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Exit training for youngsters in residential care Treatment to prevent homelessness

Summary

Exit-Training (ET; in Dutch: VertrekTraining) is a newly developed treatment program for juveniles who are at risk of becoming homeless after leaving an institute for residential care. The juveniles (15 years and older) are selected for ET with a specially developed screening instrument. ET is intensive and short: the training lasts ten weeks; the trainer works with every juvenile on an average about twelve hours a week. The main objective of ET is to prevent homelessness. Important objectives in every training are: 1. finding and keeping a stable place to live; 2. creating and keeping a legal and sufficient income for living and spending money in an adequate way; 3. finding and keeping work and/or school; 4. creating and keeping a network for social support. ET has two characteristic elements: enhancing of social competence and enhancing social support. ET is developed in a long term experiment and development-project which started in 1994 by the Netherlands Institute of Care and Welfare (NIZW), in co-operation with the Paedological Institute, department of behaviour therapy (Amsterdam), 'Bureau Instap' (an organisation specialised in working with homeless youths) and the Research Centre for Youth Care (University of Leiden). The development-project consists of three stages: a preparation stage, a demonstration stage and a consolidation and diffusion stage. The ET project is accompanied by independent empirical research. This empirical evaluation leads to the conclusion that ET is a feasible program for youngsters at risk of becoming homeless and has promising results. Up till now the target group of ET contains high risk juveniles. At present applications for a broader target group are being developed.

Introduction

Homelessness of youngsters is a major social problem. In the past few years Dutch media frequently paid attention to this subject. The size of the group of homeless youngsters in the Netherlands is not precisely known. Estimates vary considerably; depending on the definition of homelessness that is used. In the research literature numbers are reported ranging from a few hundred to several thousands.

In the beginning of the nineties the Ministry of Welfare, Public Health and Culture (WVC) announced the intention to stimulate policy initiatives and projects that might contribute to the improvement of the range of services for this category of youngsters. In 1993 the governmental publication 'Youth deserves a future' appeared. In this publication the Ministry proposes a two-track policy. On the one hand the government stimulates innovations aimed at the increase of the service provision, in the form of specialized care teams and social pensions. On the other hand the government wants to realize a more preventive policy with regard to homelessness, by improving the preventive interventions in programs of youth care organizations.

The experience in specialized care teams, such as the Homelessness teams (T-teams) and projects such as 'Homeless young people in Amsterdam', is that relatively many homeless young people have a residential care history. De Bie and Dortmans (1990) and Van der Ploeg, Gaemers and Hoogendam (1991) affirm this fact in their studies. Apparently it is very difficult for a number of youngsters to move successfully from the rather protected residential environment to the complex and demanding civil society. These youngsters often lack essential practical and social skills and a supporting social network. This was one of the main reasons for developing the Exit Training (ET), a preventive program within residential organizations.

ET is a short-term, intensive training for youngsters of 15 to 21 years of age, who are at risk of becoming homeless or who already have become homeless. The youngsters who belong to the target group of ET are characterized by:

1. a restricted social network, so that they have little or no opportunity of falling back on their families or other people for social support;
2. insufficient skills to function independently, in combination with problematic behavior;
3. insufficient opportunities, skills, and support to find their way to organizations for education, housing, and social services.

In a period of about ten weeks the trainer and the youngster try to create a new living environment for the youngster and conditions that facilitate the integration or reintegration of the youngster in society. The training focuses on goals that are related to various areas: living conditions, daily activities (school and work), recreation, finances, and a social network.

In the first part of this paper the methodical aspects of the ET program are presented. The second part deals with the implementation of ET in the pilot phase. The third part describes the results of an empirical evaluation of ET. The emphasis will be on the screening procedure used to select participants for ET and the results of ET.

The program

For whom was ET developed?

ET is an intensive treatment program for youngsters who are at risk of becoming homeless or already have become homeless. These youngsters generally are in a downward spiral of disappointments, inability to cope, and relative isolation. It is a socially vulnerable group, whose future prospects are, in general, not very bright. They have severe problems in several areas.

Usually there is a lack of skills in combination with problematic behavior, such as aggressive or withdrawn behavior, truancy, (petty) crime, alcohol or drug abuse and dropping out of school. Due to a defective social network these youngsters are hardly able to fall back on relatives or other people who are able to provide social support. The youngsters have great difficulty finding their way to social services, such as education, work, housing, and social security.

ET was originally developed for 'youngsters at risk'. By this we mean youngsters who are staying in institutions for residential youth care and who, due to a very unstable family background and/or former vagrancy, have a greater risk of becoming homeless after their (unplanned) departure. Meanwhile the target group of ET has been extended. Now the training is also offered to youngsters who already have become homeless. They have a lot in common with youngsters at risk. The main difference is that in their case the risk has become reality. For this category of youngsters it is ET's goal to create a perspective after a period of homelessness.

Thus ET is now focused both on youngsters who run the risk of becoming homeless and youngsters who already are. Mark is a fictional ET participant belonging to the original target group of ET. Mark's case is composed of elements of various youngsters who participated in ET so far.

Mark

Mark is seventeen and has been living in foster families and residential institutions since he was three. His mother worked as a prostitute, his father was an addict. When he was twelve, Mark lived with his father for a while. His father had just kicked the habit and was living temporarily with his mother, Mark's grandmother. Although this period went well, Mark was placed in care (removed from home) again after a year and a half. According to his file this was due to '(...) a high degree of incorrigible antisocial behavior at school and out of school'. Things haven't been going well lately at the institution where Mark is now staying. Three months ago Mark was caught in possession of XTC pills. This incident was the first in a series of conflicts with the residential group care workers. Mark repeatedly stated that he was fed up with the group care workers' 'bullshit' and threatened to run away. Once he carried out his threat. After a weekend at his grandmother's he did not return immediately. He turned up only five days later.

