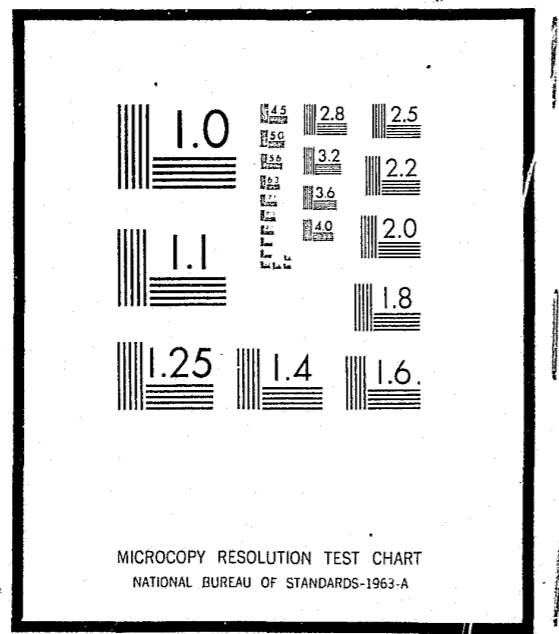


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ACQUISITIONS

Three Rivers Youth  
Orientation House Project

FINAL Evaluation Report

MAY 6 1976

DS-488-74

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April 16, 1976

39144

TABLE OF CONTENTS

	Page
Three Rivers Youth Orientation House Project	1
Overview	1
Program Description	4
Requirements and Procedures for Admission	5
Professional Sources	8
Service Functions	10
Project Evaluation	15
Quantitative Outcome Measures	15
Subjects	16
Data Analysis	16
The Jesness Inventory	17
The Cornell Index	20
Behavioral Rating Scale	22
The Wide Range Achievement Test	23
Discussion	24
Program Cost Effectiveness	25
Finances and Budget	28
Conclusions and Recommendations	29

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List of Tables

Table		Page
1.	Raw Score Means and Standard Deviations for 18 Juveniles, Pre and Post Test, Jesness Inventory	19
2.	Means and Standard Deviations for 19 Juveniles, Pre and Post Test, Cornell Index	21
3.	Means and Standard Deviations for 19 Juveniles, Pre and Post Test, Behavioral Rating Scales	22
4.	Means and Standard Deviations for 12 Juveniles, Pre and Post Test, Wide Range Achievement Test	23
5.	Savings in Time and Money by Diversion of Youth from the Juvenile Justice System to TRY	25
6.	TRY Expenditures for Direct and Indirect Services	27
	Bibliography	38
	Appendices	39

Three Rivers Youth  
Orientation House Project

Overview

The demand for community-based programs for troubled adolescents has been steadily increasing, particularly in large urban areas such as Pittsburgh, Pennsylvania. Three Rivers Youth (TRY) Organization has responded to this demand by developing a network of five group homes that provide a community based treatment program for adolescents. The TRY professional staff believe in the community based approach to serving troubled adolescents by providing group homes in a variety of neighborhoods for living experiences appropriate for the needs of each youth.

The program is geared toward services for the adolescent population, between the ages of 13 and 18, who have emotional problems and who may present disturbing behavior. Such youth may have run away from home, may have acted out in sexual ways, may have withdrawn from school and other activities, may have experienced failures in other placements or may be returning from an institution. The program serves youth of any racial, religious or national origin.

The goals of the project as presented in Three Rivers Youth literature reflect the basic philosophy of being youth oriented and

community based. The ultimate goal of the program is to return the adolescents to a more permanent life in his community, better prepared to cope with their environment. TRY has proposed a number of specific goals:

1. To implement treatment programs that provide conditions for growth, development, and change in an atmosphere that is youth centered, youth directed and community based.
2. To help provide to the adolescents with respect to their:
  - (a) social needs, (b) learning and educational needs, (c) emotional needs, (d) self-expectations, (e) community expectations, and (f) self-concept.
3. To provide the appropriate prevention of more severe reoccurring problems and remedial treatment.
4. To develop communication and positive relationships between and among the group home residents, the family and the community.
5. To maximize the effective utilization of the local community and its resources so that those being served will be able to function in society with some degree of personal independence while receiving the special assistance they must have.
6. To "capitalize" on the differences within the program that combine to form the appropriate "mix" of services to the youth.

As part of the continuation of the TRY project, The Governor's Justice Commission of The State of Pennsylvania has required all such projects receiving federal and/or state support to provide an evaluation of the

on going program with respect to staffing, program goals and cost effectiveness. This report provides such an evaluation of the TRY program in accordance with the above requirement, specifically for the period from July 1, 1974 to June 30, 1975.

## THREE RIVERS YOUTH

Program Description

Three Rivers Youth is a private non-profit social agency which provides observation, treatment and training for adolescent girls and boys who need care away from their own home and family, who require special help with their emotional problems best served in an open, non-institutional, homelike setting.

Three Rivers Youth views the group home basically within the small residential family concept through which small and well structured living units, based on a family model, are established and designed to facilitate the development of needed intensive helping relationships between the youth and staff. Implementation of this group home concept is the core of the Three Rivers Youth operation.

Three Rivers Youth owns five group homes: Orientation House; Dithridge House and Thomas House for Girls; Academy House and Perry House for Boys, located in residential areas of Pittsburgh. Orientation House, the newest of the five, specifically constructed as a group home, is utilized as the reception and assessment center prior to the assignment of each adolescent to one of the four homes. Two of the homes are for girls and two for boys. Orientation House keeps both sexes while they await placement in a home. This is a pioneering effort in this type of coeducational living arrangement for emotionally disturbed children.

Each group home is within walking distance of all levels of public schools, recreational parks, libraries and other community facilities.

