

San Mateo Probation

StarVista Insights Program Annual Evaluation

Fiscal Year 2017-2018



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Program Description

StarVista Insights (Insights) is an outpatient adolescent counseling program in Redwood City and Daly City that provides services for substance abuse treatment/recovery and mental health issues. The Insights program provides support to community youth and families at the point in time when adolescents are at risk of experiencing substance-related and/or behavioral issues. Adolescent program participants also may have legal issues and/or problematic experiences surrounding substance use. Many of these youth also experience co-occurring mental health issues. The Insights program continues to be a low-cost referral for outpatient adolescent counseling, which remains a limited resource in San Mateo County. As such, some individuals and families receiving services at Insights may not have been able to obtain these services elsewhere due to financial challenges. If a family at any time expresses hardship around making payments, fees are reduced or waived.

Clients receiving services at Insights are typically between the ages of 12 and 18 years old. The majority of clients are enrolled in high school, although an occasional client is enrolled in middle school or has achieved a high school diploma or equivalent. Insights continues to increase its school presence to ensure the most reliable, consistent, and effective access to these services for youth, and currently provides substance use disorder support services in two San Mateo County high schools.

Insights adolescents experience challenges around school attendance, relationships with authority, positive school-related activities, and healthy peer support. Additionally, a number of clients report gang involvement. The vast majority of clients at Insights are male, making up approximately 75% of clients served in fiscal year (FY) 2017-18. More recently, enrollment of female adolescents in the program has significantly increased. This allowed the program to recently re-open the Girls Group, which is quickly approaching capacity. Most of the female clients at Insights are struggling with substance use, emotional regulation, low self-esteem, trauma histories, and are in or around unhealthy relationships.

In an effort to always be improving client services, Insights has implemented a family support program component. Family participation in this program is not required, but is encouraged. The goal of this service is to support youth to include those close to them in their treatment and to engage the youth's family by informing them of treatment goals and program efforts.

Insights continues to serve families from various socioeconomic, racial, and familial backgrounds. The Daly City outpatient population (north San Mateo County) appears to show more uniformity in their socioeconomic status, with a majority falling in the low to lower-middle income brackets. Clients served at the Redwood City office who reside in south San Mateo County tend to represent a broader socioeconomic range.

Programmatic Challenges in Fiscal Year 2017-18

Insights clinicians have experienced challenges in working with some families around the stigmas associated with mental health and therapy, which still appears to be prevalent among various cultural groups. Insights program clinicians focus on working with these

families in a supportive, welcoming, and culturally respectful manner. After the first six months of encouraging the “Family Support” component, there has been positive feedback from families and clinicians around the overall engagement in the youth’s therapeutic process, although challenges still persist around engaging the family if resistant.

Insights program staff and clinicians noticed continual challenges in the community around increased high risk behavior, including but not limited to: gang involvement, drug dealing, breaking and entering, robbery, and extreme drug use. Clinicians pointed out that previously considered common forms of these behaviors have increased in severity and substance use has rapidly escalated. This reflects a potential need to emphasize early intervention, prevention, and education as a means to reduce severity particularly in early life and quickly-escalating client cases. Further observation from clinical staff noted the trend of a general willingness by youth to engage in activities to obtain “fast money,” without a regard for potential consequences, which can lead to higher risk behavior and more dangerous situations for youth.

Substances that continued to present amongst Insights youth are cannabis, alcohol, cocaine, Xanax, LSD, and opiate derivatives (pills and syrups). Cannabis use in different forms (oils, edibles, vaporizing) has become more prevalent in society which has made it easier to avoid detection in public, thus making casual use easier and getting caught more difficult.¹ Clinicians reported that youth appear to be using cannabis with a level of casual display and fearlessness that exemplifies a clear lack of understanding of the risks and/or disregard for any potential consequences. In addition, legalized adult use seems to allow greater accessibility in the community, which puts an even greater importance on the need for early intervention and education for youth.