Once it is clear that Mark will participate in ET, the group care workers and the Exit Trainer make the agreement that Mark is allowed - under certain conditions - to remain in the group for a few more weeks, in order to be able to make a good start with ET.

Integration of elements of existing care programs

ET is a combination of practical, material, and psycho-social help. The training program is an integration of support and treatment forms that were developed in the Homelessness teams (T-teams) of Bureau Instap and by the department 'Behavioral Therapy Projects' of the Paedological Institute Amsterdam/Duivendrecht. The approach of the T-teams focuses on the social environment diagnosis and the mobilizing of important persons and agencies that may support the youngster (Van Susteren, 1993). The department of Behavioral Therapy Projects have

become well-known through the development of nonresidential and residential programs to improve the competence of children and adolescents with behavioral problems (see for example Slot, 1988; Berger and Spanjaard, 1996).

A short-term and intensive training

The Exit Training is executed individually and lasts ten weeks. Every week the Exit Trainer has several sessions with the youngster, which may be also outside office hours. Some of these appointments take place in the office, but the youngster also goes out with the Exit Trainer to visit schools, social services, important persons for social support and the like. Sometimes the contacts last half an hour, sometimes they last all day. This depends on the daily occupation of the youngster and the times at which agencies and important persons from the social network can be visited. The Exit Trainer should have a flexible agenda and a very limited caseload (a maximum of three youngsters at once). An Exit Trainer can devote an average of 12 hours per week to each youngster. The individual nature and the high frequency of contacts make ET a very intensive form of social work.

An important starting point of ET is that the trainer links up with the (potential) strength of the youngster and his/her social environment. Together with the youngster, the Exit Trainer will look for strong points and for important social contacts that might help and support the youngster. In addition, the Exit Trainer will strongly focus on the future. Creating and using new possibilities are emphasized rather than discussing (or 'providing insight into') old problems.

The goal of each ET is the creation of a new social environment and of conditions that improve integration or reintegration of the youngster in social life. Activating the youngster is an important part of the training. The ET should result in the youngster finding daily occupation, arranging financial matters, and actively creating an adequate network in his/her new living environment. In the course of time the role the trainer has will change from that of an leader to that of a coach.

Gathering information

In the first weeks of ET the trainer uses various means to gather and analyze information with the youngster's co-operation. This starting phase is also used to formulate the goals the youngster wishes to achieve. The trainer makes use of the instruments that will help to clarify:

- what the youngster's daily life is like at present;
- how the youngster sees his/her future;
- what his/her social network is like (in the past, the present and the future);
- which goals are important to the youngster.

In gathering the information, areas of life that are important to youngster are looked into. Therefore the trainer uses the developmental psychological concept of 'developmental tasks'. The idea behind developmental tasks is that in every stage of life certain themes are relevant. These themes will usually be made concrete by tasks that require skills. Fulfilling developmental tasks is an important condition for an optimal development process.

In Table 1 the developmental tasks for youngsters are distinguished. For youngsters in

special circumstances extra developmental tasks may apply. This is the case, for example, for black and minority ethnic youngsters growing up in two cultures.

Table 1. *Development tasks for youngsters between the ages of ± 14 and 21 (derived from De Wit et. al. (1995) and Slot and Spanjaard (1996))*

Development tasks for youngsters (± 14 -21 years of age):

1. *Setting up new relations with the family:* becoming less dependent on the parents and determining one's own position within the changing relations in the family and in relation to relatives.
2. *Participating in education or work:* acquiring knowledge and skills in order to have a profession and making choices with regard to work.
3. *Utilizing spare time:* participating in fun activities in one's spare time and passing the time in a useful manner when there are no obligations.
4. *Creating and maintaining one's own accommodation and life situation:* seeking or creating a place where one can live well and being able to interact with housemates.
5. *Dealing with authorities and agencies:* accepting that there are agencies and persons above oneself and promoting one's own interests within the rules and codes that apply.
6. *Taking care of one's health and appearance:* taking care of a good physical condition and appearance, good nutrition; avoiding excessive risks.
7. *Building and maintaining social contacts and friendships:* making contacts and maintaining them, being alert to what contacts with others may produce, being open to friendship, giving and accepting trust, mutual acceptance.
8. *Giving intimacy and sexuality a place:* discovering the possibilities and desires in intimate and sexual relations.

For both the gathering of information and the building of a new supporting network various persons are visited, such as parents, relatives, teachers, and friends. After talking with various persons, more clarity is achieved regarding the youngster's possibilities and problems. In addition a first impression is created of who can help and support the youngster later on.

With the trainer the youngster formulates final and intermediate goals towards which he/she wants to work during the training. Therefore the Exit Trainer uses eight 'goal cards', one for each development task. Each goal card contains a list with possible wishes for change regarding the development tasks involved. The youngster fills in his/her wishes on the goal cards and then selects which points are most important. Working with goal cards increases motivation: the youngsters themselves indicate what they would like to change. Through the examples on the cards they gain insight into the various subjects the training can deal with. In addition, working with goal cards presents the youngster with an opportunity to come forward with sensitive information. Quite often youngsters will mark wishes that they would be unlikely to reveal of their own accord or that the social workers would hesitate to inquire after. Examples are 'less gambling', 'avoiding fights with physical violence', or 'protecting myself against being raped'.