None of the homes possess extensive facilities, the plan being to have community agencies and their resources available to provide necessary extensions in care, schooling, recreation, medical and dental services, and other related functions.

Orientation House is a carefully planned home that has combined architectural insight with staff experience to provide for privacy, group interaction and staff coordination. Child relationships start in a basic living group of eight to ten and then move out to the larger community and school. During the past year, an enclosed tennis court was built on the grounds of Orientation House, providing a recreational facility for tennis, volleyball and basketball. Residents from the other homes and neighborhood youth use the facility and cooperative community programs are encouraged.

#### Requirements and Procedures for Admission

- (1) A youth candidate is eligible for admission regardless of race or creed;
- (2) The youth candidate must be free of psychosis. Youth who have emotional problems that conform and enhance treatment in a residential setting may be served in the Three Rivers Youth program. Youth with little behavioral control and who require maximum external control in a highly restrictive environment are not appropriate candidates for the open setting provided by Three Rivers Youth;
- (3) The youth candidate must have the potential for exercising sufficient responsibility for and control over their own behavior so they can live in



a community without risking injury or damage to themselves and others;

(4) The candidate must be able to live in a close proximity to other youth and be able to apply themselves, with professional support, to educational and vocational programs geared to their personal needs and abilities. The community is viewed as a therapeutic medium for treatment. Available placement will not be denied to program candidate if there is some evidence he might be able to utilize and profit from the family group living in the group home placement, even though the youth may have had a previous history of behavior difficulty or poor school adjustment fraught with conflict. In some cases acceptance will be based upon an awareness of the reasons for such behavior and a recognition that the group home might effectively reduce, control or change behavior through change in environment, therapeutically managed group living casework, psychotherapy, physical and medical care, and educational planning. The intake study, which combines the work of the case worker, the diagnostic evaluation of the psychiatric consultant, and the pre-placement staff conferences will be utilized to make appropriate decisions about program candidates.

(6) The candidate must be 13 to 17 years of age at the point of admission. Care may be continued through age 19 if necessary.

(7) Residence - a youth may be accepted anywhere in Pennsylvania. Out of state referrals may be considered. Preference and priority, however, is given to youth from Allegheny County and from the surrounding counties;

(8) Intelligence - a youth must have some indication of potential to function at an average level;

(9) School Achievement - It is not necessary that youth should have passed a certain grade level for admittance. However, some identifiable motivation for school work, regardless of academic achievement should be evident;

(10) Youth must be free from any contagious disease. Any physical handicaps must not prevent normal movement in and about the house or neighborhood nor should the handicap prevent a youth from living in a group which does not have immediate access to professional medical care or help;

(11) Custody - Youth must be in legal custody of a parent, the juvenile court, or a Social Service Agency. Legal custody should be clearly established and a plan for financial responsibility worked out prior to admission to Three Rivers Youth.

Prior to an agency request for a youth's admission, an exploratory phone call from the referring agent is desired for purposes of preliminary screening and subsequently the referring agency should write a referral letter to the agency and indicate the following: identifying information, reason for referral, social and development history, current situation and description of past and present functioning, physical health, findings of any psychological and psychiatric work-ups, an evaluation fo the child's need for group care and his ability to be maintained in a community setting.

A pre-placement visit is scheduled prior to admission. At the time of admission, the following current information and agreements should have

been obtained and clarified: Clarification of custody, verification of birth, placement agreement, current medical report (supported by medical examination immediately prior to placement), financial agreement or plan (covering board, clothing, allowance, special medicare, psychotherapy).

#### Professional Staff

The entire focus of the Three Rivers Youth program is treatment oriented; a multi-disciplined staff team approach provides a system of child care, group work, psychiatric casework, psychological services, individual and group therapy, psychiatric consultation, educational remediation, art therapy and vocational counseling. The emphasis is on individual treatment since no two boys or girls have identical backgrounds or problems.

The residential staff are the adults who live in with the youth and function in a dual capacity of semi-parental figures and a helping and counseling role. The above roles combine care and treatment in a manner that capitalizes on consistent daily relationships over a twenty-four hour period involving food, physical care, listening, understanding, affection, security and control. This environment, strengthened by the clinical staff and supplemental services, provides the necessary tools to work toward improving the youth's self-concept.

The group homes and residential staff are supported by a nucleus of central office clinical staff and supplemental services. Included in the above are: social workers (one assigned to each home), a group worker specialist, a psychologist, and art therapist, and educational specialist,

a psychiatrist, an intake worker, a community resource specialist, and Director of Child Care, the Director of Social Services, the Executive Director and the administrative and clerical staff. This structure enables Three Rivers Youth to provide a continuum of services and alternative approaches to the individual adolescent's treatment plan.

The professional personnel possess the highest levels of educational attainment; twelve hold the master's degree, appropriate to their fields of specialization. The majority of child care workers have a minimum of the high school diploma with some additional college courses to their credit. The administrative, clerical, and maintenance staff levels of education are commensurate with the requirements of their jobs.

In addition, Three Rivers Youth staff holds many leadership roles in youth service in the community such as:

1. Service on PARC Boards, MH/MR Boards, Allegheny Council of Children and Youth, Day Care, etc.
2. Service on task forces on youth service bureaus, zoning legislation for group homes, state committees on children and youth, area-wide child care training programs, Health and Welfare, Family and Children Services, education Juvenile Justice, etc.
3. Participation on Executive Committee of Association of Residential Youth Care Agencies, State Association of Children Services, etc.

There has been wide participation in regard to speaking to university groups, citizen groups and other agency boards.

Some staff hold university and college teaching appointments. Other agencies have used Three Rivers Youth program as a training base.

