth indicated that since participating in MRT, they began to respect their parents more, saw the importance of telling the truth, and changed their behavior. Adult participants also shared how after participating in the program, their perception of others began to change and it helped them to have a more positive outlook on life. "*[The Triple R Project staff] have*

> *"My son has changed a lot. He's more respectful. He doesn't say bad words. He helps people. He helps with his siblings, gives them advice about not drinking, not doing drugs."*
>
> -Triple R Parent

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[12] Program staff faced challenges administering the client status assessment tool quarterly, and data collection was incomplete. Therefore, RDA measured client status changes using participants' first and last program assessment.

helped me to trust people, I trust others more. I see that I'm doing something better with myself," shared an adult participant.

Participants also demonstrated an increase in hopefulness, self-esteem, and motivation towards achieving personal goals. For instance, participants shared their determination to either graduate from high school, enroll in college, obtain a job, and/or continue to grow and mature as a young adult. Participants also shared the value of regulating their emotions in response to life circumstances. For example, prior to programming, participants shared the challenges that they faced with expressing themselves in an appropriate manner to their peers, family members, and adults within their lives. However, participation in the MRT programming and individual relationship-building with their case managers helped Triple R participants shift their thinking and behavior from a negative perspective to a more positive constructive outlook.

Comments from Triple R Participants

"[MRT] has been helping me with a lot of things, like being honest and being respectful and owning up to stuff. It helps me think more positive than the way I used to think."

"I came here to change myself. Ever since I came here, my anger issues haven't been that bad. I know how to control myself; it helped me change the way I am in life."

"Once I'm done with [MRT], I'm going to be a professional, a different person."

"I think about the future more – [the program] made us think about what we want to do, what we want to be."

"I actually feel like I have a future now, like I can look forward to one. I look forward to giving my kids a better life than I had."

Client Case Study: Amber*

When Amber began Triple R, she had low self-esteem and little respect for others. She described herself as angry, careless, and defiant of authority. Her mother was incarcerated and she lived with her grandparents, who were her primary caretakers. Most of her friends were negative influences, and she had little interest in setting goals for herself.

> *"I got kicked out of school in 8th grade. Me and my friend wouldn't go to school, we would just walk around. We would do beer runs. The cops even looked for me at one point…."*

During the MRT support group, Amber began to see herself as an independent person and capable of ambition. She became determined to finish high school, find a job, and eventually attend college. She began to see how her decisions affect her future and her family. Amber's relationship with her grandparents improved as she learned how to be more respectful and compassionate. After participating in MRT, Amber described herself as caring, responsible, and mature.

> *"Once I started MRT they showed me I'm my own person and if I want, I can set goals and succeed in life."*

Amber's grandmother reflected on the help that the Triple R case manager has provided to both of them:

> *"I meet with them whenever they drop her off and I can talk with them one on one. I talk to them about Amber and ask them if they notice any changes in her."*

Unfortunately, in a follow-up interview with Amber in fall 2017, she shared some new challenges. Her mother had been released from jail, and it was difficult for Amber to see her mom struggle with addiction. Amber was no longer working and she had been expelled from school. She lost confidence and was struggling emotionally. Although she was discouraged by her situation, she believed that by working with her case manager she could enroll in another school and get back on track to the goals she had set out for herself.

*Not her real name

Pro-Social Relationships

Across all focus groups and interviews, Triple R case managers, family members, and participants reported improved positive relationships rooted in honesty and trust. According to case managers, cultivating strong, trusting relationships with participants was key to the program's success. Establishing trusting relationships with youth participants helped to bridge the gap between youth and their parents and created opportunity for positive transformation in participants' relationships with their family members and their peers. Parents of Triple R participants overwhelmingly shared that their relationship with their child, as well as their child's relationship with their siblings and teachers, have vastly improved as a result of participating in the program. For example,

> *"Before, I couldn't talk to my parents without cussing them out. Now, I talk to them like normal."*
>
> -Triple R Youth

several parents described how their relationship with their child has transformed by one that was characterized by yelling and disrespect to one where their child opens up emotionally and volunteers to contribute to family chores. Youth themselves described getting along with their parents better and having more supportive relationships with their siblings.

For youth, MRT groups helped facilitate a supportive environment for participants to engage, encourage, and hold each other accountable. Throughout focus group interviews, youth and adults shared that the MRT group and their case managers became like family to them. These strong relationships were motivating factors for participants to make positive changes. One participant shared, *"They push you to do good in group all the time. If you see other people doing good, you'll try to do good and stay out of trouble."*

For adult participants who were previously more entrenched in the justice system than the youth participants, the positive relationship they developed with their case manager served as a gateway to transform their way of operating in the world around them. Participants described feeling more trusting of others, more motivated to change, and less inclined toward substance abuse as a form of coping—significant accomplishments for individuals who have experienced serious trauma in their lives.

> *"I was always the black sheep of my family. [My case manager] told me, 'If you don't trust yourself, how are you gonna trust your friends?' He said to trust—that got me."*
>
> -Triple R Participant

Client Case Study: Jorge*

Before Triple R, Jorge was shy and spoke with his eyes down. He replied in short, one-word answers and he was struggling in school. He expressed stress as anger and treated his family disrespectfully. When he joined Triple R, Jorge's case manager helped him enroll in a new school with independent study. It was a better fit for him, and his teachers began to notice changes. He joined the MRT support group at Triple R and felt a sense of camaraderie as he heard stories from other youth experiencing anger issues and family problems. Jorge began to learn how to control his anger and funnel negative energy into healthy behaviors like exercise. He successfully graduated high school and his demeanor significantly changed. During a follow-up interview in fall 2017, Jorge made eye contact, smiled, and opened up about his experiences. He said the Triple R program had made him a better person.