The ultimate goals of ET are concrete and refer to several areas: living situation, daily occupation (school and/or work), recreation, financial matters, and social network (relatives,

friends, etc.). The goals may be 'small' (such as finding a job for Saturdays), or 'big' (such as learning to handle conflicts). Agreements are made on the contents and priorities of the goals and these are laid down in a contract.

Mark in the picture

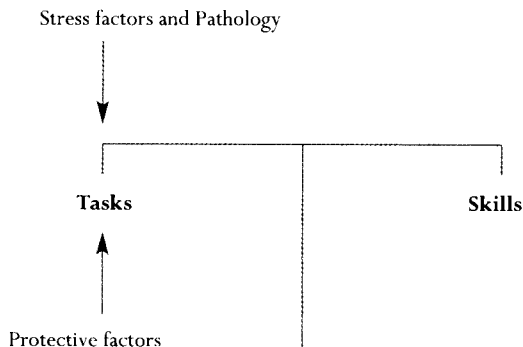
During the first two weeks of ET Mark is in almost daily contact with his Exit Trainer. What he has been doing in the past week, not just during the day but also during evenings and nights, is written down on large sheets of paper. Mark is asked to take the Exit Trainer to the places that are important to him. In doing this the exit trainer gains important information about Mark, his interests, his friends, practical and social skills as well as his skill deficits, and also some personal things that Mark would not have mentioned otherwise. On a set of 'goal cards' Mark ticks off the matters that are important in his life and/or the things he would like to change. Some subjects that Mark ticks off and that are on top of his list are:

- finding someone who will make me happy;
 - quitting arguing and fighting;
 - patching up the quarrels with my parents;
 - having a room of my own;
 - using less drugs;
 - protecting myself against being raped;
 - finishing school.
- Filling in the cards amuses Mark, as does drawing a 'life line' which clarifies his view of the future (when he will be eighty, fifty, thirty and twenty years old).

Analysis

The competence model is an important guiding principle for the Exit Training. The trainer makes a competence analysis to gain insight into the balance of tasks and skills and its influence on risk factors and protective factors (see figure 1; Slot and Spanjaard, 1996; Spanjaard, 1996).

Figure 1. *Factors that influence the balance between tasks and skill*



For each development task there is an analysis of the tasks a youngster will have to face now or in the near future and the extent to which the youngster possesses sufficient skills. For example, for the developmental task 'knowing how to address authorities', one needs skills like 'knowing to which authority to address oneself', 'asking a question', 'listening to the answer', and 'giving one's opinion and using good arguments'. The competence analysis provides indications for training skills, changing tasks, removing stress factors and reinforcing the influence of protective factors.

The desired social environment is also mapped out, with the youngster's assistance. The main relationships from the past and the present, and how the youngster appraises them, are looked into. For network analysis the Exit Trainer can use a 'ball diagram' (Van Susteren, 1993) or a social network circle (Tracy and Whittaker, 1990; Smit, 1993). The Exit Trainer and the youngster can visit the VIP's - the Very Important Persons in the network - in order to gather more information about (the functioning of) the youngster. They can also explore the extent to which these people are willing and able to support the youngster in building and maintaining a new living environment. If there are insufficient important relationships that have a positive influence on the youngster, it is all the more essential to build sufficient social support in the youngster's future living environment.

Mark's network

All the people that Mark has known and knows are presented in the 'ball diagram'. In this diagram Mark also writes down how he appraises these contacts. The balls filled in for Mark refer to his family, school, the residential homes and the foster families where he lived, and the football club of which he is a member. It appears that for him his grandmother is the main VIP.

Plan of action

The plan of action briefly describes how the Exit Trainer and the youngster expect to realize the goals. The goals refer to practical and material issues, learning of skills, and the (re)construction of a social network. These goals are laid down in a *contract*.

With regard to the new living environment, the youngster will have to make choices such as where he/she intends to live. In addition several *practical* and *material* matters will have to be settled: finding a place to live and things to furnish it, financial matters, daily occupation and recreation, and so on. The Exit Trainer is not supposed to arrange these things for the youngster. On the contrary, the youngster learns to do this him/herself, and also how to make use of the network to this end. 'Settling matters' also includes 'clearing up' any criminal matters. If the youngster is about to live on his/her own, any charges against him/her and possible convictions must be settled, if possible. If a conviction is to be expected, the Exit Trainer can request the juvenile court judge to prevent the punishment from hampering the plans of ET.

Most youngsters must learn many *skills* to build up their new social living environment and to develop themselves further. These skills refer to all practical, cognitive, social, and emotional tasks the new living environment brings with it. This includes taking care of clothes, calling agencies, visiting parents, filling leisure time, going out, patching up a conflict with

another person, expressing opinions at school, and so on. Acquiring skills is done in part in the office, by practicing, and in part in actual practice when the Exit Trainer takes the youngster out to settle things and to work on a social network. The Exit Trainer sometimes acts as role model, while in other cases he/she is the prompter: the trainer talks with the youngster right before the contact, and immediately after both the contact and the next step is discussed.

The *social network* is approached to see what persons may support the youngster. Once it is clear where a youngster will live and from which persons social support might be expected, the Exit Trainer makes, together with the youngster, an effort to reinforce the network. Sometimes this is achieved by making use of existing contacts, sometimes through extending the network with new contacts. These contacts can support the youngster in the living situation, at school or on the job, or in recreational matters.