#### Service Functions

The program can be viewed as an interaction between and among three related service functions: (1) Residential Child Care, (2) Social Work and Psychiatric Services, and (3) Specialized Treatment Services.

The group residence is a focal point for staff consideration and program development designed to meet the individual needs and requirements of each youth. The residence offers family style treatment. Each home operates with "parent-counselors" who are present in the home 24 hours a day, and a "family" of eight to ten boys or girls between 13 and 18 years old. This milieu permits intensive interaction with the potential for therapeutic change in a comparatively short period of time.

With the augmentation of the staff as indicated above, the parent-counselor's role has been recently modified. They now hold jobs that are far more clearly defined than they were when the Three Rivers Youth began its work three years ago. In the planning stages, the Executive Director envisioned a counseling function built into the program and recruited personnel who manifested a personal warmth and an ability to establish rapport with emotionally disturbed adolescents. Such personnel would need to be familiar with the philosophy of the group home and its concern for the care and welfare of its charges to be effective. A regular in-service training program with special emphasis on adolescent growth and development, group encounters and effective human relations is provided

to these social workers to enhance their professional service, so that they can participate in team meetings and identify with and accept the strong feelings of the youths.

The social workers, under the supervision of the Director of Clinical Services, are responsible for the casework services with the youth and their families, as well as for the intake and placement of youths. Social casework analysis is an integral component of the program for two basic reasons: (1) it defines those child care needs that could best be met by social worker intervention during the initial orientation phase and (2) it provides baseline data for team planning among the professional staff for adolescents accepted into the program. This information allows the clinical staff to engage in clinical discussions concerning each child's program. The team concept permits an indepth approach to diagnosis and treatment and, as much as possible, determines the appropriateness of the service for a particular youth as well as the development of a well thought-out and accurate preparation for placement.

A consulting psychiatrist provides medical supervision of psychiatric cases, direct case conferences and in-service training sessions for staff. In emergency situations, the psychiatrist provides direct services and arranges for hospital admissions for youths who are too disturbed for staff intervention.

As part of the project operations, there are a group worker, community resource specialist, art therapy specialist and educational specialist. The full clinical team, i.e., the house parents and the above-named staff, utilizes every resource available to relieve the pain of emotional conflict

in order to foster self-growth and development and to point the way to maturity.

Three Rivers Youth is an agency designed to serve a specific population of adolescents and, in conjunction with other programs, provides specialized services, i.e., remedial education, art therapy and group activities. The educational program is designed to identify and educationally support those adolescents with deficiencies in reading, writing, spelling and arithmetic. Without specific remediation projects, there is a high probability that there will be a greater impairment to self-image, more emotional damage and decreased motivation to learn. Therefore, the major objective is to improve mathematical, reading and language skills by developing proficiency in visual and auditory perceptual skills, in written and oral expression and rate of reading and its comprehension and in appropriate areas of mathematics. A major thrust is to encourage school attendance and academic achievement as part of the self-improvement program, thereby raising the adolescent's opinion of his or her academic abilities by providing an opportunity for additional academic and vocational schooling and further educational enrichment.

The art therapy program, initiated in September 1973 is a component of the therapeutic process. Various artistic processes - drawing, painting, and sculpting - are means of creative expression and often serve as indicators of inner feelings in emotionally disturbed youth. With art therapy, each is personally involved with his art work; he has produced it and can speak about it, often helping him to reveal problem areas.

Group activities provide for use of leisure time and release of tension. The homes are cognizant of the boredom that often breeds negative reactions

and has supported a variety of activity programs by the staff. Thus, in addition to forming and encouraging group discussions and guided interactions among the youth, the group workers specialist has undertaken the responsibility of organizing house resources and activities involving little or no cost in the overall planning and execution of the program, in addition to field trips, visits to cultural centers, attendance at sporting events and the like.