> *"If I had a problem, [Triple R] was always there. It taught me how to be a better person and deal with life and any situation."*

Jorge began to see possibilities for his future and his perspective changed. He made changes to how he interprets the world around him and he is confident that he will continue on a positive path now that he has graduated from MRT. He enjoys mentoring his younger brother and encourages him to be a good person.

*Not his real name

Triple R staff reflected that the healing circles they were able to conduct were well received by program participants and their family members, and aided in repairing family relationships.

> *"The healing circles are really powerful. The purpose is to help the youth identify their needs and what type of support they need. It's helpful to see parents be able to listen to the youth…. It gives them a safe space where they can communicate honestly." – Triple R staff*

Staff observed that participants were impressed by how many people showed up to support them. After one healing circle, the family members voiced that the process was so valuable that they would like to repeat the process.

A potential unintended consequence of the program is that in motivating participants to stop spending time with peers who are poor influences, participants seem to have lost much of their social support. As one youth shared, *"I completely stopped talking to my friends; I stay home now. I look forward to working instead of being out in the street."* Youth often turn to gangs because they are seeking social support that they are not receiving elsewhere in their lives. However, if those relationships are not replaced with new, positive friendships, youth risk being isolated without important peer support.

Client Case Study: Celia*

Celia was referred to Triple R in April 2016. She had a history of fighting in school, suspensions, and anger issues. Celia comes from a multigenerational family with gang involvement and is gang affiliated. Due to her parents' gang history and current substance use, her grandparents have legal custody of Celia and her sisters. When Celia began the Triple R Project, she was guarded, hesitant to talk, and demonstrated no eye contact. She had signs of depression, low self-esteem, and anxiety. During the program, her 16-year-old sister was arrested for a drive-by shooting (she was the driver and led police on a chase). There was a lot of resulting chaos in her home and Celia wanted to be able cool down from the turmoil.

Celia has been with the Triple R Project for nine months now and is on Step 10 of MRT. She has been so consistent with MRT that she is now a leader in the group. She is one of the Triple R Project's Youth Navigators. When Celia started trusting the process and her case manager, both her mood and way of thinking shifted. She no longer showed signs of depression, low self-esteem, nor anxiety. As a result of her participation in the program, she was referred to pro-social activities, employment services, resources for her and her family, has volunteered at our local food pantries, and was part of a Clean Up Day with the City of Oxnard.

As a Youth Navigator Celia accompanied staff to outreach events, and completed presentations to prospective participants. She provided peer support and referred other youth to the program. She was not in any fights during her time in Triple R.

Not her real name

Self-Sufficiency

In addition to furthering participants' personal and relational development, the Triple R Project supported participants' stability by helping link them to school and employment, along with other resources to support their basic needs. The Triple R project was designed to provide case management focusing on personal growth and pro-social development as well as on traditional elements of case management including referrals to outside resources. Below are results from participants' assessments in the areas of education and employment.

Education

Figure 9. The majority of program participants were enrolled in K-12 school before and after program completion. (N=119)[13]
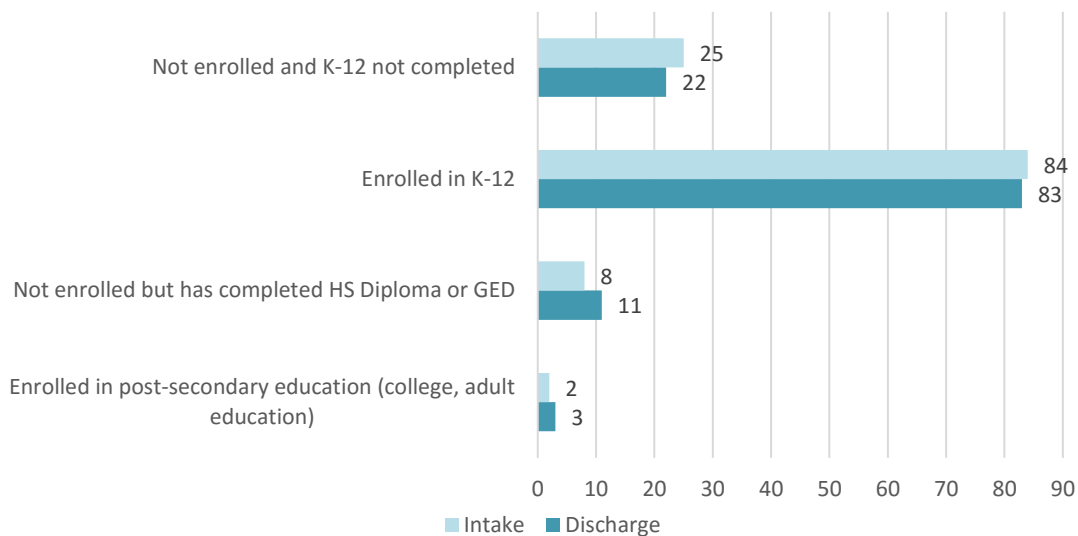
As shown in Figure 9, the results demonstrate that the Triple R Project met its "at promise" target population, given that majority of the program participants were enrolled in a K-12 school at intake and after program completion. At the end of programming, there were three fewer participants not enrolled and K-12 not completed, three more participants completed their high school diploma or GED, and one more