The passing of Proposition 62 (Legalization of Adult Recreational Use of Marijuana) among the adult community posed new challenges to prevention programs, including blurring the lines between how users identify medicinal and recreational use. Many individuals reported using for medicinal purposes, although the frequency and quantity of use did not align with therapeutic uses. Cannabis has become the first substance that is used as a medicine and is also legal for personal/recreational consumption. Clinicians stated that with all of the unforeseen changes this legislative shift has had on our communities in California, providing education for youth (and adults), along with the tools to understand and navigate these challenges, could be helpful for those using in the community, and especially for providers offering services and support.

Clinical staff also observed an increased need for education and intervention around emotional regulation. Many youth struggled to understand and implement basic regulatory strategies to manage their emotions and cope with life challenges and stressors. Youth who have experienced significant loss face higher risks of suicide in part from underdeveloped

¹ Peters EN, Bae D, Barrington-Trimis JL, Jarvis BP, Leventhal AM. Prevalence and Sociodemographic Correlates of Adolescent Use and Polyuse of Combustible, Vaporized, and Edible Cannabis Products. *JAMA Network Open*. 2018;1(5):e182765. doi:10.1001/jamanetworkopen.2018.2765

skills in emotion coping. Clinicians further reported that substance use often exacerbates these issues before presenting as the core issue. Many of substance-using youth want to engage in treatment, but issues persist: lack of child care for siblings, parents not prioritizing youth treatment, and a lack of transportation. Youth reported to clinicians that their greatest barrier to treatment is not being able to physically get to treatment, noting in some cases that youth may need to take multiple buses for more than two hours, making it very difficult to make and hold an appointment.

Lastly, as part of working with court-mandated youth, participants are occasionally detained during their treatment episodes. While this poses a challenge to consistent treatment, Insights clinical staff work with probation to offer intermittent “gap” services while detained to allow for a smoother transition back into treatment once released. Clinicians reported that processes such as this are what make collaboration with Probation counterparts so critical, and an integral part of a youth's program.

Challenges with Referrals

Recently, Insights consistently scheduled and enrolled youth participants within one to two weeks of initial contact. The most significant and consistent challenge posed with referrals was when families did not appear for the Intake. However, the Insights program believes in providing services with minimal barriers to entry, and designed a new referral policy for when parents are unable to attend the Intake and do not show up for scheduled appointments: youth will be offered to consent for their own treatment and enroll in the program, with parents being informed via telephone. Clinicians reported that the referral management process continues to be evaluated and improved.

Insights clinicians also noted the challenge of limited resources in the county for young adults seeking support, and presenting at an outpatient level of care, noting an increased number of “walk-ins” among young adults inquiring about services. Insights program staff also observed higher numbers of young adults with low level severity substance abuse, ages 18 to 25, seeking services while having limited financial resources for service payment. It appears that young adults without a court mandate have difficulty obtaining these services in an affordable manner.

Evaluation Methods

The Insight program is funded by San Mateo County Juvenile Probation (Probation), and monitors their program and reports client, service, and outcome data to the department and its evaluator, Applied Survey Research (ASR). The methods and tools used to collect this data are described below.

Clients and Services: Grantee programs collected demographic data (e.g., race/ethnicity, gender, etc.) and service data (e.g., type of services, hours of services, etc.) for individual clients. Program staff entered these data into their own data systems prior to transferring the data to ASR for analysis.

Risk Factors: Grantee programs used two assessments to provide a standard measure of risk, life functioning, and areas of need for all clients: the Juvenile Assessment and Intervention System (**JAIS**) and the Child Adolescent Needs and Strengths (**CANS**) assessment:

- **JAIS:** The JAIS is a risk, strengths, and needs assessment tool designed to assist in the effective and efficient supervision of youth, both in institutional settings and in the community. The tool has been validated across ethnic and gender groups. The JAIS consists of a brief prescreen assessment known as the JAIS Boys Risk or JAIS Girls Risk, administered in addition to the full assessment and reassessment components. Probation has elected to administer the JAIS to provide an initial indicator of recidivism risk. The JAIS Girls Risk consists of eight items and the JAIS Boys Risk consists of ten items, and yield an overall risk level of low, moderate, or high.
- **CANS:** The CANS is a multi-purpose tool developed for children's services to support decision-making in determining level of care and service planning, to facilitate quality improvement initiatives, and to allow for the monitoring of outcomes. The CANS consists of multiple items scored on a 4-point scale of 0-3, with a score of 2 or 3 indicating an actionable need. The assessment is grouped into stand-alone modules: Risk Behaviors, Strengths, Behavioral/Emotional Needs, and Trauma. Each grantee completes a different set of CANS modules according to the makeup of their client population.

Outcomes: Juvenile Justice Crime Prevention Act (JJCPA) funded programs collect data for a number of justice-related outcomes for program participants. Probation has elected to report these outcomes at 180 days post-entry; the reference group reflects the past year's cohort of program participants. In FY 2017-18, Insights collected the following outcome measures:

- Arrests
- Detentions
- Probation violations
- Probation completions
- Court-ordered restitution completion

- Court-ordered community service completion.

Insights also collects three program-specific outcome measures to track progress toward its goal of improving outcomes for clients:

- Progress toward an identified goal
- Improvements in decision-making
- Improved relationship skills.

Evidence-Based Practices: JJCPA-funded programs are encouraged to follow evidence-based practices. In 2012, ASR conducted an evaluation and concluded that funded programs were using a variety of carefully-crafted practices to respond to the needs of their clients, but that those practices spanned the range of what is considered evidence-based.

Although the use of evidence-based practices was not emphasized in Probation's 2016-2020 Local Action Plan, there is an underlying assumption that funded programs are providing services to youth that are aligned with evidence-based models.

In FY 2017-18, ASR requested each funded program provide a catalogue of their practices. ASR then ran the catalogued practices through a number of clearinghouses to determine whether the practices were:²

- Evidence-based theory or premise
- Evidence-based model, shown by multiple experimental or quasi-experimental studies to be effective
- Evidence-based practices, or modalities shown to promote positive outcomes
- Evidence-based tools, or instruments that have been validated (concurrent and predictive).

² For the full list of evidence-based practice clearinghouses used to evaluate programs, please see the JJCPA/JPCF Comprehensive Report for FY 2017-18.

Evaluation Findings

Fiscal Year 2017-18 Highlights

- The number of clients increased by 11% to 101 clients compared to FY 2016-17, and there was a 7% increase in the average number of hours of service.
- Insights served clients across the risk spectrum – 42% scored low, 45% scored moderate, and 13% scored high on the JAIS assessment.
- CANS results showed that while 93% of youth had three or more actionable needs at baseline, the majority of youth showed decreased needs on all CANS modules at follow-up, especially in the areas of Life Functioning, Youth Risk Behaviors, and Juvenile Justice.

Profile of Clients Served

In FY 2017-18, Insights served 101 youth. Similarly to FY 2016-17, 84% of participants were male, and the average age of clients was 17 years old. Sixty-two percent (62%) of youth identified as Latino/Hispanic, followed by 13% identifying as White/Caucasian and Asian/Pacific Islander. Youth received an average of 15.3 hours of service and spent an average of 4.3 months in the program. Nearly two-thirds (64%) of all services comprised of individual counseling, with 29% of hours dedicated to group counseling, 7% to intake, and 1% to family counseling.

Table 1. Client Services

CLIENT SERVICES	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18
Number of clients served	178	194	156	138	91	101
Average number of hours served	19.9	16.8	15.7	13.2	14.3	15.3
Average time in the program (months)	3.5	4.5	3.5	3.2	4.1	4.33

Risk Indicators

In FY 2017-18, Insights served clients across the risk spectrum. The 88 participants assessed with the JAIS assessment had criminogenic risk levels predominantly at the Moderate (45%) and Low (42%) levels, with 13% scoring High.