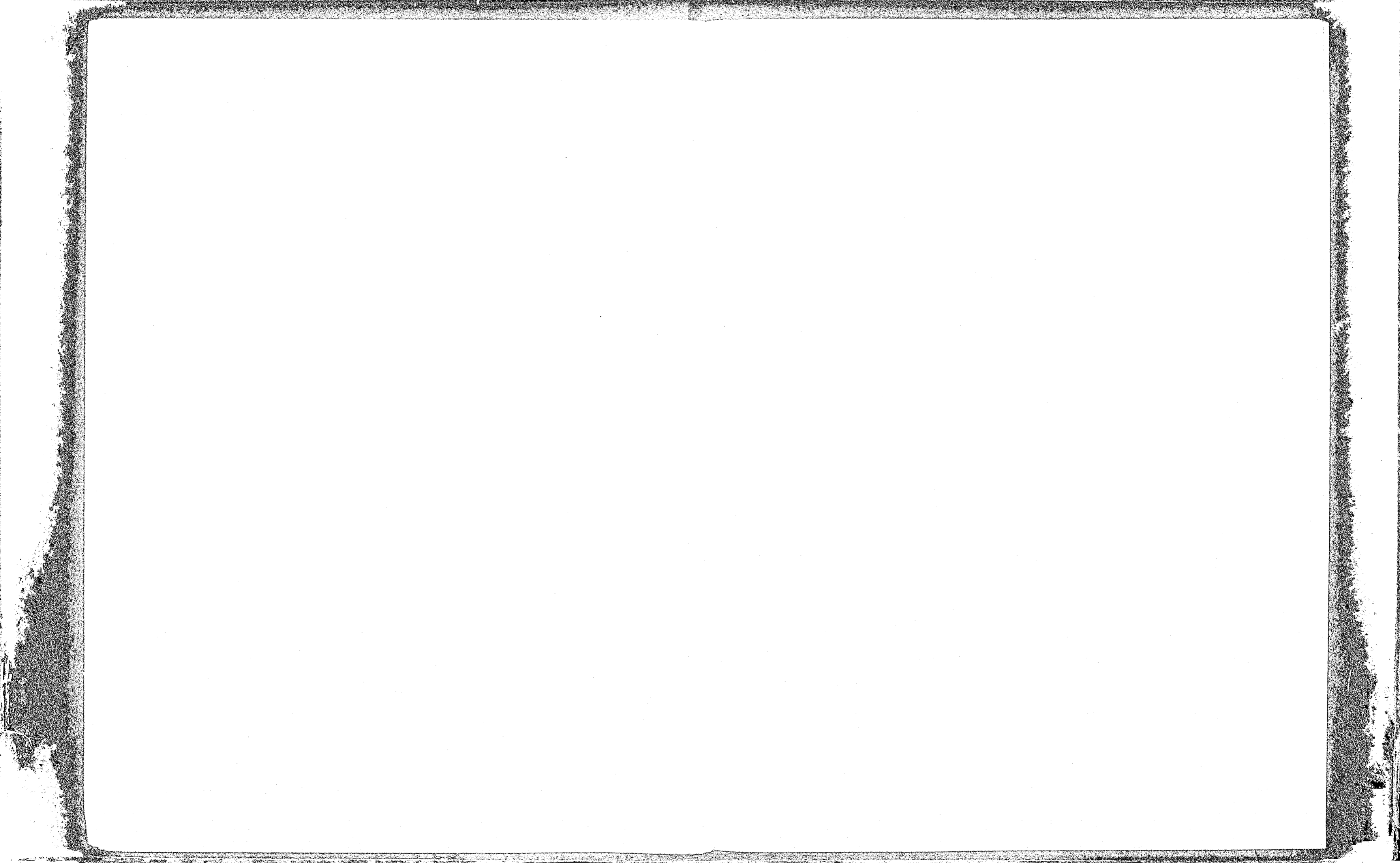
Group home services are closely related with the other social service and mental health programs, local projects, etc. Universities in the city are explored for their potential in regard to cooperative relationships which may benefit the program now and in the future. Staff members are encouraged to visit and utilize these agencies. The range of agencies providing services include:

- (a) Agencies involved in cross referral of cases, periodic conferences on common problems and agreements or understandings on conduct of various phases of the program.
- (b) Agencies and organizations providing health care services, such as, hospitals, clinics, neighborhood health centers, emergency services, and drug treatment centers, etc.
- (c) Agencies providing activity and job resources, such as, vocational rehabilitation centers, neighborhood youth corps, public libraries, art galleries, YMCA and YWCA, etc.
- (d) Church organizations offering religious attendance and affiliation.



(e) Agencies providing educational resources and facilities for maintaining clients in community schools including local and state, public and private, schools, museums, colleges and universities, etc.

(f) Organizations providing additional leisure and recreational activities for bowling, camping, skating, swimming, baseball, fishing, etc.



### Subjects

While 43 adolescents were enrolled in the program during the evaluation, not all of the youth were to continue in the program to make the necessary time requirements for pre-program and post-program assessment. A total of 26 youth were continued as participants in the evaluation. However, attrition subsequently accounted for an additional loss of seven youth, yielding a final total of 19 subjects for the evaluation.

### Data Analysis

The quantitative data collected at the beginning and end of the evaluation period were subjected to "t" test analysis for differences between correlated pairs of means (Guilford and Fruchter, 1973).

Tables 1 through 4 present the means and standard deviations of the pre- and post-test subscales as well as total scale scores for the Jesness Inventory, the Cornell Index, Behavioral Rating Scales and the Wide Range Achievement Tests. When pre-test data was returned to the evaluators, substantial data was missing or not available from the Revised Beta Intelligence Test and it was subsequently dropped from the analysis. In addition, one subject's responses on the Jesness and seven subjects' responses on the WRAT were not reported and were excluded from those areas of data analysis.

Since the primary purpose of the evaluation was to identify possible results worth further study and interpretation, the significance level was set at .10, rather than a lower level which would identify fewer significant results. Additionally, because of the small sample only the total test scores were subjected to statistical analysis because of their greater reliability. However, subscale means and standard deviations are reported.

To measure the effect upon the adolescents in the TRY program several measures were applied. For purposes of this evaluation, the Cornell Index and the Jesness Inventory were administered. Also, each child was rated by five staff members who have had an opportunity to observe and then rate each youngster on five factors. The behavior rating forms are contained in the Appendix 1.

#### The Jesness Inventory

Self-concept can be viewed as multidimensional. The degree of self-esteem, the level of dependency and emotional maturity, feeling of self-worth and the ability to withstand stress are all part and parcel of one's self-concept. The Jesness Inventory was selected to measure changes in this aspect of the personality because the instrument forced the adolescent to engage in a conscious self-evaluation and personal self-report.

The Jesness Inventory consists of 155 true-false items and provides scores on 11 personality characteristics as follows:

Social Maladjustment	Value Orientation
Immaturity Scale	Autism Scale
Alienation Scale	Manifest Aggression
Social Anxiety	Withdrawal Scale
Repression Scale	Denial Scale
Antisocial Index	

Table 1 presents pre-and post-test findings from the Jesness Inventory. Differences in the Jesness profiles between both test periods were found

to be nonsignificant. As mentioned above, the subscales were not subjected to further analysis because of the small samples involved. The data failed to support expectations of significant change in self-concept during the period of evaluation.