> *"I have seen changes [as a result of Triple R]. Simple things like smiles, a kid's demeanor, being less defensive. They have opened up and now have developed trusting relationships [with program staff]. We also have some kids that are special needs and they are usually with one group of students but after working with Triple R…they are more willing to expand to other classes and interact with more students. They realize that more people care."*
>
> -School Counselor

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[13] There were a total of 163 participants served throughout the entire program, however there is incomplete data on education status for participants. Therefore, the N for education status is less than the number of clients served.

participant enrolled in post-secondary education. While a majority of the Triple R participants were in school and remained enrolled during the program, interviews with Triple R staff and a high school counselor illuminated the importance of the Triple R program in supporting students academically. According to a local high school counselor, the Triple R program has been a great resource for students that face challenges related to truancy, behavior, and failing grades. Participants reported that Triple R staff helped enroll them in school and helped them find more appropriate school placements (such as continuation high schools), even going so far as to help parents fill out school enrollment forms.

Employment

Figure 10. While the majority of participants were not looking for employment throughout the program, 14 more participants were employed at program discharge. (N=119)[14]
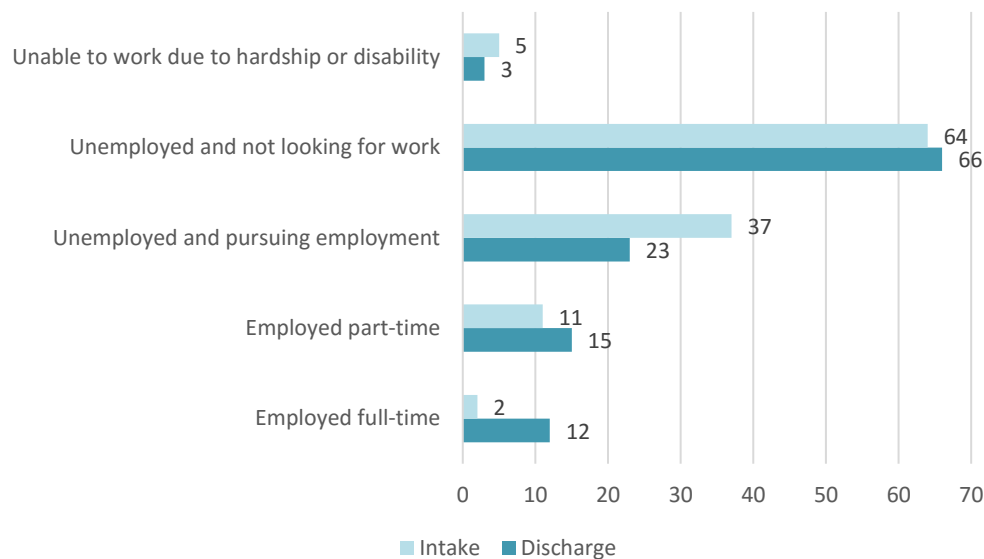
Similar to findings presented in the education section, a majority of program participants were unemployed and not looking for work throughout programming (see Figure 10); this is likely attributed to the fact that most program participants were enrolled in a K-12 school. Program assessment data show that from intake to discharge, 10 more participants had a full-time job and four more participants had a part-time job. The positive change underscores findings from our qualitative data surrounding participants' personal goals related to acquiring a job. Participants shared that case managers brought them around the city of Oxnard to look for and apply for jobs, helping them make introductions to store managers and fill out job applications.

[14] There were a total of 163 participants served throughout the entire program, however there is incomplete data on employment status for participants. Therefore, the N for employment status is less than the number of clients served.

> ## Client Case Study: Steven*
>
> Before Triple R, Steven used drugs recreationally and hung out around peers who used drugs. When he began to lose significant weight, his mother decided to look for help for him. She found Triple R and Steven decided to join because he wanted to better himself and change his life.
>
> *"I joined because I was tired of doing what I was doing and I wanted a job."*
>
> Steven built a strong relationship with his case manager and together they found a job for him. He bought a calendar and learned how to manage his time and income. He learned to open up to his parents and their relationship significantly improved. He even began looking into trade schools and eagerly thought about goals for the future.
>
> *"Things are a lot better at home. When I was the old me, I never cared to do anything with my parents. Now, I am actually talking to my parents rather than just 'one-wording' them."*
>
> Before participating in Triple R, Steven described himself as, "slick, quick, scumbag, and lazy." Afterwards, he described himself as "awake, more happy, and kinder." In a follow up interview with Steven in fall 2017, he shared that he was on track to enrolling in a technical college for underwater welding. He was still employed and was no longer taking synthetic drugs. His was thinking of long-term goals, and planned to move to Humboldt and buy a home after college.
>
> **Not his real name*

Connection to Other Resources

Although program staff were able to provide resources and referrals to existing services for participants and their families, program staff also noted that staffing capacity proved to be a challenge to meet the needs of all participants served. During interviews, staff felt that they did not have enough time to devote to case management to assist their clients adequately. In addition, staff commented that if they had more time, they would be able to provide support to clients' families (parents, siblings, etc.), which would further benefit the client and their family.

