

# **Strong and Peaceful Families**

**Amherst H. Wilder Foundation**

*Annual evaluation report*

**AUGUST 2008**

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## **Acknowledgments**

The following staff from the Wilder Research contributed to the completion of this report:

Cheryl Bourgeois

Jacqueline Campeau

Phil Cooper

Jennifer Franklin

Louann Graham

April Lott

Ryan McArdle

Wayne Ramsden

Additional contributors include the staff of the Violence Prevention and Intervention Services, especially Megan Vertin.

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## **Program overview**

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Since 1981, Violence Prevention and Intervention Services (VPIS) through the Amherst H. Wilder Foundation has been providing community-based counseling, support, advocacy, and intervention services to children, adolescents, and adults who have committed, witnessed, or been the victim of family violence. In partnership with the Joint Domestic Abuse Prosecution Unit, a joint effort of the Ramsey County Attorney's Office and the Saint Paul City Attorney's Office (JPU), as well as Saint Paul – Ramsey County Public Health, VPIS developed the Strong and Peaceful Families program in January 2006. Select families with cases related to domestic violence in the Joint Domestic Abuse Prosecution Unit (JPU) are referred to the Strong and Peaceful Families program for case management and other services related to their health, safety, and other basic needs. Through the provision of case management and other services, the program strives to reduce the damaging effects of domestic violence on children and youth, and to stop the cycles of abuse that occur in families referred by the JPU.

## Overview of the evaluation

The evaluation of the Strong and Peaceful Families program is designed to explore two general issues: (1) program implementation; and, (2) the impact of services on families.

The process or implementation evaluation consists of documentation of Wilder- and community-based program referrals by the case manager, as well as rates of participation in various services and programs. Descriptive and behavioral information about the children receiving services is also collected using the Client Characteristics Checklist.

The outcome evaluation assesses the extent to which violence or abuse has been reduced in the lives of families and whether they have learned effective ways to enhance or increase safety, as perceived by the case manager. This information is collected from the case manager within one month of participant discharge from the Strong and Peaceful Families program. In addition, information about participants' progress toward achieving goals is also documented by the case manager. The case manager and participant set goals at intake, and progress towards these goals is updated approximately every 90 days.

In addition, select participant stories are presented. The stories illustrate families' challenges upon admission into the program, the range of services provided to the family, and the impact of the program on the participants.

The report includes information about participants from January 2006 through December 2007, although due to changes in the evaluation design, some information is only available for families served during 2007.

## Participants

During 2006 and 2007, approximately 84 families were referred by the Joint Domestic Abuse Prosecution Unit (JPU) to the Strong and Peaceful Families program. Of these referrals, a total of 33 families (33 women and 49 children) had contact with the case manager and were opened as participants. Twenty-one families were opened in 2006; 12 families were opened in 2007.

For a variety of reasons including canceled or broken appointments by participants, not all women and children go on to participate in an initial diagnostic assessment (DA) and/or receive further services. Of the 33 women opened as program participants, diagnostic assessments were completed for 32 women. A total of 31 families (31 women and 45 children) went on to receive services beyond an initial assessment in 2006-2007.

### Demographic characteristics

Demographic data were available for a total of 30 families, including 30 parents (all women) and 21 children (15 boys and 6 girls). The women served represented a range of racial/ethnic groups, including Black/African-American (56%), White (28%), American Indian/Alaska Native (4%), and Hispanic (4%). Participants' age ranged from 18 to 47, averaging 32 years of age (Figures 1-2).

The children also represented a range of racial/ethnic groups, including Black/African-American (64%), White (18%), and American Indian/Alaska Native (18%). Children's ages ranged from less than 1 year to 15, averaging 9 years of age (Figures 1-2).



## Participant history

A comprehensive diagnostic assessment, including physical and mental health history, was completed for a total of 17 women in 2006 and 15 women in 2007. Assessment data were not available for 2006 so only 2007 data are reported here. The following summarizes diagnostic assessment information for 15 participants from 2007. In some cases, only partial information was available.

### *Health and well-being*

Ten of 15 participants (67%) were in good health at intake; five (33%) were in fair health. The most common physical health problems were alcoholism (4 of 8), drug abuse (4 of 8), thyroid problems (3 of 8), and asthma (3 of 8). Few participants (4 of 15) had a history of substance abuse. One was in sustained full remission while three participants were in early full remission (Figure 3).

All participants had a history of physical and emotional abuse; 9 of 15 reported a history of sexual abuse and neglect. Seven of 15 participants reported having past experience with counseling; two were involved with counseling at the time of the assessment. The most common mental health disorders were Posttraumatic Stress Disorder (60%) and Major Depression (53%) (Figure 3).

Participant functioning was assessed using the DSM-IV Axis IV and V criteria. Most of the 15 participants (87%) were found to have economic or financial difficulties. More than half were having difficulties with housing (67%), primary support (53%) and social environment challenges (53%). Few were experiencing problems with the legal system or education (Figure 4).

Of the 15 participants assessed, two-thirds displayed either moderate (n=5) or serious impairment (n=5) in social, occupational, or school functioning. Four participants also presented with some impairment in reality testing or communication, or serious impairment in several important areas of daily life (Figure 5).

## 1. Participant race/ethnicity

	Women (N=25)		Children (N=11)	
	N	%	N	%
Black/African American	14	56%	7	64%
White/Caucasian	7	28%	2	18%
American Indian/Alaska Native	1	4%	2	18%
Hispanic	1	4%	0	0%

## 2. Participant age

	N	Range	Mean
Women	30	18 – 47	32
Children	21	<1 – 15	9

### 3. Medical and Mental Health History (N=8-15)

	N	%
<b>Physical health</b>		
Good	10/15	67%
Fair	5/15	33%
Poor	0/15	0%
<b>Medical history</b>		
Alcoholism	4/8	63%
Drug abuse	4/8	50%
Asthma	3/8	38%
Thyroid problem	3/8	38%
Cancer	1/8	13%
Diabetes	1/8	13%
Heart disease	1/8	13%
High blood pressure	1/8	13%
Birth defects	0/8	0%
Stroke	0/8	0%
<b>Substance use history</b>		
No history of abuse	11/15	73%
Early full remission	3/15	20%
Sustained full remission	1/15	7%
<b>History of victim of abuse</b>		
Physical	15/15	100%
Emotional	15/15	100%
Sexual	9/15	60%
Neglect	9/15	60%
<b>Suicide risk</b>		
Moderate to high	1/15	7%
<b>Mental health status</b>		
Posttraumatic Stress Disorder (PTSD)	9/15	60%
Major Depression	8/15	53%
Dysthymic Disorder	2/15	13%
Generalized Anxiety	1/15	7%
Bipolar Disorder	1/15	7%
Alcohol dependence, in remission	1/15	7%
Mood disorder	1/15	7%

#### 4. DSM-IV Axis IV Diagnosis: Areas of impaired functioning (N=15)

Area of functioning	N	% experiencing decreased functioning
Past or current victim of domestic abuse (physical, emotional, and/or sexual)	14/15	93%
Financial/economic	13/15	87%
Housing	10/15	67%
Primary support	8/15	53%
Social environment	8/15	53%
Occupation	6/15	40%
Legal system/crime	1/15	7%
Educational	1/15	7%

#### 5. DSM-IV Axis V Diagnosis: Global Assessment of Functioning Scale (GAF) (N=15)

Level of functioning	GAF score	N	%
Persistent danger of hurting self or others, or persistent inability to maintain minimal personal hygiene, or serious suicidal act with clear expectation of death	1 – 10	0	0%
Some danger of hurting self or others, or occasionally fails to maintain minimal personal hygiene, or gross impairment in communication	11 – 20	0	0%
Behavior is considerably influenced by delusions or hallucinations, or inability to function in almost all important areas of life	21 – 30	0	0%
Some impairment in reality testing or communication or major impairment in several important areas of daily life	31 – 40	4	27%
Serious symptoms or serious impairment in social, occupational or school functioning	41 – 50	5	33%
Moderate symptoms or moderate impairment in social, occupational or school functioning	51 – 60	5	33%
Some mild symptoms or some difficulty in social, occupational or school functioning. Generally functioning pretty well.	61 – 70	1	7%
If symptoms are present, they are transient and expectable reactions to psychosocial stressors. Patients in this range usually do not need mental health treatment, or if they need treatment, it would be expected to be very brief and focused on a specific adjustment problem.	71 – 100	0	0%

**Note.** Participant psychological, social, and occupational functioning is considered on a hypothetical continuum (scale=0 to 100) of mental health-illness.