TABLE 1

Raw Score Means<sup>1</sup> and Standard Deviations  
for 18 Juveniles, Pre and Post  
Test, Jesness Inventory

SCALES	PRE TEST		POST TEST	
	MEAN	SD	MEAN	SD
Social Maladjustment	63.17	7.82	64.89	11.75
Value Orientation	57.50	9.35	57.11	10.31
Immaturity	60.17	8.92	56.00	11.77
Autism	59.67	9.15	62.00	9.21
Alienation	59.94	10.90	57.83	7.91
Manifest Aggression	52.28	10.91	54.39	13.25
Withdrawal	54.67	10.91	53.94	11.48
Social Anxiety	49.83	10.26	48.78	11.53
Repression	55.17	10.20	53.50	8.26
Denial	40.67	9.91	41.33	6.33
social	66.17	10.90	64.78	11.92
Total Score	56.29	5.21	55.95	6.52

1. Differences between pre and post test total score means are nonsignificant at the .10 level.

### The Cornell Index

The Cornell Index, a self-administering, 101-item questionnaire, furnishes a list of psychological symptoms and serves as a measure of change in symptom complex. The language is nontechnical and requires only a grade school education to answer it. The Cornell Index contains questions concerning subject defects in adjustment expressed as feelings of fear and inadequacy, mood reactions and depression, nervousness and anxiety, neurocirculatory symptoms, hypochondriosis and asthenia, gastrointestinal symptoms, sensitivity and suspiciousness, and troublesome psychopathy.

Table 2 shows the means and standard deviations of the pre- and post-testing on the Cornell Index. Differences between pre- and post-measures of the total scores were found to be significant at the .10 level. This would indicate a reduction in the degree of general abnormality in personality functioning during the treatment program.

TABLE 2

Means<sup>1</sup> and Standard Deviations  
for 19 Juveniles, Pre and Post  
Test, Cornell Index

CATEGORY	PRE TEST		POST TEST	
	MEAN	SD	MEAN	SD
Fear & Inadequacy	6.53	3.91	4.58	3.41
Depression	2.68	2.14	1.90	1.52
Nervousness & Anxiety	3.11	1.94	2.68	2.26
Neurocirculatory Symptoms	2.21	1.78	1.32	1.46
Startle Reactions	3.16	2.50	2.53	2.50
Psychosomatic Symptoms	3.11	3.38	2.32	2.45
Hypochondriasis & Asthenia	2.05	1.68	1.90	1.45
Gastrointestinal Symptoms	2.21	2.51	1.42	1.64
Sensitivity & Suspiciousness	2.68	1.49	2.16	1.77
Troublesome Psychopathy	4.84	2.85	5.53	3.52
Total Score	3.26	1.94	2.63	1.81

1. Differences between pre and post test total score means are significant at the .10 level.



Behavioral Rating Scale

The behavioral rating scales are comprised of five sub-scales per rater yielding a total score. The scales generally contained items concerning attitudes toward authority, conduct, emotional maturity, personal hygiene, and interpersonal relationships.

Each of the five items on each scale was rated in terms of a numerical score ranging from 1, denoting little or no progress to 5, noting positive progress toward re-culturation. The initial ratings were completed as part of the admissions procedure. These observations were based on rater impressions and clinical judgments as well as past history, including school, court and agency records.

The total scores, pre- and post-, were subject to "t" test analysis and were found to be nonsignificantly different at the .10 level. The findings are presented in Table 3.

Table 3

Means<sup>1</sup> and Standard Deviations  
for 19 Juveniles, Pre and Post  
Test, Behavioral Rating Scales

	<u>MEAN</u>	<u>SD</u>
<u>PRE TEST</u>	11.65	2.45
POST TEST	12.62	1.72

1. Differences between pre and post test means nonsignificant at the .10 level.

The Wide Range Achievement Test

The content of the Wide Range Achievement Test (WRAT) includes three sub-tests: reading, spelling and arithmetic computation. The reading test consists of the successful recognition and pronunciation of 120 words; the spelling test consists of 100 words sequentially arranged in difficulty; the arithmetic test consists of 79 computation items.

Table 4 presents the means and standards of these three components of the Wide Range Achievement Test. The three scales were subjected to "t" test analysis. While there were no significant differences in the reading and spelling scores between both time periods, there was a significant improvement ( .10) in reading scores over the same time period.

TABLE 4

Means<sup>1</sup> and Standard Deviations  
for 12 Juveniles, Pre and Post  
Test, Wide Range Achievement Test

SCALES	PRE TEST		POST TEST	
	MEAN	SD	MEAN	SD
Reading	69.50	27.29	78.92	31.90
Arithmetic	53.00	19.79	56.00	17.43
Spelling	60.00	27.47	61.92	24.98

1. Differences between pre and post test mean reading scores significant at the .10 level.

Discussion

Clinical and academic achievement measures were incorporated into the evaluation process to provide a "nonsubjective" estimate or benchmark of specific changes in TRY program participants as a result of the project.

While the pre-and post-data failed to support the effect of significant changes in major personality characteristics of the participants, there was a significant reduction observed in the overall general abnormality profile of the participants at the end of the evaluation period. Perhaps the home environment reduced a preoccupation in physical complaints from a setting of a more stable living environment.

Usually the maturation of subjects should be taken into account in any final interpretation of pre- and post-measures of academic achievement. However, it should be noted that most of the participants in the present study have had poor school attendance records prior to TRY and may not be as comparable to students who have shown continuity in school attendance where there was and may explain more of the variation in post-test scores.

Since there was no significant difference over this period in arithmetic and spelling scores, one could again question the effect of "maturation variance" on the scores for these sub-tests.

There was a significant increase in reading scores between both time periods, which may be explained by the emphasis in reading development by the educational specialist.

One must exercise caution in the interpretation of these findings, due to the small number of subjects finally included in this study. Also the transiency in TRY test administration may have also influenced the findings. However, it may be useful to examine the directions of some of the nonstatistically significant results although this should be done in a tentative manner.