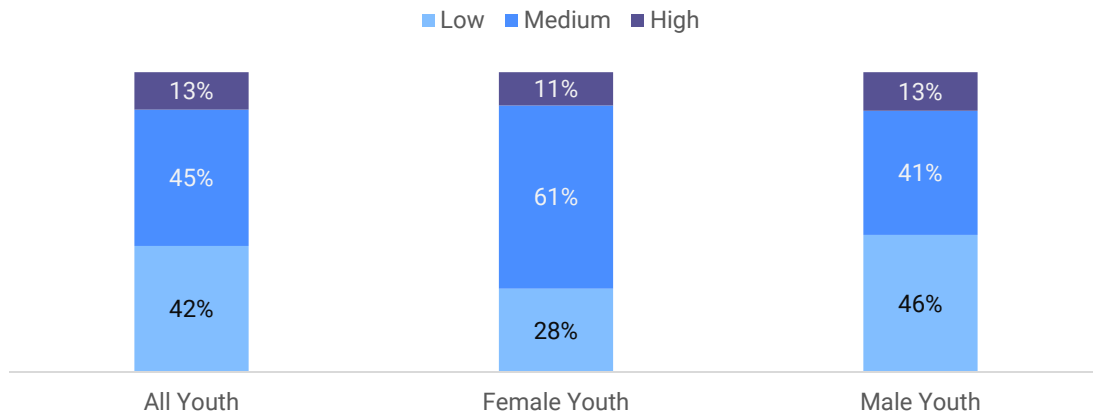
Table 2. JAIS Risk Levels

JAIS RISK LEVEL	FY 15-16	FY 16-17	FY 17-18
Low	39%	23%	42%
Moderate	39%	58%	45%
High	22%	19%	13%

n=88

When disaggregated by sex, the majority of male youth scored Low (46%) and Moderate (41%) on the criminogenic risk scale, while 61% of female youth scored Moderate.

Figure 1. Criminogenic Risk Level by Sex



All Youth n=88; Female Youth n=18; Male Youth n=70

Note: Percentages may not total 100 due to rounding.

For each youth in their program, Insights also evaluated three additional risk indicators upon entry: if the youth had a drug or alcohol problem, a school attendance problem, and/or a suspension or expulsion from school in the past year. In FY 2017-18, two-thirds (66%) of clients had an alcohol or drug problem at entry, a noteworthy increase from 23% in FY 2016-17. Additionally, those entering with an attendance problem (38%) and those suspended or expelled in the past year (44%) also increased over FY 2016-17, with the percentage of those entering with a school attendance problem more than doubling.

Table 3. Risk Indicators at Program Entry

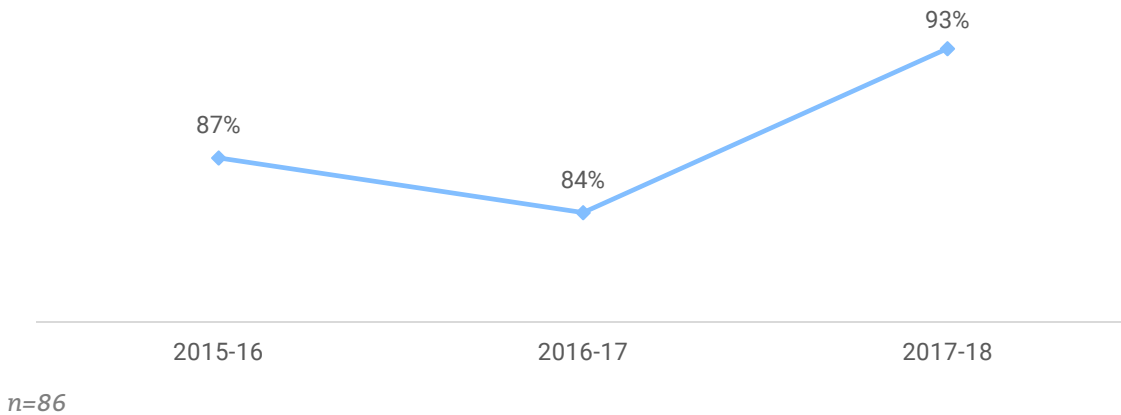
RISK INDICATORS AT PROGRAM ENTRY	FY 15-16	FY 16-17	FY 17-18
Alcohol or drug problem	45%	23%	66%
Attendance problem	23%	17%	38%
Suspension/expulsion in past year	56%	40%	44%