Mark in action

Together with Mark, several people are visited: his father, his mother, grandmother, a former child care worker, a football coach who trained Mark two years ago, and his apprenticeship supervisor. With some of these persons, Mark clearly has difficulty in expressing his opinions on certain matters. When reproaches are made, Mark will either fall silent or become aggressive. This improves slowly by practicing a number of times and by supporting Mark during conversations with other people. Mark also learns to formulate his wishes and questions better when faced with certain agencies (such as the housing association, a school for part-time education, and the social services). Prior to such visits the Exit Trainer explains to Mark what he should do; certain parts of the contact are practiced beforehand. At the end of ET, Mark knows exactly how to deal with contacts with authorities and agencies.

In the beginning Mark does not have a very clear idea about where he wants to live. At first he thinks he might live near his grandmother, because she used to be - and still is - a big support to him. But when it turns out that the supervisor of his practical training can get him a job - in combination with two days at school - he opts for finding accommodation close to work. There is also a football club nearby where he already knows a number of boys.

Mark's drug abuse appears to be connected mainly to visiting 'house parties' and associating with a certain group of boys who use marihuana. Together with Mark the Exit Trainer makes an outline of Mark's drug habit and lists advantages and disadvantages. In addition alternatives are looked for: what can Mark do during the week to relax without using drugs? He also practices saying 'no' when others offer him drugs. The Exit Trainer accompanies Mark on a visit to the Center for Alcohol and Drugs to gather information on the risks of XTC pills and on what Mark can do to avoid taking 'dangerous' pills as well as how he can control his habit.

Termination and follow-up

The intention of ET is that within ten weeks a new living, working and/or school situation is realized and that the youngster possesses sufficient skills and social support to manage by

him/herself, if necessary with some form of nonresidential help or supervision (from an other agency). The living situation at the end of the training can be, for example, living in lodgings, living with a brother or sister or another relative, with a friend, with one parent, or with both parents.

The contribution of the Exit Trainer will gradually decrease while the support of other people in the youngster's network will remain and increase. After three, six and twelve months after terminating ET, the Exit Trainer will follow-up on the youngster. These visits are intended as a check-up on how the youngster is doing and - if necessary - to offer short-term assistance (advice, information). A minor intervention will sometimes be sufficient to help a youngster along.

The implementation

The development, introduction and dissemination of ET are phases in what the Netherlands Institute of Care and Welfare (NIZW) calls an 'innovation program'. An innovation program comprises the entire process of innovation, from the first concept up to and including the dissemination, implementation and consolidation of a program. In this process of innovation three phases can be distinguished: (1) the preparatory phase, (2) the pilot phase or demonstration phase, and (3) the consolidation and dissemination phase.

The preparatory phase of ET started in 1994 and lasted about a year. In this year the necessary preparations for the ET project were made. Amongst other things, in this phase starting note was produced in which the intended training, the set-up, and the organization of the ET project were outlined (Bakker, Van Susteren & Slot, 1994). In addition, four organizations were recruited in which the ET program would be tried out.

The pilot phase lasted from April 1995 to November 1996. During a one-and-a-half-year period the training program was implemented in four organizations (so-called demonstration projects) in order to test its feasibility and results and develop it further.

Following the pilot phase the third phase of the ET project began in 1997. This (current) phase mainly focuses on two matters. First of all it is intended to embed ET structurally in the four demonstration projects. Secondly it is intended to disseminate and implement ET on a national level. For this phase a period of two and a half years is allocated. In addition, a quality system was developed.

The rest of this paragraph deals with the pilot phase.

Participants in the ET project

The ET project is a sizable project in which several parties are involved. In the first place the Ministry of Public Health, Welfare and Sport (VWS, formerly the Ministry of Welfare, Public Health and Culture WVC), that assigned the project to the NIZW. NIZW has undertaken the assignment and as such is responsible for the co-ordination of the project. For the intrinsic support and development during the demonstration phase the department 'Behavioral Therapy Projects' of the Paedological Institute Amsterdam/Duivendrecht and Bureau Instap in Oosthuizen were called in. In addition, both organizations have taken care of the training and

supervision of the ET teams. The department Behavioral Therapy Projects is also involved in the third phase of the project, amongst other things as the trainer of new ET teams.

ET was tested and developed further in four organizations for youth welfare: (1) Agogische Zorgcentra Zeeland (AZZ), (2) De Hoenderloo Groep, (3) Stichting Jeugdhulp Maastricht (SJM), and (4) Stichting Samenwerkende Jeugdhulpverleningsinstellingen Rotterdam (SJR). During the pilot phase a co-operation relationship with the Stichting Traject Organisatie Jeugdhulp Eindhoven (TROJE) was also entered into. At present ET is also carried out - in addition to the institutions mentioned above - in De Vliert, BJ Zuid-Holland Zuid en BJ Midden-Holland/Rotterdam, organizations for youth care in Den Bosch and Zuid-Holland. In some other residential organizations preparations are made to start with ET as well.

Commissioned by NIZW, the Research Center for Youth Welfare in Leiden (RCYW) carried out an independent empirical evaluation of ET during the pilot phase. This study was intended primarily to determine whether the results that ET aimed for were actually achieved. In order to assess the results of ET, it was necessary to investigate the actual target group of ET and the way in which ET was carried out in the four demonstration projects. The third paragraph of this paper deals more extensively with the empirical evaluation study. In the consolidation and dissemination phase RCYW was asked to develop a quality system by means of which the quality of ET can be monitored.

Some experiences of the pilot phase

The pilot phase of the ET project has been a hectic period. In a time span of one and a half years a lot has been achieved and changes have been made in the ET program. In this paragraph important experiences are reported.