Gang Association and Justice System Involvement

The Triple R Project aims to cultivate positive, personal transformation as a means for impacting an individual's relationship to their family and peers, and in the long run, reduce participants' contact with the juvenile and criminal justice systems. In order to measure participants' justice involvement at intake and at discharge, RDA collected data in the following domains: participant gang affiliation, criminal justice involvement, and probation supervision status. **Findings from quantitative and qualitative data demonstrate that overall, participants have limited to no gang affiliation, little to no contact with the justice system, and most are not on probation.**

Gang Affiliation

Figure 11. More program participants changed their gang affiliation status to "no known gang involvement" compared to any other category. (N=120)[15]
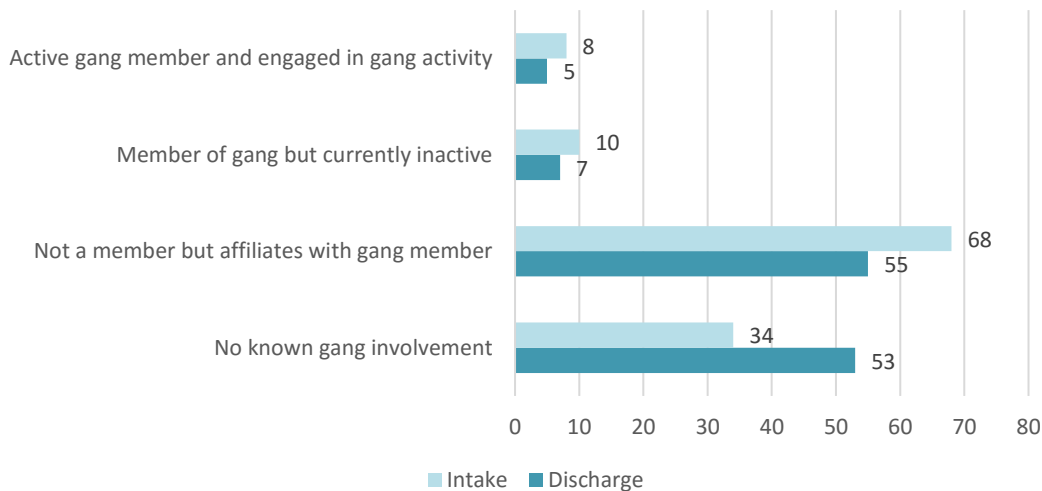
Upon enrolling in the Triple R program, a majority of participants self-identified as affiliating with gang members, but not themselves a gang member. This finding underscores that the Triple R Project did meet its target population of youth or adults that have had exposure to gang activity but are not yet heavily entrenched in gang activity. As Figure 11 shows, there were 34 participants that identified themselves as having no gang involvement at the time of intake; however, after completing programming, 19 additional participants reported having no gang involvement, increasing the final count with no gang involvement to 53 participants. Additionally, there was a reduction in the number of participants that self-identified as an "active gang member" or a "member of gang but currently inactive" post programming.

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[15] There were a total of 163 participants served throughout the entire program, however there is incomplete data on gang affiliation status for participants. Therefore, the N for gang affiliation status is less than the number of clients served.

Not only does the quantitative data yield positive results, but interviews with parents of participants also demonstrate a shift in participants' involvement in gang activity. Many parents who participated in the focus groups shared that their children have stopped hanging out with gang members. A number of parents shared that in addition to observing changes in their children's social habits, their children have also curbed their drug use, which parents associated with their children leaving their anti-social peer groups.

"The program has changed my son's way of thinking. I've noticed he feels more important now; that replaced the gangs, which in the past made him feel important. Now, he feels other things are important, things like coming here and getting a job. When kids don't feel important, that's when they turn to gangs."

-Triple R Parent

Justice System Involvement

Figure 12. A majority of participants had no contact with the justice system in the 90 days prior to their assessment. (N=119)[16]
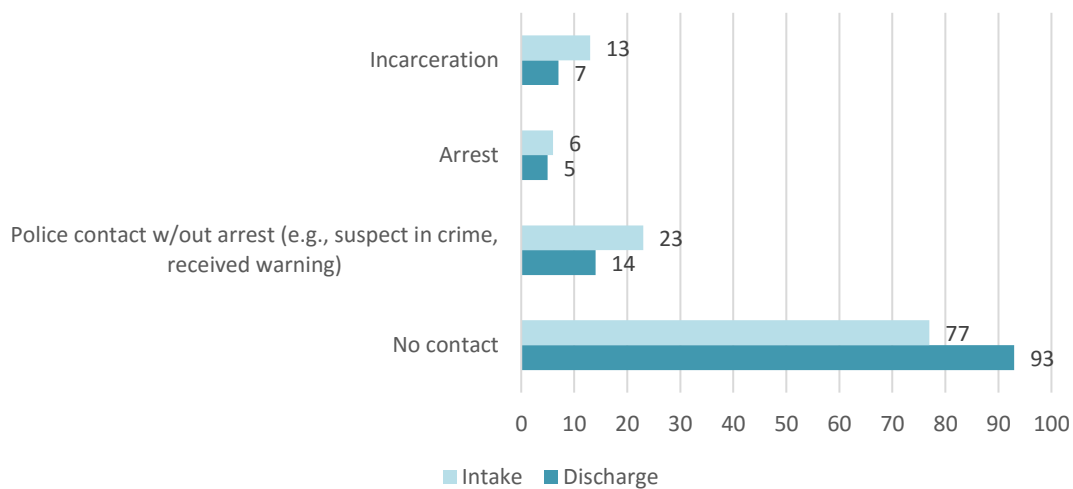
A majority of program participants did not have any contact with the justice system in the 90 days prior to intake or in the 90 days prior to discharge. Still, as shown in Figure 12, at program discharge there were 16 more participants who had no contact with the justice system in the past 90 days (n=93) compared to at intake (n=77). In line with this data, adult and youth participants discussed in focus groups that since participating in the Triple R program, they were less likely to engage in activities and/or spend time with peers that could lead to contact with police.