n=90

Functioning and Service Needs

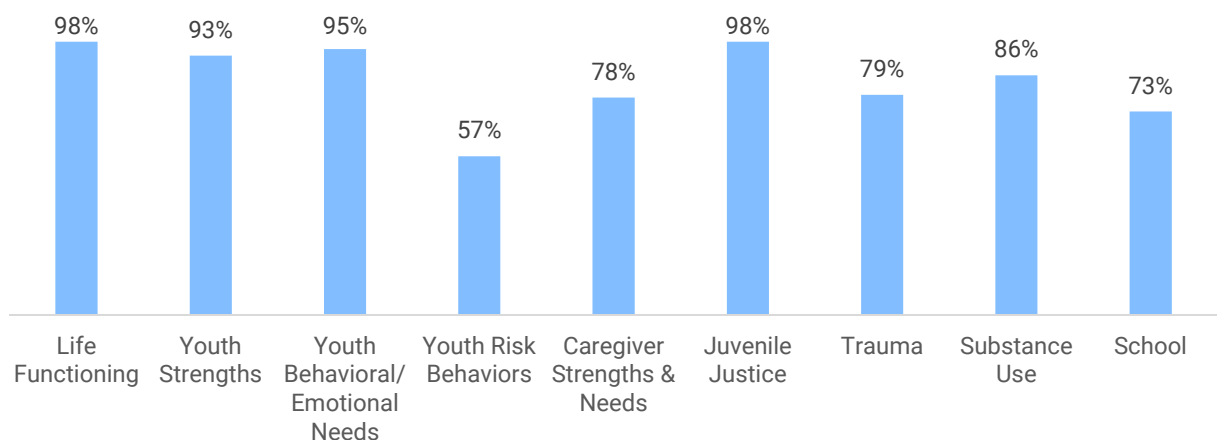
In total, the CANS assessment was conducted with 85% of youth who received services during FY 2017-18. Ninety-three percent (93%) of respondents had three or more actionable needs at baseline, an increase from 84% in FY 2016-17.

Figure 2. Percent of Clients with Three or More Actionable Needs at Baseline



The figure below presents the percentage of clients with at least one actionable need at the baseline assessment. Several modules had high percentages of participants with actionable needs, including: Juvenile Justice (98%), Life Functioning (98%), Youth Behavioral/Emotional Needs (95%), and Youth Strengths (93%). The results show that Insights clients had needs in multiple areas, such as behavioral and emotional health, internal (e.g., resilience, optimism), social (e.g., family strengths/support, relationship permanence), and community (e.g., community connection, educational) resources and supports.

Figure 3. Percent of Clients with at least One Moderate or Significant Need by CANS Module at Baseline