Intake

Originally youngsters were only admitted to ET during the pilot phase if they were at risk of becoming homeless. To determine this risk, all youngsters of 15 years of age and older, living in the participating organizations, were screened. In spite of the fact that the screening provided sufficient youngsters at risk, the intake into the training program lagged behind the number of youngsters aimed for. During the pilot phase a total of 67 youngsters took part in ET (the aim was to offer ET to 96 youngsters).

Further examination provided insight into the factors responsible for this problem. First of all the shortage of candidates for ET was due to a slow start in the demonstration projects. Another factor was that placement agencies did not always give youngsters permission to participate in ET. They sometimes did not see the advantages of ET, in particular for younger residents. Also, objections to participation in ET came from social workers within the participating organizations. Arguments such as 'right now the youngster is doing particularly well in the group', or 'what the youngster needs now is to be left in peace' were put forward. Although ET was intended to supplement existing assistance provision, some departments initially regarded ET as a competitor.

The training program was originally intended for youngsters of 15 to 18 years of age. In

practice however, placement agencies often applied slightly older youngsters for participation in ET. To obtain permission for youngsters under the age of 17 proved in most instances to be very difficult. Originally, the span of time between the decision to start ET and the actual start was planned to be as short as possible with a maximum of five days. In practice, the transition from routine residential treatment to ET was often felt to be too abrupt.

Because of these problems (shortage of applicants, emphasis on older applicants and too abrupt transitions to ET), the screening procedure was adapted. One of the changes concerned the extension from the target group to youngsters over 18 years of age. Another adaptation concerned the dropping of the original requirement to start ET within five days. The actual start is now decided upon in a more flexible manner, although a start must be made within three months, at the utmost, after registration.

Information

At the start of the ET project all ET-teams held an information round. ET-team members visited several teams of their own organization and held meetings with interested persons from outside the organizations. Both these information rounds proved to be very useful. They proved very helpful in informing internal and external relations at regular intervals in order to increase the publicity, the foundation, and the basis for cooperation. An alert key figure in charge of the ET team, with good contacts within and outside the organization, proves to be extremely valuable here. Close commitment on the part of management is essential too, for instance for creating goodwill and a basis for co-operation with fellow institutions.

Preconditions

In order to increase the chance of a successful project, it is important that a number of conditions are met. In the first place a quiet organizational surrounding is essential for the execution of ET. Matters such as staff, funding, material provisions, and the division of tasks must be settled beforehand. According to the management of the demonstration projects, the period of approximately four months between the selection of the demonstration projects and the official start proved to be too short. In a relatively short span of time a number of things had to be settled, such as funding for the second part of the project, recruitment and selection of staff, terminals, etc. Once the project had begun, many preconditions were yet to be met. Nevertheless during the pilot phase, material preconditions were adequate. Exit Trainers had their own offices and all (office) equipment deemed necessary. In general there were also sufficient funds. A very clear and supportive management also contributes to the success of the project. Furthermore it is important that an enthusiastic and alert co-ordinator runs an ET team.

Practice has shown that the execution of ET is hardly compatible with (other) activities that are bound by set times or a schedule. In order to carry out ET correctly, it is necessary that the trainer has a flexible agenda. In the pilot phase it appeared that a combined job has a negative effect on the carrying out of ET.

It is also essential to choose the right moment for starting ET. The pilot phase started just

before the summer vacation. In retrospect, this was not a very fortunate moment. This causes a delay, has a discouraging effect, and is inefficient. For example, new youngsters were hardly included. Schools had closed down and staff was on holiday.

The introduction of ET can be a 'culture shock' for some people, not just for the colleagues within the institution, but also for the outside world. Instead of focusing on a youngster's problems, in ET the emphasis is on the youngster's potentials. In the second place ET offers instruments to intervene swiftly and in a goal-oriented way. At the start of new ET teams it is essential to anticipate resistance against such an approach at various levels.

Execution and evaluation of ET

In general Exit Trainers are very enthusiastic about the Exit Training. They seem highly able to combine the two approaches of ET - the competence approach and the network approach. It is important for a trainer to find the balance between (a) empowering youngsters by training them and (b) arranging affairs *for* them. Because of the one-to-one character of the contacts with youngsters, it is important to prevent relationships from getting too close and too personal. It is necessary to maintain a certain amount of professional detachment and to prevent that personal involvement hampers a clear view and a functional, future oriented approach.

Exit Trainers regard the emphasis on the youngster's capacities and potentials as one of the main advantages of ET over traditional residential treatment. In addition, Exit Trainers judge the focus on possibilities in the here and now, instead of problems from the past, to be a tremendous enrichment of treatment. As the training is individual, help can be tailored to individual requirements. Finally, the relatively short span of time of ET (10 weeks) puts pressure on the Exit Trainer and the youngster not to mess about and get going quickly. It is the method's strength that within a demarcated period of time there is a goal-oriented and planned approach.

In retrospect, it can be concluded that the pilot phase was positive, although far from easy. In spite of a slow start, ET as it was developed seems to fill a need. ET is considered a useful and adequate way to deal with a category of youngsters that is difficult to approach, to treat, and to keep motivated. By placing emphasis during the ten week training on increasing skills and reinforcing the network, youngsters can be motivated to such an extent that they are once more able to participate in society with the help of important persons.

The empirical evaluation

The empirical evaluation of ET, based on data gathered in the pilot phase, is a pilot study. It is not a final evaluation. It demonstrates to what extent ET is a promising program and - if necessary - suggests ways for improvement.

The evaluation focused on three topics:

1. characteristics of the youngsters participating in the program and the screening of these participants;

2. the application of ET and the way practice agrees with or diverges from the method as designed;
3. the results of ET.