# Family Characteristics

## Client Characteristics Checklist

Shortly after a family's enrollment in the Strong and Peaceful Families program, the case manager completes a Client Characteristics Checklist for the children. Using the 60-item checklist, the case manager makes observations about the child's personal and family functioning, physical and mental health, and behavior. Of the families enrolled in the Strong and Peaceful Families program in 2007, 28 children were assessed using the checklist. The children assessed ranged in age from 1 to 19 years, with an average age of 8 years.

### *Family stability*

Families were experiencing a range of challenges impacting family stability upon entering the program. Most of the households were headed by a single-parent (93%) and had experienced chronic economic distress (82%). Frequent changes in residence were also common (57%). At least two-thirds of the children had experienced parental separation or divorce (79%) and had a parent with a history of criminal activity (75%) or chemical abuse (68%). About 4 in 10 parents had less than a high school education (Figure 6).

Despite these challenges, most children assessed did have strong connections to extended family (89%), and two in three children (68%) had a strong positive relationship with an unrelated adult.

### *History of abuse and violence*

Almost all of the children assessed (93%) had witnessed violence between their parents at some point, while unresolved conflicts between parents was currently happening in about 8 in 10 families. Nearly 40 percent of the children assessed had experienced neglect by a caregiver; fewer children had experienced physical abuse (18%) or sexual abuse (11%) (Figure 6).

## ***Health and functioning***

More than half of the children's parents (57%) had been treated in the past for mental illness. At program entry, about 4 in 10 children were exhibiting separation anxiety and attentional deficits. About one-third of children were also often hyperactive and had a history of temper tantrums (Figure 6).

## 6. Wilder Foundation Client Characteristics Checklist (N=28)

	<b>% Observed</b>
Child has witnessed violence between parental figures	93%
Family is or has been headed by a single parent	93%
Family has experienced chronic economic distress	82%
Family exhibits chronic unresolved conflicts between parental figures	79%
Child has experienced parental divorce or separation	79%
One or more parental figures has engaged in probable or adjudicated criminal activity	75%
One or more parental figures has a history of chemical abuse or is currently exhibiting chemical abuse	68%
Family has had frequent changes in residence (3 or more times in previous 5 years)	57%
One or more parental figures has had previous mental illness treatment	57%
Child has experienced probable neglect by current or previous caregivers	39%
One or more parental figures has less than a high school education	39%
Child is easily distractible or has attentional deficits	39%
Child exhibits separation anxiety	39%
Child does <u>not</u> participate in organized social activities (e.g., sports, school or recreational activities, clubs, scouts)	36%
Family has had serial changes in parental figures (e.g., foster placements, reunifications with parents, living with relatives, parental figures/partners moving in and out of household)	36%
Child does <u>not</u> participate in organized religious activities	32%
Child is often hyperactive	32%
Child has a history of temper tantrums	32%
Child does <u>not</u> have strong positive relationships with any unrelated adults (e.g., mentors, counselors, neighbors)	32%
Parental figures have been involved with social service agencies for two or more years	29%
Child has a history of isolative or withdrawn behavior	29%
Child exhibits pattern of impulsivity	25%
Child is often irritable	25%
Child exhibits unhealthy eating habits	25%
Parents exhibit poor or inconsistent monitoring of child's behavior (e.g., children often unsupervised, inconsistent discipline)	21%
Child has a history of feeding and/or sleeping problems	21%
Child exhibits sedentary lifestyle or does <u>not</u> exercise regularly	21%
Child has experienced probable or documented physical abuse	18%
Child has been in previous out-of-home placements	18%
Child has a history of low academic performance (e.g., failing grades, repeated a grade)	18%

**6. Wilder Foundation Client Characteristics Checklist (N=28) (continued)**

	<b>% Observed</b>
Child exhibits poor or insecure attachment to parents (e.g., indifference, avoidance, hostility)	14%
Parental figure or sibling of child has died ( <u>not</u> suicide)	14%
Mother was under 18 when child was born	14%
Family exhibits frequent unresolved conflicts between parental figure(s) and child	14%
Family has a history of suicide ( <u>not</u> client)	11%
Child has experienced probable or documented sexual abuse	11%
Child is assaultive or physically attacks others	11%
Child has chronic illness or health problems	11%
Parental figure or sibling has a chronic illness or handicap	11%
Child is the recipient of special education services	11%
Child was born prematurely	11%
Child does <u>not</u> have strong connections to extended family (e.g., grandparents, aunts, uncles)	11%
Child threatens or intimidates others	7%
Child has multiple suspensions and/or at least one expulsion/administrative transfer from the school or child care setting	4%
Child has been the recipient of one or more previous outpatient intervention efforts	4%
Child has made a suicide attempt	4%
Child smokes cigarettes	4%
Child's behavior endangers self or others (e.g., fast driving, playing with firearms, jumping from high places)	0%
Child has had at least one pregnancy or has fathered a child	0%
Child has had multiple episodes of running away	0%
Child has engaged in multiple acts of vandalism	0%
Child is an adjudicated delinquent	0%
Child has a history of self-injurious behavior (e.g., scratching, cutting, biting, hair pulling)	0%
Child is preoccupied with and/or inappropriately plays with fire	0%
Child has exhibited physical cruelty to animals	0%
Child has had multiple episodes of truancy	0%
Child has dropped out or stopped attending school	0%
Child exhibits probable chemical abuse or has been diagnosed as chemically dependent	0%
Child experienced prenatal exposure to drugs or alcohol	0%
Biological or adoptive parents terminated rights on the child	0%



## Services and referrals

### Service participation: 2006-2007

Following their diagnostic assessments, families were referred for various VPIS services as appropriate, including case management, individual or family counseling with a therapist, and programs that addressed issues of domestic violence in a group setting. Over 880 total hours of direct service were provided to families during this period (including assessments). Participation in these various services during 2006 and 2007 are summarized below.

#### *Case management*

Twenty-four participants received case management services. The parents had between 1 and 40 case management appointments with the Strong and Peaceful Families case manager (average = 10 appointments). In total, 293 hours of case management were provided to participants between 2006 and 2007. On average, each of the 24 participants received just over 12 hours of case management (Figure 7).

#### *Individual sessions*

Seventeen participants received individual counseling sessions. In total, participants had between 1 and 22 individual sessions with a therapist (average = 9.2 sessions). In total, parents participated in over 224 hours of individual counseling. On average, each of the seventeen parents participated in 13 hours of individual counseling (Figure 7).

#### *Family sessions*

Fourteen families received family counseling sessions. Families had between 1 and 8 individual sessions with a therapist (average = 2.5 sessions). In total, families participated in nearly 50 hours of family counseling. On average, each of the 14 families participated in three and one half hours of family counseling (Figure 7).