[16] There were a total of 163 participants served throughout the entire program, however there is incomplete data on criminal justice involvement for participants. Therefore, the N for criminal justice involvement is less than the number of clients served.

Probation Status

Figure 13. A majority of participants were not on probation for over 90 days before and after participating in the Triple R program. (N=119)
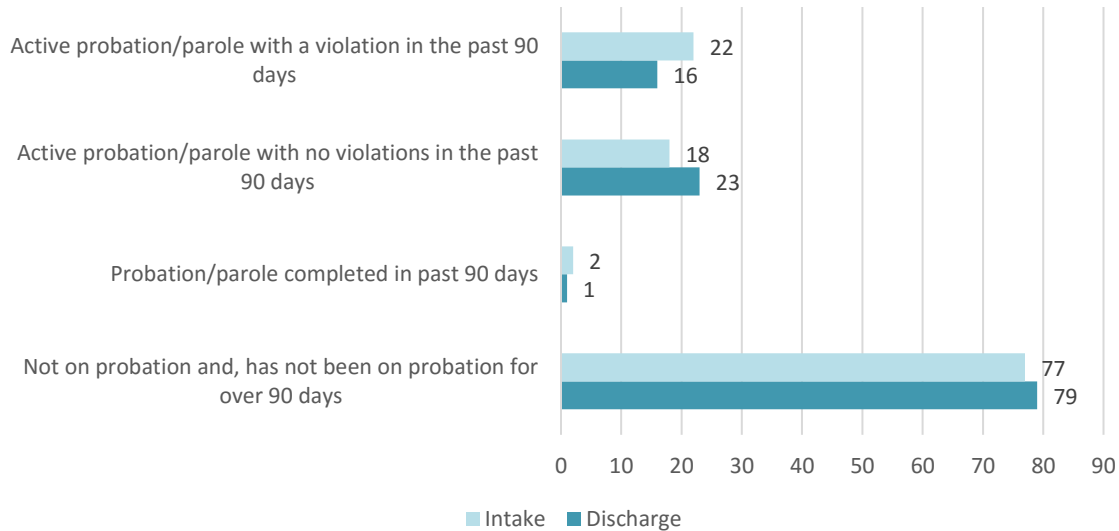
As Figure 13 shows, the majority of participants were not on probation and had not been on probation for the past 90 days at intake (n=77) and after completing services (n=79). The greatest change in status between intake and discharge was found in the number of participants on active probation/parole

> *"[The Triple R Program] is a good resource for our unit. This program is meeting a need and a population that doesn't really speak for themselves that they want to get out of their current situation, so if we can sway anyone away from [gangs] it's good."*
>
> -Probation Supervisor

supervision who had a violation in the past 90 days. Upon discharge, six fewer participants had a probation/parole violation in the past 90 days. Qualitative data from interviews with the Probation Department also highlight positive effects of the Triple R program as it relates to probation involvement. According to a representative of the Probation Department, the Triple R program has filled a need for early intervention programs for gang involved or affiliated individuals.

<div style="background-color: #d9e6c8;">

Client Case Study: Edgar*

Edgar was referred to Triple R for behavioral issues, substance abuse, and high-risk gang involvement. He was expelled from school for possessing a knife. His mother stated that she was distraught. He was pending two charges, one for taking the knife to school and the other for tagging. It took the Triple R case manager visiting the home twice before Edgar came out of his room. He presented himself as standoffish, defiant, demonstrated no eye contact, and barely spoke with staff. He reluctantly agreed to participate in Triple R. His mother asked for assistance with enrolling him back into school; he had not been in school for a couple of weeks.

During the assessment process, Edgar's goals were to catch up on credits, as he wanted to be eligible to obtain a work permit and re-enroll in school. With the assistance of his Triple R case manager, Edgar was able to re-enroll in a continuation school. Edgar's case manager did much of the legwork to get Edgar back in school: he picked up the school application, assisted Edgar's mother with filling out the application, and turned in the application—Edgar's mother was not able to take time off work to assist with this process as she had exhausted her time off to attend her son's court dates. Since entering the Triple R Project, Edgar was accepted to school and he and his mother attended the school orientation. Since participating in Triple R, Edgar has completed probation, continued in school, volunteered to feed the homeless, and graduated MRT. Edgar is now a Youth Navigator and the student leader of his MRT group.