In this paragraph the focus will be on the first and the last topic. ⁽¹⁾

The evaluation results reported in this paragraph are based on data gathered during the pilot phase of ET (from April 1 1995 to October 1 1996). Besides that a sample from a national data file of children receiving youth care - the so-called COM file - was used.

Characteristics of ET participants and the screening procedure

The screening of ET participants mainly consists of the following three successive steps.

1. A *screening list* is filled out by a social worker. Involved are all youngsters above the age of fifteen years living in the homes of the participating organizations. A homelessness risk score is established for each youngster. The screening list consists of three primary risk factors: existence of a family, stability of family background and history of vagrancy. The fourth factor is a secondary riskfactor: behavioral problems (other than vagrancy). These factors are derived from a secondary analysis of data on psychosocial problems of youngsters living in homes and their adjustment after leaving the home (Van den Bogaart & Mesman Schultz, 1993). All factors contain three categories: no risk, doubtful and high-risk. Based on scores on the risk factors, all screened youngsters are placed on a so-called 'ET ladder' with five rungs, ranging from no demonstrable risk to high-risk.
2. Youngsters who are, according to the screening list, at risk of becoming homeless, are invited to participate in a so-called *screening interview*. The ET ladder is used to determine the order of invitations. The screening interview consists of ten risk factors in the personal history of the youngster concerned with topics like housing, drug and alcohol abuse and social support. These factors are based on an extensive literature survey on antecedents of homelessness risks (Tavecchio & Meeuws, 1993) Again, this time based on the interview, a homelessness risk score is established..
3. Youngsters with high-risk scores are invited to participate in the ET program. Permission to participate in ET is requested from all relevant people involved, including the social worker of the placement agency.

In the evaluation three groups were formed (based on the results of the screening).

1. Youngsters who were screened with the screening list but not interviewed: *the base group*.
2. Youngsters who were interviewed but did not participate in ET: *the in-between group*.
3. Youngsters who participated in ET: *the ET group*.

Besides the information that was gathered with the screening list and the screening interview, information on psychosocial problems of all youngsters was assessed with a validated instrument for which various norms are available: the Diagnostic Baseline Questionnaire (DBQ) of the COM-procedure (Van den Bogaart, Mesman Schultz, Naayer & Zandberg, 1989). The DBQ results in standardized scores on fourteen variables, indicative of fourteen problem areas.

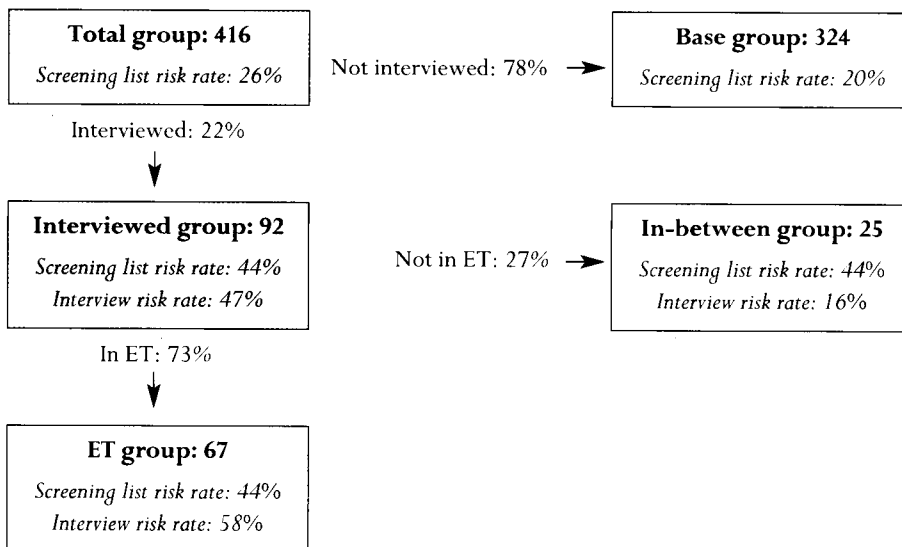
Six of these scores are combined with the COM-formula into a standardized overall score for psychosocial problems: the COMHPG score.

To evaluate ET, two main research questions about the characteristics of the youngsters who participated in ET were posed.

- Are more youngsters in the ET group, relative to the base group, at risk of becoming homeless?
- Do youngsters in the ET group differ in other aspects from youngsters in the other research groups?

The number of youngsters in the research group is 416. For each of these youngsters a screening list was filled out. From this group 92 were interviewed. A total of 67 participated in ET. Therefore the base group consists of 324 youngsters, the in-between group of 25 youngsters and the ET group of 67 youngsters.

Figure 2. Flow diagram of ET screening and risk rates in distinguished groups



The flow diagram (figure 2) shows that the screening list risk rate of the interviewed group and the ET group is much higher than the screening list risk rate of the base group. The difference in rates is highly significant ($p < .001$). Therefore, the first research question can be answered affirmatively: more youngsters in the ET group, relative to the base group, are at risk of becoming homeless. On the other hand, the base group still contains 20% youngsters at risk and the ET group still contains 56% youngsters not demonstrably at risk. Information given by Exit Trainers and others indicate that this is partly due to practical circumstances, like the ones described in paragraph 2. However, even if all practical circumstances would be ideal for a

perfect screening, it should not be pursued. For this three reasons can be given. First of all, the screening list is only a rough way to select youngsters at risk. Only four variables are measured, and these are measured only in a rough way. More detailed information (for example data gathered with the screening interview) can in specific cases lead to other decisions. Secondly, the predictive validity of the screening list variables is established only once. It certainly is not perfect, due to statistical noise and measurement errors. Thirdly, the screening list data of the applicants in the pilot phase are based on the living circumstances of the applicants upon entering the residential institution, in some case a long period ago. Developments in the adjustment of the youngster during residential treatment can, of course, change the risk of homelessness.