### ***Group sessions: Adult participants***

Seven parents participated in the Children's Domestic Abuse parenting group and/or the Women's Domestic Abuse group. Each group holds between 10 and 12 sessions. Participation level varied, with parents attending between 1 and 13 sessions (average = 6.4 sessions). In total, parents participated in nearly 68 group hours. On average, each of the seven parents participated in over 9 hours of group (Figure 7).

### ***Group sessions: Children and youth***

Twelve children participated in the Children's Domestic Abuse children's group and/or the Young Men's Program. Each group holds 12 sessions. Participation level varied, with children and youth attending between 3 and 15 sessions (average = 9.8 sessions). In total, children participated in 176 group hours. On average, each of the 10 children or youth participated in over 14 hours of group (Figure 7).

Cancellations or broken appointments by participants were common. In some cases, participants broke multiple appointments before eventually meeting with the case manager. Because not all cancellations were tracked, detailed information on the number of canceled or broken appointments is not available.

## 7. Service participation

Wilder VPIS service	Number of participants served in 2006-2007	Number of appointments/sessions			Hours of service		
	N	Total	Range	Mean	Total	Range	Mean
Case management	24	239	1 – 40	10.0	293	<1 – 54	12.0
Individual sessions	17	156	1 – 22	9.2	224	<1 – 41	13.0
Family sessions	14	35	1 – 8	2.5	49	<1 – 9	3.5
Group sessions (adults)	7	45	1 – 13	6.4	68	2 – 20	9.6
Group sessions (children/youth)	12	118	3 – 15	9.8	176	5 – 23	14.7

**Note.** Adult groups included the Children’s Domestic Abuse parenting group and the Women’s Domestic Abuse group. Children’s groups included the Children’s Domestic Abuse children’s group and the Young Men’s Program.

## Referrals: 2006-2007

In 2006, 18 families in the Strong and Peaceful Families program received a total of 153 referrals. Of these, 58 were referrals to programs operated by the Wilder Foundation and 95 were referrals to programs outside of Wilder. There was wide variation in the number of referrals made per participant (range = 1 to 23), with eight referrals being made per participant on average. Children received between one and three referrals each, with most children receiving one referral (Figure 8). Most of the referrals (40%) were for mental health services. Other common referrals included housing (27%), daily living assistance (12%), and safety programs (8%). See Figure 9 for breakdown by specific referral program/service.

In 2007, 15 families<sup>1</sup> received a total of 288 referrals. Of these, 63 were referrals to programs operated by the Wilder Foundation and 225 were referrals to programs outside of Wilder. There was wide variation in the number of referrals made per participant (range = 2 to 34), with an average of 16 referrals per participant. Children received between 1 and 22 referrals each, with an average of six referrals per child (Figure 8). Most of these referrals were for mental health services (28%), followed by daily living assistance (22%), housing (16%), safety programs (11%), and other services. See Figure 9 for breakdown by specific referral program/service.

Families tended to follow-up on most referrals, although there was somewhat less follow-through for some services including certain programming for children, some mental health services, and Public Health.

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<sup>1</sup> Some families received referrals during both 2006 and 2007.

**8. Summary of 2006 – 2007 referrals**

	<b>2006 referrals</b>		<b>2007 referrals</b>	
Number of families referred	18		15	
Total number of referrals	153		288	
<i>Wilder program/service</i>	58		63	
<i>Non-Wilder program/service</i>	95		225	
	<b>Range</b>	<b>Mean</b>	<b>Range</b>	<b>Mean</b>
Referrals per participant	1 – 23	8	2 – 34	16
Referrals per child	1 – 3	1	1 – 22	6

**Note.** Some families were referred for services during both 2006 and 2007.

## 9. Referrals for services

Type of referral	2006	2007		
	Number of families referred (N=18)	Number of families referred (N=15)	Total number of referrals	% of referrals families followed up on
<b>Child care</b>				
Women's Domestic Abuse Child Care*	1	4	4	0%
YMCA Scholarship Program	1	1	1	0%
YMCA Summer Camp	1	1	1	0%
Childcare	0	1	1	100%
Boys & Girls Club	1	0	0	N/A
Head Start	1	0	0	N/A
<b>Children's Education/Adult Continuing Education</b>				
Head Start	0	3	3	67%
Summer activity for children	0	2	3	50%
Century College	1	1	1	100%
Metropolitan State University	1	1	1	100%
Job training	0	1	1	100%
Salvation Army	0	1	1	100%
Lifetrack Resources	0	1	1	100%
<b>Daily Living Assistance</b>				
St Paul Foundation/Community Sharing Fund	7	12	15	100%
Ramsey County Emergency Assistance	1	10	12	100%
Bridging Program	4	4	9	100%
Salvation Army Food Shelf	2	3	5	100%
Alley Shoppe	0	2	4	100%
Martha's Closet	1	2	4	100%
Energy assistance	0	2	2	100%
Food assistance	0	2	2	100%
Lifecare Center	0	2	2	100%
WIC	0	2	2	100%
Dorothy Day Center	0	1	2	100%
Catholic Charities Furniture Warehouse	1	1	1	100%
Community Asian Partnership	0	1	1	100%
Midwest Center	1	0	0	N/A

**Note.** Thirty-one families in total were referred to a variety of services, both within the Wilder Foundation and VPIS, as well as outside of Wilder in 2006 and 2007. Overall, 441 referrals were made.

\* Wilder Foundation program/service.

## 9. Referrals for services (continued)

Type of referral	2006	2007		
	Number of families referred (N=18)	Number of families referred (N=15)	Total number of referrals	% of referrals families followed up on
<b>Employment/Job Training</b>				
On-Line County Job Banks	1	2	3	50%
HIRED	0	1	1	100%
<b>Housing</b>				
ROOF Project*	4	6	9	100%
Project Quest*	3	6	9	100%
St. Paul Public Housing	1	2	3	100%
Model Cities of St. Paul	3	3	3	100%
Lutheran Social Services	3	2	3	100%
Women's Advocates	3	2	3	50%
East Metro Women's Council	3	2	2	100%
The Family Place	3	2	2	100%
Caroline Family Services	3	2	2	100%
Naomi Family Center	3	2	2	100%
New Foundations	3	1	2	100%
YWCA Transitional Housing Program	3	1	2	100%
Jeremiah program	0	1	1	100%
Job Corps	0	1	1	100%
Theresa Living Center	3	1	1	100%
United Way	3	0	0	N/A
Eagle's Nest Shelter	1	0	0	N/A
<b>Legal</b>				
Chrysalis	0	7	7	71%
Southern Minnesota Legal Services	1	6	7	67%
<b>Medical</b>				
Ramsey County Minnesota Family Investment Program (MFIP)	3	7	8	86%
SSI/Social Security	0	2	2	100%

**Note.** Thirty-one families in total were referred to a variety of services, both within the Wilder Foundation and VPIS, as well as outside of Wilder in 2006 and 2007. Overall, 441 referrals were made.

\* Wilder Foundation program/service.