Program Cost Effectiveness

In order to establish a basis for determining the program cost effectiveness, it was deemed necessary to consider the following:\*

- 1) estimated savings to Criminal Justice System in the region, and:
- 2) estimated efficiency of expenditures for direct and indirect services.

The first order of magnitude was cost savings to the Criminal Justice System. TRY, in a letter of February 14, 1975, requested the Allegheny Regional Planning Council, Governor's Justice Commission, to furnish an estimate of the cost savings resulting from TRY's diversion program. This data is presented in Table 5.

TABLE 5

Savings in Time and Money  
by Diversion of Youth from  
the Juvenile Justice System to TRY

	<u>Days &amp; Years Saved</u>	<u>Cost/Savings</u>
Juvenile Intake	35.8 days	\$ 4,146
Juvenile Detention	591.3 days	20,004
Court	115.6 days	75,072
Probation	16.8 years	5,465
Institutionalization	6.9 years	<u>122,601</u>
	Total	\$227,287

\*Though data concerning the estimated value of community resources and facilities, lives saved, decriminalized and deinstitutionalized, were to be included in this evaluation, the evaluator was unable to obtain this information pertinent to this component or analysis.

According to the Council, as noted in Table 5, the diversion of 45 youths to TRY decreased the overall workload of the Juvenile Court System by 1.7% in 1973. The equivalent savings in costs amounted to more than two-hundred-twenty-five thousand dollars, a figure that amply justifies the value of community group homes.

Excluding administrative overhead required for the administration and operation of the central office, salaries of the executive director, the administrative assistant and the secretary, all operating expenses are directed toward the youth: residential child care and services, social, psychiatric and clinical services, adjunctive treatment services, general maintenance of the five homes and other child care welfare and related needs. Table 6 presents expenditures for direct and indirect services according to function.

TABLE 6

TRY Expenditures for  
Direct & Indirect Services

AGENCY SERVICES	FISCAL YEAR EXPENSES		
	1975	1974	1973
1) Management & General*	46,960	45,180	34,475
2) Fund Raising	--	--	121
3) Community Services	4,542	3,954	3,631
4) Student Training	1,688	1,770	1,412
5) National Dues & Support	353	353	--
6) Residential Child Care	410,844	461,809	292,852
7) Social, Psychiatric & Clinical	85,873	95,606	61,565
8) Adjunctive Services	9,249	9,192	5,001
9) General Maintenance	31,990	34,048	25,784
Total Costs	\$591,499	\$651,852	\$424,841
Percentage of Expenditures for Administrative Services	7.94	6.92	8.11

\*Although costs of community services, student training and national membership dues are relatively small, they are included under direct services because they are an integral part of the total services directed to youth.

Each home operates on an annual budget of approximately \$14,000 per year, not including rental costs or personnel staffing. As expected, major disbursements are for food, clothing and utilities, although local transportation and maintenance and repair costs are substantial.

#### Finances and Budget

Three Rivers Youth has the responsibility for maintaining its financial solvency through such means as setting and collecting fees, and obtaining endowments or other public or private support.

The project conforms to applicable legal requirements and sound business practices compatible with its goals. The accounting practices conform to the standards of social welfare organizations and adhere to the functional classification system of the Health and Welfare Council.

The Executive Committee, the Finance Committee, and administrative staff, use the budget throughout the year. Operating fiscal reports are available on a monthly basis to the committees and the Board. Comparisons of actual experience with budgeted figures are used continually by staff.

## CONCLUSIONS &amp; RECOMMENDATIONS

The primary objectives of Three Rivers Youth are to provide group-living experience for children and adolescents in a family type home in which the group itself is regarded as a significant treatment entity with most educational, employment and recreational activities provided by the community based programs. The core program of clinical services is well organized and presents, through the team management, a delivery system of direct and indirect services.

The clinical evidence, based on observations and interviews by the evaluators, demonstrates the overall effectiveness of combining a group-home atmosphere where youngsters are warmly and sympathetically accepted and appropriate differential treatment programs, directly from within the group home and indirectly from the community. When considered against family backgrounds of disorganized living, divorce, separation, alcoholism, brutality and poor supervision, the improvement in their behavior and attitudes is dramatic proof of what good care and treatment can accomplish. Moreover, not only have the youngsters been helped but the state has been spared the investment of large sums of money in new buildings, rent or staff

The present funding has enabled Three Rivers Youth to expand its direct services, magnifying the value of the project. There has been no additional increase, proportionally in administrative costs. As a result, there has occurred a corollary reduction in the percent of funds expended for administrative operation resulting from the funneling of funds into direct



services - primarily for the youth in Orientation House and the introduction of the orientation program into the total program is one of its outstanding accomplishments of 1974. The addition of that particular program has been able to help serve the youngsters who are referred and to achieve major goals and purposes. All of these youths are still in some type of school program and/or vocational/educational program. The programs range from those sponsored by the school system, to special private schools, to BVVR classes, and Neighborhood Youth Corps programs.

Current indications show that of the first group tested, all have had very noticeable decline of antisocial behavior. In looking at the total program over the past four years, the rate of youth who are runaways from the program has only been 8.9% and each year there has been a decline in this particular problem. During 1974, the rate of runaways was only 2.6%. This has usually been a major problem in child care institutions.

The child care staff now holds jobs that are more clearly defined than they were when Three Rivers Youth began its work three years ago.

The staff is more experienced and better equipped but the need for more experienced personnel has led to improved selection procedures and a consequent reduction in staff turnover. This marked improvement in the present staff as compared with earlier staff patterning is quickly discernable.