The flow diagram also shows that the screening interview functions in practice as was intended. The interview risk rate of the ET group is much higher than the interview risk rate of the in-between group. This difference is highly significant ($p < .001$).

Two other points with regard to the screening are worth mentioning. Firstly, the screening list risk rate in the total group is 26%. This percentage corresponds to the risk rate found in a sample of youngsters living in homes, taken from the COM file (Van den Bogaart & Mesman Schultz, 1993). This indirectly supports the validity of the screening list. Secondly, the

Table 2. Mean standardized DBQ scores in three groups. High scores indicate many problems

DBQ variable	ET group	BASE group	COM file sample*	ET vs base
Stability of family	.66	.22	1.07	$P < .001$
Relations in family	-.15	.24	.32	$P < .05$
Sociability of family	-.30	.04	.11	
Social history of parents	.14	-.15	-.13	
Delinquency	.22	-.08	.09	$P < .05$
Social problems	.10	-.27	.03	$P < .01$
Aspiration level	.12	.01	.11	
Stability of elementary school	.00	-.03	-.24	
Results in elementary school	-.06	-.13	-.13	
Welfare history	.16	-.06	.34	
Acting out	-.31	-.07	-.27	$P < .05$
Loneliness and depression	-.50	-.40	-.27	
Drug abuse	.46	.00	.25	$P < .01$
Incest of maltreatment	.38	.12	.29	

* The COM file sample consists of youngsters older than 15 years, who live in homes and after leaving the home became homeless.

correlation between the screening list risk scores and the interview risk scores is not significant. This indicates that the interview taps of other information than the screening list. Therefore, if it has validity, the interview can be a useful addition to the screening list.

To answer the second research question, DBQ scores of youngsters in the ET group were compared to DBQ scores of youngsters in the base group and youngsters in the COM-file who have lived in homes and after leaving have become homeless. Results are presented in table 2.

The results show that the ET group differs significantly from the base group on six of the four teen variables. In four respects youngsters in the ET group have significantly more serious problems. Youngsters in the ET group come from less stable families, show more delinquency and social problems and have a more serious history of drug abuse. In two respects youngsters in the ET group have *less* serious problems. The relations in the families of the youngsters are less problematic and they show less signs of serious acting out behavior.

It is interesting to note that the DBQ scores profile of youngsters in the COM file sample (who have actually become homeless afterwards), is much in line with that of the ET group. Furthermore, this profile differs from the base group profile in almost all of the same aspects as the ET group profile does. This suggests the stability and validity of the characteristics of youngsters at risk found in the ET group.

Results of ET

Results of ET were measured in two different ways. The first way was to establish the *adjustment* of the youngsters in the ET group at four different moments in time: (1) during ET (upon leaving the residential institution), (2) at the end of ET, (3) three months later, and (4) six months later. For comparison reasons, adjustment was also established once for youngsters in the base group: upon leaving the residential institution. Adjustment was assessed by means of a validated instrument for which various norms are available: the Exit Questionnaire (EQ) of the COM-procedure (Van den Bogaart, Mesman Schultz, Naayer & Zandberg). The EQ results in three standardized adjustment scores: (1) stability of living circumstances or reasons for leaving the institution, (2) general adjustment, and (3) relational adjustment.

The second way to measure the results of ET was to establish attainment of five goals: (1) a stable home, (2) financial sufficiency, (3) work or other fruitful daily activities, (4) no criminal proceedings, and (5) a supporting social network. Goal attainment was assessed at the end of ET, three months later and six months later. Goal attainment was assessed by means of a Goal Attainment Checklist (GAC), which was based on similar checklists used in prior studies on homeless youngsters by Van der Ploeg c.s. (1991) and Gijtenbeek (1994).

To evaluate the results of ET, two main questions were posed.

1. Are youngsters in the ET group after the training as well as or better adjusted than youngsters in the base group and youngsters in the COM file who later became homeless, upon leaving the residential institution?
2. Do youngsters in the ET group achieve the ET goals?

To answer the first question, EQ adjustment scores of youngsters in the ET group at the end of ET were compared to EQ adjustment scores of youngsters in the base group and in the COM file (who later became homeless) upon leaving the residential institution. Results are presented in table 3.

Table 3. Mean standardized EQ scores in three groups. High scores indicate poor adjustment

<i>EQ variable</i>	ET group, at the end of ET (n=53)	Base group, upon leaving the institution (n=25)	COM file sample, upon leaving the institution (n=134)
Stability of residence or reasons for leaving the institution	.58	.80	.97
General adjustment	-.12	.08	.32
Relational adjustment	.43	-.16	-.10

Results in table 3 show that the stability of residence (or reasons for leaving the institution) scores and the general adjustment scores are somewhat lower for the ET group than for the base group and the COM file sample. This suggests that youngsters in the ET group are better adjusted than youngsters in the other two groups. However, due to small sample sizes these differences are statistically not significant. With respect to relational adjustment, youngsters in the ET group are somewhat *less* well adjusted, but this difference is also not statistically significant. Therefore, the first research question can be answered affirmatively: youngsters in the ET group after the training are as well as or better adjusted than youngsters in the base group and youngsters in the COM file who later became homeless.