## 9. Referrals for services (continued)

Type of referral	2006	2007		
	Number of families referred (N=18)	Number of families referred (N=15)	Total number of referrals	% of referrals families followed up on
<b>Mental Health</b>				
Individual therapy (Wilder)*	7	12	15	83%
Women's Domestic Abuse group*	9	11	15	18%
Children's Domestic Abuse Parenting Group*	10	10	13	40%
Children's Domestic Abuse Children's Group*	14	9	12	33%
Psychological assessment (Ramsey County)	2	9	10	89%
Individual therapy (Ramsey County)	2	6	6	17%
Family therapy*	3	2	3	100%
Wilder Child Guidance Clinic*	4	2	2	50%
Chrysalis	0	2	2	100%
Face 2 Face In-Home Services	2	1	1	100%
Ramsey County Mental Health	1	1	1	100%
Dialectical Behavior Therapy	0	1	1	0%
Generations (CSS, ARMHS Program)	2	0	0	N/A
Young Men's Program*	3	0	0	N/A
Individual therapy (Children's Home Society & Family Services)	1	0	0	N/A
Group therapy (Children's Home Society & Family Services)	1	0	0	N/A
Ramsey County Adult Crisis Program	0	0	0	N/A
Ramsey County Children's Crisis Response	0	0	0	N/A
<b>Safety</b>				
St. Paul Police Department	1	8	10	75%
Ramsey County Public Health	10	7	8	29%
St Paul Intervention	0	7	7	100%
Children's Safety Center*	1	1	2	100%
Ramsey and Dakota Counties VINE Systems	1	1	1	100%
Order for Protection	0	1	1	0%

**Note.** Thirty-one families in total were referred to a variety of services, both within the Wilder Foundation and VPIS, as well as outside of Wilder in 2006 and 2007. Overall, 441 referrals were made.

\* Wilder Foundation program/service.



## 9. Referrals for services (continued)

Type of referral	Number of families referred (N=18)	Number of families referred (N=15)	Total number of referrals	% of referrals families followed up on
<b>Substance abuse</b>				
Alanon, Alcoholics Anonymous, Narcotics Anonymous	0	1	2	100%
Alcohol & Drug Abuse Program (Regions Hospital)	1	0	0	N/A
Substance Abuse Assessment (Ramsey County)	1	0	0	N/A
<b>Other</b>				
Salvation Army – Operation Joy	5	5	7	100%
Salvation Army – Toys for Tots	0	5	5	100%
Tix for Tots	0	2	3	100%
2-1-1 Infoline	0	2	2	100%

**Note.** Thirty-one families in total were referred to a variety of services, both within the Wilder Foundation and VPIS, as well as outside of Wilder in 2006 and 2007. Overall, 441 referrals were made.

\* Wilder Foundation program/service.

# Strengths and needs

## Strengths/Needs Referral Plan

The case manager completes a Strengths/Needs Referral Plan for each participant documenting the specific areas of strength and need for each individual in 14 core areas (see Appendix). Participant goals, referrals, and the timeframe for completing goals are also documented in the plan. Plans are completed for participants at intake and updated every 60 to 90 days, or as needed. Strengths and needs for participants in 2007 only are reported here.

At intake, areas of strength for most participants included substance use, employment/job training, legal issues, family relationships, social supports, safety, and medical issues. The most pressing needs of participants as identified by the case manager included housing and daily living assistance. Other relatively prevalent needs included child care, transportation, recreation and leisure time, education for parents and children, and mental health concerns (Figure 10).

### *Participant goals*

With the case manager, participants develop specific goals that address each of their primary needs. In 2007, most of the goals set by participants related to basic needs or daily living, especially obtaining energy assistance or food assistance. Finding secure housing was another prevalent goal among program participants, as was seeking mental health and educational services for themselves and/or their children. Identifying recreation and leisure activities for parents and their children was another common goal. See Figure 11 for a complete listing of all participant goals by area of need.

Goals are assessed at intake and updated every 60 to 90 days, or as needed. All participants successfully met their goals in the areas of daily living assistance, recreation and leisure activities, mental health services, child/adult education, medical care, social supports, and family relationships, although few participants had goals related to medical care, social support, and family relationships. Fewer parents successfully met goals related to housing, child care, and transportation (Figure 12).

## 10. Strengths and needs of participants at intake (2007)

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<b>Domain</b>	<b>Identified as a “strength” (N=14-15)</b>	<b>Identified as a “need” (N=14-15)</b>
Substance abuse	15	0
Employment/job training	13	2
Legal	13	2
Family relationships	13	2
Social supports	13	2
Safety	13	2
Medical (health insurance, screening)	12	3
Mental health	10	5
Children’s education/adult continuing education	10	5
Recreation and leisure time	10	5
Transportation	9	6
Child care	8	6
Housing	6	8
Daily living assistance (food, clothing, energy, furniture)	6	9

## 11. Participant goals by area of need

### Child Care

Obtain daycare for son.

Childcare before and after school for daughters ages 9 and 10.

Find part-time childcare for 15-20 hours a week.

Find daycare for child 4 hours daily Monday through Friday.

Find daycare or early Head Start for child.

Obtain child care for child.

### Housing

Obtain housing for self and 3 children by 9/30/07.

Obtain housing for her and her son. (n=2)

Locate and secure new apartment by 6/1/07.

Obtain/secure more affordable housing.

Funding for back rent.

Needs to move out of current apartment by 6/1/07.

Find a new apartment in a safer neighborhood.

Secure market-rate apartment or space in a housing program.

### Employment/Job Training

Secure part-time employment by 9/30/07.

Find part-time employment 15-20 hours a week.

Find sewing class.

Obtain full-time job in nursing field.

Secure a new full time position in administrative assistance.

Secure part time position in healthcare field.

### Children's Education/Adult Continuing Education

Obtain information about medical programs at college level.

Enroll in a local college.

Grants/loans – human service degree (Inver Grove Community College).

Find a tutor for daughter.

Find a tutor for son.

Head Start for child.

Obtain G.E.D.

Enroll in college.

Explore various college options.

**Note.** The goals above were set by 14 families while in the program in 2007.

## 11. Participant goals by area of need (continued)

### Transportation

Obtain bus tokens as needed.

Obtain bus card from Ramsey County. (n=2)

Own vehicle. (n=3)

### Medical

Obtain medical insurance for child (MN Care).

Medical insurance for child.

Obtain medical insurance for self and son.

### Daily Living Assistance/Basic Needs

Obtain/attemp to obtain energy assistance with Excel Energy. (n=2)

Clothing for 2 girls.

Register and utilize food shelf in area.

Locate food shelf.

Get W.I.C. for child.

Register with local food shelf.

Obtain energy assistance. (n=3)

MFIP for family.

Food assistance.

Food shelf in neighborhood.

Energy assistance for overdue bill.

SSI benefits.

Food shelf – register and receive services.

Utilize Bridging, Inc once housing is secured.

Find food shelf in new neighborhood.

Find clothing for child.

### Legal

Obtain legal aid for divorce fees/proceedings.

Renew Order for Protection (OFP) against R.

Renew Order for Protection (OFP) against ex-partner.

Free consultation regarding housing issues.

**Note.** The goals above were set by 14 families while in the program in 2007.

## 11. Participant goals by area of need (continued)

### Recreation/Leisure Time

Obtain information on gym membership.

Obtain referrals to low-cost family activities.

Free events/resources/referrals.

Summer program(s) for children.

Access to free recreational activities.

Social/recreational groups for child.

Find summer camp for child.

Utilize Tix for Tots program.

Utilize free family activities in St Paul.

### Mental Health

Find individual therapist covered by insurance.

Continue therapy.

Begin family counseling.

Seeking individual therapist.

Schedule psych evaluation – anti depressant options.

Find individual therapist.

Begin family therapy through Strong and Peaceful Families.

Find therapist for child.

Begin Children's Domestic Abuse (CDA) group at Wilder.

### Family Relationships/Social Supports

Repair/reconnect with mom and youngest brother.

Find positive supports/outlets.

Seeking ALANON group in West St. Paul area.