Not his real name

</div>

Community Training Results

RDA designed and ICFS administered a retrospective post-survey for the capacity building trainings in order to measure perceived change in knowledge and skills among training attendees. A total of 80 surveys were received. Based on the survey, we found that:

- 91% of respondents reported their **knowledge of the specific skill/protocol/topic presented in the training** to be high or very high following the training, compared to just 18% before the training.
- Most respondents rated their **awareness of how the skills could be used with individuals and families they serve** as low or medium before the training. The majority of respondents ranked their awareness as high or very high after the training.
- Over 85% of respondents rated their **comfort level in providing services to individuals and families using the skills covered in this training** as high or very high after the training, compared to 24% before the training.

Training attendees noted that they appreciated that hands-on exercises provided them with concrete skills that could be incorporated into their existing services to help students, staff, parents and community members.

Conclusions

The Triple R Project aimed to prevent and reduce individuals' contact with the juvenile and criminal justice systems by cultivating protective factors and addressing risk factors.[17] Targeting "at promise" youth who demonstrated motivation to make positive changes in their lives, the Triple R Project sought to enhance resilience factors such as a positive self-regard, high self-esteem, optimism, motivation, and an internal locus of control. The program additionally aimed to increase protective factors such as pro-social relationships with family and peers and connection to educational and employment opportunities. These protective and resilience factors are known to enhance the likelihood of positive outcomes in the future.[18]

In the relatively short program duration, Triple R participants showed improvements in their self-esteem, motivation, emotional regulation, interpersonal relationships, and school engagement. Participant outcomes measured at discharge suggest that participants experienced a decrease in gang association and activity, as well as decreased contact with the juvenile and criminal justice systems for participants who had previous justice involvement. In addition, while most youth participants were not involved in the justice system directly, a number of participants voiced that they had siblings or other family members who were incarcerated. Given the positive impacts of the program on personal and pro-social development, the program may help to break the intergenerational cycle of justice system involvement.

Along with positive perceptions of program outcomes from participants, parents, and staff, the program received promising feedback from key stakeholders. Program staff and partners from local schools and the Probation Department reflected that the Triple R Project filled a crucial need in the community for early intervention and prevention programs related to gang involvement.

> *"There were 25 homicides in Oxnard this year and the city needs programs like these…the violence is really affecting the kids. The kids are looking to connect because their parents are out working so they go out into the streets and find the wrong people."* – Triple R Staff

> *"The earlier we can intervene, the more helpful it is…. My understanding is that [the Triple R Project] is targeting youth that are at risk of being gang involved, and that is a necessary program for the population that we see. Probation serves all youth that come to our attention and we are trying to make an effort to work with youth that are more entrenched in the system. Having a program like this—having informal handling for youth that don't go to the court—would be a benefit. [Triple R] is kind of like a diversion program that works to keep youth out of the system.* – Probation Leadership

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[17] Sanders, Mavis G. (2012). Schooling Students Placed At-Risk. New York, NY: Routledge.
[18] McIntyre, K., White, D., and Yoast, R. (1990). Resilience among high risk youth. Madison, WI: Wisconsin Clearinghouse

Lessons Learned

The following are key lessons learned that underscore programmatic strengths and opportunities for improvement.

1. **Program targets should take into account the level of intensity and duration of services.** The program did not meet its target numbers served, in part because the original target numbers were unrealistic based on the level of intensity of services provided. For example, staff spent significant time transporting youth to and from the program. Program targets should be set in collaboration with program providers based on the program's service delivery model.

2. **Outreach with local schools and the probation department is effective.** The program's outreach strategy evolved over the course of implementation. Initially, the program contracted outreach to outside partners, but the program and outreach staff struggled to align their vision and approach to outreach. Ultimately, outreach conducted directly by program staff and partner organizations such as local schools and the Probation Department attracted the most appropriate referrals, but the program ended before the positive relationship with the school district could fully come to fruition. As a physical location where children are already present, school sites offer a large pool of potential program participants and facilitate convenient access to the program. Repeated and regular contact with referring organizations, including law enforcement and community-based organizations, is a helpful strategy to maintain consistent referrals.

3. **The target population is appropriate, however there may be opportunity to expand the focus to younger youth.** Youth and adults served were at-promise and demonstrated a commitment to positive change. However, reaching and engaging adult participants in the MRT program was difficult due to personal scheduling constraints (e.g. work schedules). Seeing the potential for early intervention, program staff and stakeholders recommended that the program expand its reach to a younger population (e.g., youth in middle school).

4. **The ability to provide direct transportation, along with meals and incentives, are key to consistent participation.** Triple R staff had a work vehicle and regularly transported youth to and from MRT and case management services, which made the program accessible to more individuals. Program staff also emphasized that providing meals and snacks to youth, and at times their parents, was an important incentive for participation that not only served as a reward, but also met the needs of many families who struggled financially to make ends meet.

5. **Services provided to families create a network of support for participants.** Case managers supported families by providing referrals to additional services, such as pro bono legal aid or mental health supportive services, when needed. A family support worker would enable the program to improve the stability of the whole family, thereby aiding families in caring for their children and ensuring participants' resilience beyond program participation.

6. **Program staff members are the glue of the program.** Program Directors, Program Managers, and case managers cultivated a familial bond within their team, which helped them develop personal, trusting relationships with program participants. The Triple R Program hired case managers that are

bilingual and from the city of Oxnard, which also contributed to building authentic relationships with participants; these positive relationships were key to participants' success in the program. Given the intensity of the program services, program staff recommended that the program be staffed with a full-time program manager, three full-time case managers, an additional full-time case manager to work directly with families, as well as a part-time assistant to support data entry and administration.