The system at Three Rivers Youth is an active one where the youth residents have to do things for themselves in participant roles rather than waiting or demanding that others do something for them. Behavioral

changes manifested through a reduction in personal general abnormality have taken place over a period of months as evidenced in the data. The staff is involved daily from the social worker, who works intensively with each youngster under supervision and the parent counselor who oversees the day-to-day routines, to the treatment staff members who provide the individualized or group therapy and/or academic assistance and/or art therapy. This kind of intensive treatment and care is rarely seen in institutions and the youth are keenly aware of it and appreciatively respond to it. This can readily be noted in the reduced number of runaways and the personal involvement in the home. One could conclude that the home settings and the personal and sympathetic care and treatment have a salutary effect upon them.

Since psychotherapy could not be provided, due to the absence of a clinical psychologist, the question arises as to how much this additional treatment could have contributed to the results. Past experience would indicate that it could be very effective in reinforcing control of behavior and focusing the resident's attention on group experience as a modality for dealing with his problems. Group therapy, in addition to that provided by the group worker, could have afforded more opportunity for the individuals to confront each other with their behavior which could then be reflected back to individual interviews for further investigation. It is difficult at this juncture to speculate about individual psychotherapy in the group setting.

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However, with a highly experienced clinical staff and a psychiatric consultant, it is felt that adequate results from the utilization of

clinical psychological services could be obtained through cooperative efforts with community agencies. More recently, Mercy Hospital's Psychology Department has offered its facilities and staff with some success. Also, plans have been completed to conduct group therapy sessions with a selected group of female residents, led by third-year psychiatric students through an arrangement with the Pittsburgh Child Guidance and Mental Health Base Service Unit.

Interviews with the adolescents at each home reflected their overall satisfaction with the home settings. Since the homes are conducted for the sole purpose of providing care and maintenance at each home and there are no clinical/professional staff or administrative staff members located in the homes, they are viewed strictly as homes and the youngsters appear to respond accordingly. They appreciate the home environment and assume household chores and other home responsibilities. Other professional and direct services are provided by visits by the youths to the community agencies having such services. Unlike insitutional placements, far from the residents' home setting, the adolescents live in homes in neighborhoods compatible with their own. The readjustment upon termination of the TRY program is simpler and makes more sense to the youngster.

We are of the opinion that the Three Rivers Youth program concept and the differential treatment program it offers possess substantive components that could be emulated in other jurisdictions. The per capita cost per resident is relatively lower than other residential centers or institutions. As the project expands its direct services and maximizes the utilization

of its staff, the immediate costs should be reduced proportionately, yielding a low administrative overhead. The total program shows dynamic strength and the close coordination among the staff members, through appropriate team committees, which enhances the program's overall effectiveness. The success of Orientation House as a coeducational facility justifies the establishment of another coeducational group-home for the emotionally disturbed nine-to-thirteen age group for whom little is presently available.

The involvement of community agency services is of paramount importance in extending the range of direct and indirect services now provided; there has been a greater utilization of and participation with community agencies in the metropolitan area of Pittsburgh.

The improvement in educational performance is of crucial importance since academic achievement is readily observed by the youth and tends to enhance their self-concepts and feelings of self-confidence. A major thrust in this area should be directed to the public school system.

Assistance from the public school system in providing additional resources should be explored. Education rehabilitation should not be restricted to remedial reading and arithmetic - though they are of primary importance - but should be directed to other areas of skill training, such as, modern consumer education aimed at survival in a competitive environment, or personal grooming.

This evaluative study during the past year has concentrated on the development and implementation of strategies for measuring outcomes of this

program. Sufficient time should be allowed the "treatment effect" of the group-home milieu if competent and accurate decisions are to be made regarding the program's attainment of its goals.

The test battery utilized in the project, while potentially useful and informative, requires modifications and greater implementation. While the initial proposed battery of tests is deemed adequate, insufficient pre- and post-data from the TRY staff, reduced the effectiveness of this component.

The small number of cases included in this survey raises the question of how readily these findings can be generalized. Although the answers must come from other studies, it is our general conclusion that the group-home concept, flexible differential treatment programs and community resource participation are essential ingredients in the successful application to the emotionally disturbed adolescent. Comparisons with other groups and with youngsters who were "patients" in prior years to support the thesis that the TRY program works and can be maintained effectively and efficiently in the community.

Continuing in-service training programs and University intern training programs (to maintain a ready resource of qualified personnel in the event of expansion or attrition) are recommended, and implemented with special emphasis on adolescent growth and development, behavioral psychopathology, effective human relations sensitivity training, psychodrama, encounter group structure and other related courses. All staff members should be in a program of self-development through participation in in-service programs and related regional and national conferences and meetings with funds set aside for that purpose.

A bibliographic reference file and staff library would prove beneficial and stimulating toward in-depth reading and study.

In the area of personnel staffing, a decrease in employee turnover during the probationary period would be desirable and TRY has introduced an in-service training program for its child care and clinical staff. Greater attention should be given to improved recruitment and selection and intern training, in conjunction with local academic facilities, and expanded as a potential resource for professional staff appointments. Personal growth and continuing journal and other literature review should be mandatory requirements for staff members to assure overall effectiveness of TRY programs. In-service training related to the emotionally disturbed adolescent and their problems and conflicts is recommended.

The curriculum could include formal college classroom instruction to include principles of normal child development and professional practice in child care work. Ongoing lecture seminars, workshops, discussion groups, and special guest presentations provide a variety of methodologies for teaching and imparting knowledge about effective child care practice. Field trips to other child-care agencies for purposes of observation and exchange of ideas are more informal ways of learning new techniques and sharpening others.