**Note.** The goals above were set by 14 families while in the program in 2007.

**12. Participant progress toward meeting goals (as of December 2007) (N=14)**

Domain	Goal status			
	Total number of goals	Goals complete	Goals in progress	Goals incomplete
Daily living assistance (food, clothing, energy, furniture)	12	12	0	0
Recreation and leisure time	8	8	0	0
Housing	8	3	3	2
Mental health	7	7	0	0
Transportation	6	2	0	4
Children's education/adult continuing education	5	5	0	0
Legal	3	2	1	0
Medical (health insurance, screening)	2	2	0	0
Social supports	2	2	0	0
Child care	3	1	0	2
Employment/job training	3	1	2	0
Family relationships	1	1	0	0
Substance abuse	0	-	-	-
Safety	0	-	-	-

**Note.** The above represents the status of participants' goals through December 2007. Each family works with the case manager to establish as many goals as needed within their key areas of need. Goals are assessed and updated by the case manager approximately every 60 to 90 days. At the time of assessment, the case manager makes a determination as to whether the goals: a) have been met within the timeframe established by the case manager and participant, b) are still in progress by the participant, or c) have not been completed by the participant within the established timeframe.

## Outcomes for families

One of the goals of Strong and Peaceful Families is to reduce the cycle of violence in families. Upon discharge from the Strong and Peaceful Families program, the current level of violence and abuse in the lives of the participant and her children is assessed by the case manager. This measure at discharge also assesses the degree to which the participant has learned effective ways to enhance or increase her own safety and the safety of her children. As it was not possible to collect data from participants directly, the case manager's perception of participant success at reducing the cycle of violence and abuse for herself and her family is reported. Because discharge forms were first implemented in 2007, discharge information is only available for the eight families who left the program in 2007.

### *Status at discharge*

Of these eight families, two successfully completed the program. One family was doing well in the program but moved out of the area before completion, and five did not successfully complete the program. These participants did not maintain contact with the case manager for a variety of reasons (e.g., participant unable to be located, participant felt services were not necessary), despite the case manager's belief there was a need for continued service.

Program enrollment for these eight families ranged from one day to almost one and a half years (541 days). The two families who completed the program were enrolled for 20 days to nearly one year (296 days), while those who did not complete were enrolled between 1 and 220 days (Figure 13).



### ***Program impact on violence/abuse and safety***

As compared to intake, four families were no longer experiencing any violence or abuse when they left the program. Violence/abuse was still present in one family but had been somewhat reduced, while violence/abuse remained an issue for one family at discharge. Data were not available for two families (Figure 14).

As compared to intake, six of the seven participants learned effective ways to enhance or increase their personal safety in relationships with others, as well as the safety of their children, at discharge. Data were not available for one family (Figure 15).

Due to the small Ns, it would be premature at this time to speculate about the relationship between completion status and the presence of violence at discharge. This will be examined in future reports when a sufficient number of families have discharged from the program.

**13. Duration in program by completion status (2007 participants)**

Completion status	Number of families	Time spent in SPF program	
		Range (days)	Average number of days
Successfully completed program	2	20 – 296	158
Left program before completion but doing well at the time	1	541	541
Did not successfully complete program, not doing well at the time	5	1 – 220	121

**14. Participant status at discharge (2007 participants)**

	N=6			
	No longer experiencing violence	Violence significantly reduced	Violence somewhat reduced	Violence not reduced
As compared to intake, to what extent has violence/abuse been reduced in the lives of the client and her children at the time of discharge?	4	0	1	1

**15. Impact of program on violence/abuse (2007 participants)**

As compared to intake, has the client learned effective ways to...	N=7	
	Yes	No
Enhance or increase <u>her</u> safety in her relationships with others at the time of discharge?	6	1
Enhance or increase the safety of <u>her children</u> at the time of discharge?	6	1

## Participant success stories

The following stories illustrate the impact of the program on select participants. The stories highlight the challenges parents faced prior to and during the program, the services utilized as participants of the program, and the changes that occurred for themselves and their children as a result of participating in Strong and Peaceful Families.

### Nancy's story

On May 30, 2007, Nancy was certain she was going to die.

That day, Nancy was trying to leave her home to attend an appointment with her doctor, but her husband of seven years refused to let her leave. She protested, telling him that she had a scheduled appointment that she needed to go to.

The next thing she knew, Nancy found herself lying in her bed with a 9 mm handgun pointed at her head. At the other end of the gun stood her husband who had physically assaulted her, again, but this time decided to take it one step further by threatening to take her life with a bullet to her head.

“He kept saying he was going to kill me. I just remember thinking, ‘I’m going to die. This is it. He’s going to kill me.’”

Nancy was somehow able to break free, and she remembered that it is possible to contact 911 from a cell phone, even if the phone is turned off. Nancy decided that day that she was no longer going to allow her husband to affect her family in such a negative way.

“The incident with the gun really scared me. I knew it had to change. I was seeing my kids acting-out and I realized that my behavior was really affecting them. I realized the consequences of my actions and I knew things had to change. I knew I needed to truly accept the situation for what it was and be done with him for good,” she says.

In the end, Nancy's husband was incarcerated for domestic assault, due in part to Nancy reading her Victim Impact Statement to the Court. He is still behind bars today.

"I can remember thinking, 'It is finally over. He cannot do this to me anymore. I have some time, now, to get my life together,'" Nancy says.

Nancy worked hard to ensure that she found people to support her in her journey. After the May 30 ordeal, two officers from the Saint Paul Police Department and two advocates from St. Paul Domestic Abuse Intervention came to her home unannounced.

"They came to check on me and I didn't even ask. That's exactly what I needed – someone to check on me. That was what really got me to move forward. I felt so safe and I felt like someone was really listening to my concerns for once and taking me seriously," she explains.

Nancy explains that she had always been advised to continue filing Orders for Protection, and she had, but her husband had violated them and she had given up hope. "Then they arrived that day," she says. "It was perfect timing. I knew they were taking this seriously."

It was a turning point for her. Nancy began to work with an advocate from the Joint Domestic Abuse Prosecution Unit during the hearings against her husband for domestic assault. The advocate referred Nancy to Wilder's Strong and Peaceful Families (SPF) program. Nancy took advantage of the program, following up on referrals given to her by the SPF staff and her Ramsey County Attorney's Office advocate, and working with them on building her support network.

With assistance from the SPF staff and the advocate, she has spoken out in court hearings against her husband, made healthy decisions that allow her to maintain her personal safety, obtained a referral to an individual therapist for her eldest daughter, consistently attended individual therapy sessions, attended family therapy with her youngest daughter and fully utilized all of the emotional support available to her and her children.

Such support has empowered her. So much, in fact, that Nancy has begun finding additional support and resources by herself. Nancy found and attends, on a weekly basis, a support group through her church.

“I even got my [eldest] daughter to start going with me. She really likes it,” Nancy says. The church group has been so impressed with Nancy that they have even asked her to lead some of the groups. In addition, Nancy has been able to help her son enroll and begin courses in a Veterinary Medicine program through a college in St. Paul. “He really loves it. He works part-time at UPS, too. He’s doing really well.”

When thinking back to May 2007, Nancy finds it difficult to even believe how much her life has changed. It hasn’t even been a year, but Nancy’s momentum continues to build and she actively surrounds herself with positive people in her life.

“I cannot believe how much madness I put-up with for all those years. I really feel, now, like there are bigger plans for me...that I have a lot to do in this life. I am so happy.”

Now that Nancy’s and her children’s lives have stabilized, she wants to help empower and support others. Last week when an SPF staff member met with Nancy, she asked about opportunities to speak publicly to other victims.

“I thought I might be able to encourage others and help give them hope,” she says.

## **Lynn’s story**

For many years, Lynn suffered abuse by her partner, and she had began working on escapes for her and her children.

“I had a bag packed and I would leave it in the closet by the front door. Then, when he would leave, or even pass out from drinking, I’d get the kids and we’d go. Even in the middle of the night, we’d just leave. He would always find us somehow.”

Lynn had filed Orders for Protection, but her partner continually violated them. “They’d send him to jail, and he’d get out and find us again,” Lynn says. He would keep Lynn and her children locked in their apartment for days and prohibit them from leaving.