7. **Voluntary participation can create challenges for program retention.** Given that participation was not mandated, engaging youth to participate regularly was sometimes difficult. Program staff attempted to reduce barriers by providing transportation, created incentives by providing food, and collaborated with local schools and the Probation Department to create messaging on the importance of program participation for youth.

As a new program, there were inevitable challenges that arose throughout the program implementation period. Despite these challenges, the Triple R Project demonstrated positive strides in reaching its target population, providing individual case management and group services to participants, and developing a strong team of staff. While the project duration was too short to assess long-term impacts on justice system involvement, the personal and relational transformation experienced by project participants indicates that the Triple R project model holds promise as an effective approach to gang and violence prevention.

5. Triple R Project Logic Model

Inputs	Activities	Outputs	Short-Term Outcomes	Long-Term Outcomes
Partnerships: • Interface Children and Family Services • Probation • Community Based Organizations • County agencies • Schools **Departmental Readiness:** • Qualified staff • Supervisory structure • Professional development opportunities • Data collection system **Program Design:** • Evidence informed practices • Trauma informed • Continues quality improvements **Knowledge and Experience:** • Innovative • Specialized expertise • Community leaders	**Direct Services:** • Outreach and engagement • Moral Reconation Therapy (MRT) • Case Management • Trauma Treatment • Family and Relationship Services (e.g., Healing Circles) **Community Trainings:** • Community Resilience Model (CRM) • Moral Reconation Therapy • Motivational Interviewing • Trauma • Racial and Ethnic Disparity	**Direct Services Data Collected:** • # of Referrals • # of Intakes • # of Completions **Community trainings Data Collected:** • # of Participants/ Agencies in attendance • # of Events • Educational documents created	• Stronger collaborative partnerships (Probation, County agencies, CBOs, VCMC, faith-based community) • Attitudinal change and decreased criminogenic thinking • Reduced gang interaction/involvement • Decrease in incidences of community violence • Increased attendance at work and school • Increased interaction with family members & pro social supports • Decreased number of criminal associations • Increased community awareness of reasons for violence and gang involvement, trauma and resilience, and possible ways of intervening • Increased number of community providers trained in evidence based practices that meet client needs	• Interruption of inter-generational gang involvement • Decreased gang activity in community • Increased sense of safety in community • Increased family stability • Increased employment rates • Decreased jail population **Impact: Safer communities resulting from less violence and crime**

Appendix A: Program Referrals

The Triple R Project has provided clients with a variety of linkages to resources in the community to help them with any additional needs. Provided below is a complete listing of community agencies that clients have been referred to by the Triple R Project.

- Adult Education
- Battleground Inc.
- Boys & Girls Club of Oxnard & Port Hueneme
- CalFresh/Food Stamps
- Child Development Resources
- City Impact - Parent Project
- City Impact - PPP Parenting Classes
- Clínicas del Camino Real
- Community Action of Ventura County
- Department of Rehabilitation
- DMV
- Ed Geis, tutor
- Food Share
- ICFS Domestic Violence Department
- ICFS Mental Health Department
- ICFS Runaway Youth Shelter
- Job / Career Center (JCC)
- LA Dream Center
- Medi-Cal

- Opportunities for Learning Charter School
- Oxnard City Corps
- Oxnard College
- Oxnard Dream Center
- Oxnard Police DRAGG (or Drag Racing Against Gangs & Graffiti)
- Oxnard Rescue Mission
- Oxnard PAL (or Police Activities League)
- Pirate Staffing
- Select Staffing
- Social Security Office
- Tattoo removal clinic
- TAY Tunnel
- USA Staffing
- Ventura Co. Alcohol & Drug Programs
- Ventura Co. Human Services Agency
- Ventura County Behavioral Health
- Vista Real Charter School
- WIC (Women, Infant & Children) Food & Nutrition

Appendix B: Community Trainings Provided

In addition to providing clients with direct services and community referrals, Triple R provided community organizations with the following capacity building trainings to increase their ability to promote healthy communities.

Table 2. Triple R Project Facilitated Community Trainings

Training	Date	Agencies in Attendance	# Attendees
Moral Reconation Therapy	February 2016	• City Impact • Coalition for Family Harmony • Community Action • Oxnard School District • Khepera House	20
Motivational Interviewing	February 2016	• Ocean View School District • Oxnard School District • Khepera House • Prototypes Women's Center • City Impact • City Corp	22
Community Resiliency Model Train the Trainer	April and May 2016	• TAY Tunnel • Lideres Campesinas • MICOP • Ventura County EAP • Public Health • Promotoras • Boys and Girls Club	20
Navigating the Tides of Trauma	June 2016	• Probation • Kids and Families Together • Tri-Counties Regional Center • Community Coalition • Pacific Clinics • Aspiranet • The Coalition for Family Harmony • Channel Islands Social Services	59
Racial and Ethnic Disparity	July 2016	• Office of Youth Safety • Boys and Girls Club • Oxnard Housing • City Council • Oxnard Police Department • Young Life	14
		Total:	135

Appendix C. Quarterly Client Status Tracking Tool

Client ID:_____	Date of Assessment:_____

Instructions: Please complete this form at client intake, quarterly, and upon client completion/removal from the Triple R Project program

Employment status: Please indicate which best describes the client's current employment status.