The potential of community agency resources, public and private, has only been tapped and Three Rivers Youth is endeavoring to expand this fertile field. Three Rivers Youth works closely with a variety of community agencies to provide a continuum of services difficult to duplicate. In

attempting to derive maximum utilization of all available resources, TRY maintains a type of symbiotic relationship that should be cultivated and encouraged so that wherever possible, at little or not extra cost, indirect services can be provided as an integral part of the total program of TRY. It would be desirable to formulate policies and procedures establishing the functions of the Community Resources Specialist as a means of integrating and coordinating the efforts of individual houseparents, social workers, and other specialists.

The Three Rivers Youth project contains many elements that have proved effective in modifying adolescent behavior problems and they deserve continuous monitoring and evaluation. Much of the data being collected and analyzed is centered about the present evaluative effort. No staff person was available during the early phase of, or on a continuous basis of, the project's development and growth. Based on our experience, it is recommended that ongoing research incorporated into the project's operation, should include a part-time consultative service convenient to the project, since staff members are too involved with day-to-day operations and do not have the research training or sophistication, nor the patience to concern themselves with this phase of evaluative research. A consistent and meaningful record system, necessary to the achievement of these goals, should be integrated with the plan in order to provide a full range of informational data about the program.

To maximize the utility and efficiency of this type of program, we would recommend that the overall Three Rivers Youth administrative structure be expanded to include a minimum of two additional homes in order to maximize flexibility and provide for needed additional facilities and services.

Also, it is suggested that Three Rivers Youth consider the feasibility of establishing homes for younger applicants at a later date. It would be feasible to increase the number of group homes and their required staffing without expanding the care of clinical specialists or top administrative personnel.

Finally, this evaluation would not have been possible without the foresight of the Executive Director who conceived and designed the original plan and brought forth, and implemented by a knowledgeable and skilled staff, a coordinated program of group homes, differential treatment and community involvement.



## BIBLIOGRAPHY

J. P. Guilford and Benjamin Fruchter, Fundamental Statistics in Psychology and Education, Fifth Edition, McGraw-Hill, New York, N.Y. 1973.

APPENDIX 1

Behavior Rating Forms

Report of Caseworker/Field Supervisor/Group Worker

Name of Client: \_\_\_\_\_

Date of Report: \_\_\_\_\_

Name of Rater: \_\_\_\_\_

Please rate the above named by circling one number in each category below and total the score at the bottom of the page. Return this form to \_\_\_\_\_, not later than \_\_\_\_\_.

	1	2	3	4	5
<u>Social Maturity</u> ability to deal with social responsibility	very inferior	slightly inferior	average for age	above average	very superior
<u>Emotional Maturity</u> tendency toward sudden or marked changes in mood	Yields to emotions, easily frustrated	mood swings, easily upset	occasionally upset, controls emotions	fairly confident; stable	not easily upset, handles frustrations
<u>Attitude Toward Authority</u>	poor relationships, negative, resentful	aggressive, suspicious, irritable	average for class; compliant	accepts rules, positive attitude	personable, friendly, responsive to leadership
<u>Emotional Security, Self-Image</u>	very insecure; poor self-concept	apprehensive, fairly insecure, failure	fairly secure	very secure; good self-concept	extremely secure; strong self-concept
<u>School Conduct</u> ability to accept rules & regulations; troublesome; truants frequently	very serious disciplinary problems (frequent)	occasional truancy; troublesome behavior	average class conduct	good conduct; responsive in class; only occasional absences	very good conduct good attendance

Total Points \_\_\_\_\_

Report of Educational Specialist/Teacher

Name of Client

Date of Rating

Name of Rater

Please rate the above-named by circling one number in each category below and totaling the score at the bottom of the page. Return this form to \_\_\_\_\_, not later than \_\_\_\_\_.

	1	2	3	4	5
<u>Achievement</u>	much below ability (inferior)	below ability (slightly inferior)	normal rate average	above ability (slightly superior)	above expected (very superior)
<u>Respect for Authority</u>	very resistive, rude	occasional resistiveness	abides by rules	accepts values	works well without supervision
<u>Classroom Conduct</u>	disciplinary, very aggressive, negative	troublesome, aggressive	average, fairly aggressive	superior, occasionally aggress.	exceptional, rarely aggressive
<u>Attendance</u>	frequently absent, indifferent	irregular attendance, uses excuses	occasionally absent	rarely absent	very rarely absent
<u>Emotional Stability</u>	apathetic, withdrawn	sad, unresponsive	average, usually well-balanced	cheerful, active	very cheerful, willingly participates

Total Points - \_\_\_\_\_

Report of Real Parent/ Parent Surrogate/Child Care Worker

Name of Client

Date of Rating

Name of Rater

Please rate the above named by circling one number in each category below and total the score at the bottom of the page. Return this form to \_\_\_\_\_, not later than \_\_\_\_\_.

	1	2	3	4	5
<u>Personal Hygiene</u> neatness, cleanliness, health habits	sloppy, dirty, very poor health habits	under average	average appear- ance, cleanliness	better than average	neat, clean, very good habits
<u>Attitude toward Authority</u> polite, cooperative, responsive to supervi- sion	rude, resentful, quarrelsome, re- bellous, very uncooperative	argumentative, hostile, uncooperative	abides by rules	polite, responsive	comfortable, responsive to supervision
<u>Room Appearance</u> cleanliness, orderly	sloppy, unkempt	needs prodding	occasional slips	responsive to direction	always clean, well kept
<u>Conduct</u> quiet, considerate, well mannered, careful with property	loud, boisterous	generally immature, self-centered	conducts self well, occasionally loud, playful	courteous	well mannered, courteous
<u>Relationships</u> introvert-extrovert, security, apprehensive, suspicious of others	very introverted, insecure, sets poor example	introverted, withdrawn, apprehensive	usually con- siderate, average	fairly extro- vert, secure	extroverted; sets good example

Total Points \_\_\_\_\_

**END**

*7/22/50*