Then, on November 21, 2005, Lynn’s partner and the father of her daughter returned home drunk, again, and began an argument with her.

Lynn attempted to take a stand, as she had done so many times in the past.

“During the argument, he kept threatening to turn off the utilities in our apartment, and it was freezing outside. So, I picked up the phone and called the landlord to tell her what he was saying. In the middle of the conversation, he ripped the phone out of the wall and threw it at my head. When we tried to leave, he blocked the doorway and wouldn’t let us go,” she says.

That night was the first time Lynn thought she might die from the abuse. Thankfully, Lynn’s landlord called 911. The authorities responded, and after they left, Lynn resolved to do everything she could to ensure her and her children’s safety.

On that night, Lynn’s life changed and her journey to healing began. Lynn was assigned an advocate from the Joint Domestic Abuse Prosecution Unit during the hearings against her partner for domestic assault, false imprisonment and interfering with the 911 call.

“I love [my advocate],” Lynn says. “She is so funny and she works so hard for me. I always feel better after I talk to her.”

With the support of her advocate, Lynn felt confident enough to read a Victim Impact Statement to the Judge during the hearing. “I just remember, after I read it, it felt like a big weight was lifted. I felt at peace. I felt like I could go on.” Lynn explains that she felt the court knew she was serious about making a better life for herself and her children.

After the hearing, Lynn was referred into Wilder’s Strong and Peaceful Families (SPF) program. Together, the SPF staff and the advocate were able to provide Lynn with support and referrals.

Lynn says her advocate and the SPF staff gave her the support she needed to find hope again. Through the SPF program, Lynn and her children completed Wilder’s Children’s Domestic Abuse (CDA) group.

“[The group] was very helpful. It gave my kids a chance to talk about stuff, but mostly, they got to see that other kids were in similar situations. They got to know that it wasn’t just them.”

In addition, Lynn followed-through with SPF referrals to a psychiatrist and individual therapist for her son. Lynn also worked with SPF staff to create a safety plan for her family in the event that her partner finds them again.

“I talked with my kids. We [identified] people to go to or call if he shows up. They know how to call 911. They know not to answer our door or buzzer.” In other words, they have options now.

Lynn continues to meet with a SPF staff member for therapeutic case management. Currently, she is seeking referrals for summer programs for her children, assistance with obtaining Supplemental Security Income (SSI) benefits, and an for advocate to accompany her to an upcoming hearing: “[My partner] is contesting my request for an updated Order for Protection. So I have to go and sit by him in court and I don’t even want to see him. I’m going to do it, though, for myself and my kids. He’s trying to get to me, but I’m not going to let him anymore,” she says.

When asked to reflect on her life before November 21, 2005 compared to now, Lynn answers, “We’re coming up on one year at our apartment. That feels really good, since we dealt with being homeless off and on for four years. I feel like my confidence has gone up since [my partner] has been gone. He always made sure it stayed low. My kids seem happier...more outgoing and talkative. When he was around, they were usually quiet because they didn’t want to make him mad, but now, they play and have fun. They laugh,” Lynn says, laughing.

# **Conclusions and recommendations**

## ***Strengths and challenges***

Families entered the Strong and Peaceful Families program with a broad range of challenges, above and beyond their experiences with family violence and abuse. Many of the women were also managing mental health issues and lacked adequate financial and housing resources. In fact, housing and daily living assistance were acknowledged as the most pressing needs of families overall. While exposure to violence in the home was true for the majority of children, many of the children had also experienced neglect by a caregiver, separation anxiety, and/or emotional issues.

Beyond these challenges, families also entered the program with important strengths. Most parents were substance-free, employed, had good family relationships and social supports, and were adequately managing safety and legal issues, when present. Similarly, children and youth were also substance-free, generally had strong relationships with extended family and adults in their lives, and many also participated in social and/or religious activities.

## ***Services and referrals***

Upon referral to Strong and Peaceful Families, families accessed a range of services, including case management, individual therapy, family therapy, and group therapy. Families developed a broad range of goals to address while in the program. Obtaining basic needs was the most prevalent goal, followed by securing housing, accessing mental health services and educational services for themselves or their children, and identifying recreational opportunities for family members. While most families met their goals, some were less successful achieving goals related to housing, child care, and transportation.

Families also received numerous referrals for a variety of services both within and outside of Wilder. Mental health referrals were most common, followed by referrals for housing and daily living assistance. In total, referrals were made to nearly 50 different agencies or



programs between 2006 and 2007. Families followed up on most referrals, although this was somewhat less true for referrals to child care and other programming for children, some mental health services, and Public Health.

### ***Outcomes***

At the time families left the program, the majority had learned effective ways to enhance safety for themselves and their children. Those who had successfully completed the program were no longer experiencing violence or abuse. Several of the families left the program early, and outcomes for those families were mixed.

### ***Action items***

The following recommendations emerge from the findings of this report:

- Continue to work with participants on meeting goals and seeking out referrals in areas that pose a particular challenge – namely, housing, child care/child programming, select mental health services, transportation, and Public Health.
- Given the number of families who leave the program early, consider ways to encourage and motivate participants to remain engaged.

## **Appendix**

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*Client Characteristics Checklist*

*Strengths/Needs Referral Plan*

*Referral Tracking Sheet*

*Discharge Form*



# Wilder client characteristics checklist

Client ID (child): \_\_\_\_\_

Client date of birth (child): \_\_\_\_\_

Parent ID: \_\_\_\_\_

Date: \_\_\_\_\_

## WILDER FOUNDATION CLIENT CHARACTERISTICS CHECKLIST Strong and Peaceful Families

A characteristic is regarded as “observed” if documenting information has been obtained by the worker through direct observation, case records or interviews with the client or family members. An “observed” behavior or characteristic is one that occurred prior to or during the treatment or intervention episode. When there is no evidence to indicate the presence of a particular behavior or characteristic, the category “not observed” should be circled. All ratings should be based on what has been “observed” as of the time the form is completed. If behaviors or characteristics that were present when services began are no longer present at the time the form is completed, the observed category should still be circled.

The form is not intended to measure treatment effectiveness. It is intended only to describe the behaviors and characteristics of children and families who become program clients.

	Observed	Not Observed
1. Family has experienced chronic economic distress.....	1	2
2. Family is or has been headed by a single parent .....	1	2
3. Child has experienced parental divorce or separation .....	1	2
4. Family has had frequent changes in residence (3 or more times in previous 5 years) .....	1	2
5. Family has had serial changes in parental figures (e.g., foster placements, reunifications with parents, living with relatives, parental figures/partners moving in and out of household).....	1	2
6. Biological or adoptive parents terminated rights on the child.....	1	2
7. Parental figures have been involved with social service agencies for two or more years .....	1	2
8. Family has a history of suicide ( <u>not</u> client) .....	1	2
9. Parental figure or sibling has a chronic illness or handicap .....	1	2
10. Parental figure or sibling of child has died ( <u>not</u> suicide) .....	1	2
11. Mother was under 18 when child was born .....	1	2
12. One or more parental figures has less than a high school education .....	1	2
13. One or more parental figures has had previous mental illness treatment .....	1	2
14. One or more parental figures has a history of chemical abuse or is currently exhibiting chemical abuse .....	1	2
15. One or more parental figures has engaged in probable or adjudicated criminal activity .....	1	2
16. Family exhibits chronic unresolved conflicts between parental figures .....	1	2
17. Child has witnessed violence between parental figures .....	1	2
18. Family exhibits frequent unresolved conflicts between parental figure(s) and child.....	1	2
19. Child has experienced probable or documented physical abuse .....	1	2
20. Child has experienced probable or documented sexual abuse.....	1	2
21. Child has experienced probable neglect by current or previous caregivers .....	1	2
22. Parents exhibit poor or inconsistent monitoring of child’s behavior (e.g., children often unsupervised, inconsistent discipline) .....	1	2
23. Child exhibits poor or insecure attachment to parents (e.g., indifference, avoidance, hostility).....	1	2