Unemployed and not looking for work	Unemployed and pursuing employment	Employed part-time	Employed full-time	Unable to work due to hardship or disability

Notes:

Educational status: Please indicate which best describes the client's current educational enrollment status.

Not enrolled and K-12 not completed	Enrolled in K-12	Enrolled in post-secondary education (college, adult education)	Not enrolled but has completed HS Diploma or GED	

Notes:

Probation/parole status: Please indicate which best describes the client's current probation/parole status.

Active probation/parole with a violation in the past 90 days	Active probation/parole with no violations in the past 90 days	Probation/parole completed in past 90 days	Not on probation and, has not been on probation for over 90 days	

Notes:

Gang involvement: Please indicate which best describes the client's current level of gang involvement.

Active gang member and engaged in gang activity	Member of gang but currently inactive	Not a member but affiliates with gang members	No known gang involvement	

Notes:

Criminal justice system contact: Please indicate whether the client has experienced any of the following in the past 90 days.

Incarceration	Arrest	Police contact without arrest (e.g., suspect in crime, received warning)	No contact	

Notes:

Interruptions in program: Please indicate if the participant has not participated in the program over the past 90 days due to any of the following interruptions.

Family emergency	Interruption for unknown reason	No interruptions		

Notes:

Housing status: **Please indicates the client's current housing status.**				
Homeless	Temporary Housing (e.g., shelter, transitional housing)	Permanent Housing		
Notes:				

Appendix D. Participant Online Survey Questions

Criminogenic Thinking/ Emotional Regulation	Questions	Source *(see key below)*	In your opinion, how true are these things? Please mark the circle that matches with how true each statement is to you. *(1-Not at all true; 2-A little bit true; 3-Mostly true; 4-Very true)*
1)	I often get irritated when things don't go my way	Adapted from APA	
2)	I think before I act	Adapted from APA	
3)	When I see someone being treated unfairly, I feel sorry for them	Lerner	
4)	When I treat others unfairly, I feel badly about it	RDA	
5)	When someone hurts me, I want to hurt them back	RDA	
6)	It's ok to break the law if no one gets hurt	Casey	
7)	I know how to relax when I feel tense	Lerner	
8)	I stay away from people who might get me in trouble	DAP	

Sense of Hope and Wellbeing	Questions	Source *(see key below)*	In your opinion, how true are these things? Please mark the circle that matches with how true each statement is to you. *(1-Not at all true; 2-A little bit true; 3-Mostly true; 4-Very true)*
9)	I have goals and plans for the future	CHKS	
10)	I have confidence that I will be successful in the future	RDA	
11)	I have control over my future	RDA	

Community and Family Support	Questions	Source *(see key below)*	In your opinion, how true are these things? Please mark the circle that matches with how true each statement is to you. *(1-Not at all true; 2-A little bit true; 3-Mostly true; 4-Very true)*
12)	When I need help, I can find someone to talk with	CHKS	
13)	I have family members who give me help and support when I need it	DAP	
14)	I have friends who give me help and support when I need it	RDA	
15)	In my family, I feel useful and important	DAP	

Pro-social Attitudes	Questions	Source *(see key below)*	In your opinion, how true are these things? Please mark the circle that matches with how true each statement is to you. *(1-Not at all true; 2-A little bit true; 3-Mostly true; 4-Very true)*
16)	I don't let other people influence what I think	DAP	
17)	I accept responsibility for my actions when I make a mistake or get in trouble	Casey, DAP	
18)	I enjoy getting to know people from different places	Lerner	
19)	I like to see how much I can get away with without getting caught	Casey	

Personal Safety/ Health	Questions	Source *(see key below)*	In your opinion, how true are these things? Please mark the circle that matches with how true each statement is to you. *(1-Not at all true; 2-A little bit true; 3-Mostly true; 4-Very true)*
20)	I feel safe walking around my neighborhood	RDA	
21)	I feel safe walking around parts of my city/town outside of my own neighborhood	RDA	
22)	I feel that my chances of becoming a victim of a violent crime are high	RDA	
23)	I am able to solve problems without harming myself or others (for example by using drugs and/or being violent)	Youth Resilience Survey	

Key to Cited Surveys			
Shorthand	**Instrument**	**Developer**	**Availability**
CHKS	California Healthy Kids Survey Resilience & Youth Development Module (RYDM)	Greg Austin and Mark Duerr	WestEd http://chks.wested.org/
DAP	Developmental Assets Profile (DAP)	Search Institute	http://www.search-institute.org/surveys/DAP
Lerner	4-H Positive Youth Development Student Questionnaire Short Version	Richard Lerner et al., Tufts University	https://cyfernetsearch.org/sites/default/files/Positive%20youth%20development%20student%20short%20(10%20yrs%20and%20older)_0.pdf
Casey	Evidence 2 Success	The Annie E. Casey Foundation	http://www.blueprintsprograms.com/resources/AEC_Youth_School_Survey.pdf
APA	Diagnostic Criteria	American Psychiatric Association	http://www.psychiatry.org/psychiatrists/practice/dsm
RDA			Developed by RDA staff based on past experience