To answer the second question, goal attainment rates were established for youngsters in the ET group at three moments in time: at the end of ET, three months later and six months later. Results for the separate goals are presented in table 4.

Table 4. ET group attainment rates for the five ET goals at three moments in time

<i>ET goals</i>	At the end of ET	Three months later	Six months later
A stable home	94%	75%	79%
Financial sufficiency	67%	89%	73%
Fruitful daily activities	69%	69%	82%
No criminal proceedings	89%	88%	100%
Supporting network	93%	91%	93%

Results in table 4 show that all goals are attained for most youths (67% to 100%) at the end of ET and in follow-up situations. This already suggests an affirmative answer to the second research question. Furthermore, the results of ET seem to persist for at least six months. From the goal attainment rates a general success rate was derived. Cases, in which at least four out of the five goals were attained, were classified as a success. This arbitrary classification is, by the way, more strict than implicit or explicit success classifications used in evaluations of comparable programs, for example the one used by Gijtenbeek (1994). Using the aforementioned definition of success, it shows that success rates of ET are 78% (at the end of ET), 69% (three months later) and 71% (six months later). The answer to research question 2 has to be that most youngsters in ET attain most ET goals after finishing ET.

Concluding statements and follow up

Research literature on homelessness amongst youngsters, experiences during the pilot phase of the ET project, and empirical evaluation of the ET program lead to the following three conclusions.

1. *Because of the problem of homelessness amongst youngsters with a residential history, ET is a program that can supply a social deficiency.*
2. *ET is a feasible program for youngsters at risk of becoming homeless.*
3. *ET has promising results.*

After the pilot phase, all four participating organizations have decided to continue ET in their organizations and to integrate it in their regular services. So, the consolidation phase has started successfully. Using the research instruments of the pilot study a system for the routine assessment of the quality of ET has been assembled and tested in practice. Results of the quality assessment in the consolidation phase are in line with the results presented in this paper. ET, therefore, has proven to successfully stand the test of cross validation.

ET is now ready to be disseminated on a larger scale.

Note

1. For a full account of the evaluation study see: Van Haaster, Van der Veldt and Van den Bogaart (1997).

References

- Bakker, K., Susteren, J. van & Slot, N.W. (1994). *Voorkoming thuisloosheid van jongeren: ontwikkeling van een methodiek- en innovatieprogramma; een voorstel*. (Intern rapport.) Utrecht: Nederlands Instituut voor Zorg en Welzijn.
- Berger, M. & Spanjaard, H. (1996). *Families First. Handleiding voor gezinsmedewerkers*. Utrecht: Nederlands Instituut voor Zorg en Welzijn/NIZW.

- Bie, H. de en Dortmans, H. (1990). *Thuisloze jongeren*. Nijmegen: Katholieke Universiteit, ISG
- Bogaart, P.H.M. van den, Mesman Schultz, K., Naayer, P.M.H. & Zandberg, Tj. (1989). Instrumentarium voor programma-evaluatie in de residentiële jeugdhulpverlening: de COM-UV. Leiden: Rijksuniversiteit Leiden (LISBON/COJ).
- Bogaart, P.H.M. van den & Mesman Schultz, K. (1993). *Thuisloosheidsrisico en jeugdhulpverlening: secundaire analyses van het COM-bestand*. Leiden: Rijksuniversiteit Leiden (COJ).
- Gijtenbeek, J. (1994). *Aanpak Thuisloze Jongeren*. Amsterdam: SCO Kohnstamm Instituut.
- Haaster, A.G.J. van, Veldt, M.C.A.E. van der & Bogaart, P.H.M. van den (1997). *Vertrek-Training ter voorkoming van thuisloosheid bij jongeren. De empirische evaluatie van de ontwikkeling van een nieuw trainingsprogramma*. Leiden: Rijksuniversiteit Leiden (COJ).
- Ploeg, J.D. van der, Gaemers, J. en Hoogendam, P.H. (1991). *Zwervende jongeren*. Leiden: Rijksuniversiteit Leiden, DSWO Press.
- Slot, N.W. (1988). *Residentiële hulpverlening voor jongeren met antisociaal gedrag*. Lisse: Swets en Zeitlinger.
- Slot, W. & Spanjaard, H. (1996). Ontwikkelingstaken voor ouders van jonge kinderen. Het competentiemodel en gezinsgerichte hulpverlening. In: *Jeugd en samenleving* 1, 3-19.
- Smit, M. (1993). Sociale netwerken en sociale steun bij jongeren: een taxatieprocedure voor de jeugdhulpverlening. In: *Kind en Adolescent*.
- Spanjaard, H. (1996). *VT. Handleiding bij de VertrekTraining*. Utrecht/Amsterdam: Nederlands Instituut voor Zorg en Welzijn / Paedologisch Instituut.
- Susteren, J. van (1993). 'Aanpak thuisloze jeugd, het T-team.' In: Hazekamp, J.L. & Jumelet, H. *Overal en nergens. Stijlen van aanpak van thuisloze jongeren in Nederland en omliggende landen*. Utrecht: SWP (Passage-reeks).
- Tavecchio, L.W.C. & Meeuws, W. (1993). *Een empirisch onderzoek naar ontwikkelingsantecedenten en protectieve factoren met betrekking tot potentiële thuisloosheid van jongeren*. Leiden/Utrecht: RUL/RUU.
- Tracy, E.M. & J.K. Wittaker (1990). The Social Network Map: Assessing social support in clinical social work practice. In: *Families in Society*, 8, 461-470.
- Wit, J. de, G. van der Veer & N.W. Slot (1995). *Psychologie van de adolescentie*. Baarn: Intro.