-OVER-

	<b>Observed</b>	<b>Not Observed</b>
24. Child exhibits separation anxiety .....	1	2
25. Child has been in previous out-of-home placements .....	1	2
26. Child has been the recipient of one or more previous outpatient intervention efforts.....	1	2
27. Child has chronic illness or health problems.....	1	2
28. Child experienced prenatal exposure to drugs or alcohol .....	1	2
29. Child was born prematurely .....	1	2
30. Child has a history of feeding and/or sleeping problems .....	1	2
31. Child has a history of temper tantrums.....	1	2
32. Child's behavior endangers self or others (e.g., fast driving, playing with firearms, jumping from high places).....	1	2
33. Child has had at least one pregnancy or has fathered a child .....	1	2
34. Child has had multiple episodes of running away .....	1	2
35. Child has engaged in multiple acts of vandalism .....	1	2
36. Child is an adjudicated delinquent .....	1	2
37. Child threatens or intimidates others .....	1	2
38. Child is assaultive or physically attacks others .....	1	2
39. Child has made a suicide attempt .....	1	2
40. Child has a history of self-injurious behavior (e.g., scratching, cutting, biting, hair pulling) .....	1	2
41. Child has a history of isolative or withdrawn behavior .....	1	2
42. Child is preoccupied with and/or inappropriately plays with fire .....	1	2
43. Child has exhibited physical cruelty to animals .....	1	2
44. Child has had multiple episodes of truancy .....	1	2
45. Child is the recipient of special education services.....	1	2
46. Child has dropped out or stopped attending school .....	1	2
47. Child has a history of low academic performance (e.g., failing grades, repeated a grade) .....	1	2
48. Child has multiple suspensions and/or at least one expulsion/administrative transfer from the school or child care setting.....	1	2
49. Child exhibits probable chemical abuse or has been diagnosed as chemically dependent.....	1	2
50. Child is often hyperactive .....	1	2
51. Child exhibits pattern of impulsivity .....	1	2
52. Child is easily distractible or has attentional deficits .....	1	2
53. Child is often irritable .....	1	2
54. Child does <u>not</u> have strong connections to extended family (e.g., grandparents, aunts, uncles).....	1	2
55. Child does <u>not</u> have strong positive relationships with any unrelated adults (e.g., mentors, counselors, neighbors).....	1	2
56. Child does <u>not</u> participate in organized social activities (e.g., sports, school or recreational activities, clubs, scouts).....	1	2
57. Child does <u>not</u> participate in organized religious activities .....	1	2
58. Child exhibits unhealthy eating habits .....	1	2
59. Child smokes cigarettes .....	1	2
60. Child exhibits sedentary lifestyle or does <u>not</u> exercise regularly .....	1	2

# Strengths/Needs Referral Plan

## Strong and Peaceful Families Strengths/Needs Referral Plan [to be updated every 60 days]

Start date of current plan: \_\_\_\_\_

Date of update: \_\_\_\_\_

Client (parent) name: \_\_\_\_\_ Client (parent) ID: \_\_\_\_\_ Client (parent) DOB: \_\_\_\_\_

Child 1 name: \_\_\_\_\_ Child 1 ID: \_\_\_\_\_ Child 1 DOB: \_\_\_\_\_

Child 2 name: \_\_\_\_\_ Child 2 ID: \_\_\_\_\_ Child 2 DOB: \_\_\_\_\_

Child 3 name: \_\_\_\_\_ Child 3 ID: \_\_\_\_\_ Child 3 DOB: \_\_\_\_\_

Child 4 name: \_\_\_\_\_ Child 4 ID: \_\_\_\_\_ Child 4 DOB: \_\_\_\_\_

Type	Strength/ Need	Referral(s) made*	Goal(s)	Target	Timeframe	Status of goal(s)
CHILD CARE	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	(1) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
HOUSING	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	(1) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed

Type	Strength/ Need	Referral(s) made*	Goal(s)	Target	Timeframe	Status of goal(s)
EMPLOYMENT/ JOB TRAINING	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	(1) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
CHILDREN'S EDUCATION/ ADULT CONTINUING EDUCATION	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	(1) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
TRANSPORTATION	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	(1) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed

Type	Strength/ Need	Referral(s) made*	Goal(s)	Target	Timeframe	Status of goal(s)
			(3) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
MEDICAL (health insurance, screening)	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	1) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
DAILY LIVING ASSISTANCE (e.g., food, clothing, energy, furniture)	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	1) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
LEGAL	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	1) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed



Type	Strength/ Need	Referral(s) made*	Goal(s)	Target	Timeframe	Status of goal(s)
			(3) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
RECREATION & LEISURE TIME	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	1) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
				<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
MENTAL HEALTH(family, individual, group)	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	1) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
				<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
SUBSTANCE ABUSE	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	1) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed

Type	Strength/ Need	Referral(s) made*	Goal(s)	Target	Timeframe	Status of goal(s)
			(2) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
FAMILY RELATIONSHIPS	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	1) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
SOCIAL SUPPORTS	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	1) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(2) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
SAFETY	<input type="checkbox"/> Strength <input type="checkbox"/> Need	<input type="checkbox"/> Yes <input type="checkbox"/> No	1) _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed

Type	Strength/ Need	Referral(s) made*	Goal(s)	Target	Timeframe	Status of goal(s)
			(2) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed
			(3) _____ _____ _____	<input type="checkbox"/> Family <input type="checkbox"/> Parent <input type="checkbox"/> Child ____		<input type="checkbox"/> In progress <input type="checkbox"/> Incomplete <input type="checkbox"/> Completed

**Coordination of Services (identify other services client is receiving and explain how they are being coordinated):**

# Referral tracking sheet

## STRONG AND PEACEFUL FAMILIES Referral Tracking Sheet [to be updated every 60 days]

Start date: \_\_\_\_\_  
Date of update: \_\_\_\_\_

Parent name: \_\_\_\_\_ Parent ID: \_\_\_\_\_ Parent DOB: \_\_\_\_\_  
 Child 1 name: \_\_\_\_\_ Child 1 ID: \_\_\_\_\_ Child 1 DOB: \_\_\_\_\_  
 Child 2 name: \_\_\_\_\_ Child 2 ID: \_\_\_\_\_ Child 2 DOB: \_\_\_\_\_  
 Child 3 name: \_\_\_\_\_ Child 3 ID: \_\_\_\_\_ Child 3 DOB: \_\_\_\_\_  
 Child 4 name: \_\_\_\_\_ Child 4 ID: \_\_\_\_\_ Child 4 DOB: \_\_\_\_\_

Please check all referrals made for the family. Next to each agency listed, indicate who the referral was for, using the appropriate code (P=parent, C1=child 1, C2=child 2, C3=child 3, and C4=child 4). If more than one individual was referred to an agency, list all applicable codes next to that agency. At the 60-day update, indicate whether parent actually sought out the referral by circling Y (yes) or N (no) after each referral.

### Child care

<input type="checkbox"/> 1) Boys & Girls Club _____ Y N <input type="checkbox"/> 2) Women's Domestic Abuse _____ Y N Child Care* _____	<input type="checkbox"/> 3) YMCA Scholarship Program _____ Y N <input type="checkbox"/> 4) YMCA Summer Camp _____ Y N <input type="checkbox"/> 5) Other (____): _____ Y N
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### Children's Education/Adult Continuing Education

<input type="checkbox"/> 6) Century College _____ Y N <input type="checkbox"/> 7) Head Start _____ Y N	<input type="checkbox"/> 8) Metropolitan State University _____ Y N <input type="checkbox"/> 9) Other (____): _____ Y N
---	--

### Daily Living Assistance

<input type="checkbox"/> 10) Alley Shoppe _____ Y N <input type="checkbox"/> 11) Bridging Program _____ Y N <input type="checkbox"/> 12) Catholic Charities Furniture _____ Y N Warehouse _____ <input type="checkbox"/> 13) Dorothy Day Center _____ Y N <input type="checkbox"/> 14) Martha's Closet _____ Y N <input type="checkbox"/> 15) Midwest Center _____ Y N	<input type="checkbox"/> 16) Ramsey County Emergency _____ Y N Assistance _____ <input type="checkbox"/> 17) Salvation Army Food Shelf _____ Y N <input type="checkbox"/> 18) St. Paul Foundation/Community Sharing _____ Y N Fund _____ <input type="checkbox"/> 19) WIC _____ Y N <input type="checkbox"/> 20) Other (____): _____ Y N
--	--

### Employment/job training

<input type="checkbox"/> 21) On-Line County Job Banks _____ Y N	<input type="checkbox"/> 22) Other (____): _____ Y N
---	--

### Housing

<input type="checkbox"/> 23) Caroline Family Services _____ Y N <input type="checkbox"/> 24) Eagle's Nest Shelter _____ Y N <input type="checkbox"/> 25) East Metro Women's Council _____ Y N <input type="checkbox"/> 26) The Family Place _____ Y N <input type="checkbox"/> 27) Lutheran Social Services _____ Y N <input type="checkbox"/> 28) Model Cities of St. Paul _____ Y N	<input type="checkbox"/> 31) Project Quest* _____ Y N <input type="checkbox"/> 32) ROOF Project* _____ Y N <input type="checkbox"/> 33) St. Paul Public Housing _____ Y N <input type="checkbox"/> 34) Theresa Living Center _____ Y N <input type="checkbox"/> 35) United Way _____ Y N <input type="checkbox"/> 36) Women's Advocates _____ Y N
--	--

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| <input type="checkbox"/> 29) Naomi Family Center _____ | Y | N | <input type="checkbox"/> 37) YWCA Transitional Housing Prog _____ | Y | N |
| <input type="checkbox"/> 30) New Foundations _____     | Y | N | <input type="checkbox"/> 38) Other (____): _____                  | Y | N |

**Legal**

- |  |   |   |  |   |   |
|--|---|---|--|---|---|
| <input type="checkbox"/> 39) Chrysalis _____                         | Y | N | <input type="checkbox"/> 41) Other (____): _____ | Y | N |
| <input type="checkbox"/> 40) Southern Minnesota Legal Services _____ | Y | N |  |   |   |

**Medical**

- |   |   |   |  |   |   |
|---|---|---|--|---|---|
| <input type="checkbox"/> 42) Ramsey County Minnesota Family Investment Program (MFIP) _____ | Y | N | <input type="checkbox"/> 43) Other (____): _____ | Y | N |
|---|---|---|--|---|---|

**Mental health**

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| <input type="checkbox"/> 44) Child Guidance Clinic* _____   | Y | N | <input type="checkbox"/> 53) Individual therapy (Ramsey County) _____       | Y | N |
| <input type="checkbox"/> 45) CDA Children’s Group* _____  | Y | N | <input type="checkbox"/> 54) Individual therapy (Wilder)* _____             | Y | N |
| <input type="checkbox"/> 46) CDA Parenting Group* _____   | Y | N | <input type="checkbox"/> 55) Psych assessment (Ramsey Cty) _____            | Y | N |
| <input type="checkbox"/> 47) Chrysalis _____  | Y | N | <input type="checkbox"/> 56) Ramsey Cty Adult Crisis Program _____          | Y | N |
| <input type="checkbox"/> 48) Face 2 Face In-Home Services _____                                   | Y | N | <input type="checkbox"/> 57) Ramsey County Children’s Crisis Response _____ | Y | N |
| <input type="checkbox"/> 49) Family therapy (Wilder)* _____                                       | Y | N | <input type="checkbox"/> 58) Ramsey County Mental Health _____              | Y | N |
| <input type="checkbox"/> 50) Generations (CSS, ARMHS) _____                                       | Y | N | <input type="checkbox"/> 59) Women’s Domestic Abuse group* _____            | Y | N |
| <input type="checkbox"/> 51) Group therapy (Children’s Home Society & Family Services) _____      | Y | N | <input type="checkbox"/> 60) Young Men’s Program* _____                     | Y | N |
| <input type="checkbox"/> 52) Individual therapy (Children’s Home Society & Family Services) _____ | Y | N | <input type="checkbox"/> 61) Other (____): _____                            | Y | N |

**Safety**

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| <input type="checkbox"/> 62) Children’s Safety Center* _____               | Y | N | <input type="checkbox"/> 65) St. Paul Intervention _____      | Y | N |
| <input type="checkbox"/> 63) Ramsey County Public Health _____             | Y | N | <input type="checkbox"/> 66) St. Paul Police Department _____ | Y | N |
| <input type="checkbox"/> 64) Ramsey and Dakota Counties VINE Systems _____ | Y | N | <input type="checkbox"/> 67) Other (____): _____              | Y | N |

**Substance Abuse**

- |  |   |   |  |   |   |
|--|---|---|--|---|---|
| <input type="checkbox"/> 68) Alcohol & Drug Abuse Program (Regions Hospital) _____ | Y | N | <input type="checkbox"/> 70) Other (____): _____ | Y | N |
| <input type="checkbox"/> 69) Substance Abuse Assessment (Ramsey County) _____      | Y | N |  |   |   |

**Other**

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| <input type="checkbox"/> 71) Salvation Army – Toys for Tots _____ | Y | N | <input type="checkbox"/> 74) 2-1-1 Infoline _____ | Y | N |
| <input type="checkbox"/> 72) Salvation Army – Operation Joy _____ | Y | N | <input type="checkbox"/> 75) Other (____): _____  | Y | N |
| <input type="checkbox"/> 73) Tix for Tots _____                   | Y | N | <input type="checkbox"/> 76) Other (____): _____  | Y | N |

# Discharge Form

## STRONG AND PEACEFUL FAMILIES Discharge Form

Please complete a Discharge Form for every client, regardless of whether the client successfully completed the program, within one month of her discharge.

Client name: _____	Client ID: _____
Intake date (mo/day/yr): _____	
Date of last visit/appt (mo/day/yr): _____	
Discharge (closing) date (mo/day/yr): _____	

### Status at discharge

- Did the client successfully complete the program?
  - Client successfully completed the program (DESCRIBE KEY CONTRIBUTORS TO SUCCESS: \_\_\_\_\_)
  - Client was doing well in program but moved out of area before completing the program
  - Client was doing well in program but was referred to/connected with other social service agencies for continued support
  - Client did not successfully complete the program (EXPLAIN: \_\_\_\_\_)
  - Other (DESCRIBE: \_\_\_\_\_)
- As compared to intake, to what extent has violence/abuse been reduced in the lives of the client and her children at the time of discharge?
  - The family is no longer experiencing any violence/abuse
  - Violence/abuse is still present but significantly reduced
  - Violence/abuse is still present but somewhat reduced
  - Violence/abuse has not been reduced/it is still an issue
  - Don't know

### Impact of program on violence/abuse

- As compared to intake, has the client learned effective ways to enhance or increase her safety in her relationships with others at the time of discharge?
  - Yes
  - No
  - Don't know
- As compared to intake, has the client learned effective ways to enhance or increase the safety of her children at the time of discharge?
  - Yes
  - No
  - Don't know