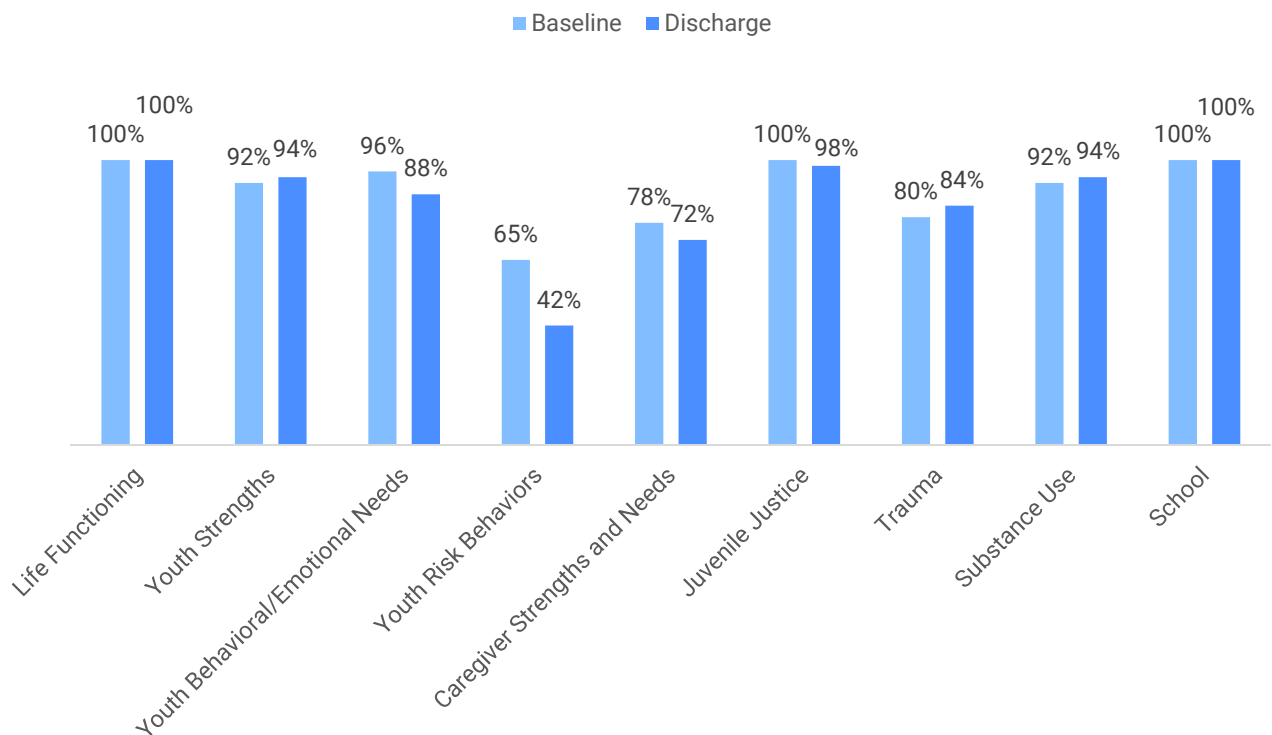
Life Functioning n=40; Youth Strengths n=86; Youth Behavioral/Emotional Needs n=86; Youth Risk Behaviors n=84; Caregiver Strengths and Needs n=86; Juvenile Justice n=81; Trauma n=52; Substance Use n=64; School n=37.

Figure 4 shows the percentage of clients with actionable needs at baseline and discharge. Only data from clients with matching baseline and discharge assessments were included in the analysis to reflect the change in the number of youth with actionable needs over time.

Decreases in youth with actionable needs from baseline to discharge were found on four CANS modules. Youth Risk Behaviors decreased by 23%, Youth Behavioral/Emotional Needs decreased by 8%, and Caregiver Strength and Needs decreased by 6%. This indicates that youth are experiencing reductions in risk behaviors, and boosts in behavioral and emotional health, and caregiver strengths and needs. In contrast, there was no change from baseline to discharge on the School and Life Functioning modules.

The results also showed small increases in the percent of youth reporting at least one actionable need on the Trauma, Youth Strengths, and Substance Use modules. This indicates that youth are in need of greater supports related to school behavior, achievement, attendance, and relationships with teachers, learning to function more effectively in various life areas (e.g., family, living, social), coping with abuse, neglect, and trauma, developing internal and social assets, and reducing substance use. However, an increase in needs does not necessarily correspond to youth experiencing negative outcomes; youth may feel more comfortable communicating openly with staff about their needs, or additional needs may arise during youth tenure in the program.

Figure 4. Percent of Clients with at least One Moderate or Significant Need by CANS Module at Baseline and Discharge



Life Functioning n=9; Youth Strengths n=51; Youth Behavioral/Emotional Needs n=52; Youth Risk Behaviors n=52; Caregiver Strengths and Needs n=50; Juvenile Justice n=43; Trauma n=25; Substance Use=34; School n=8.

Matching baseline and discharge assessment data were only available for a proportion of clients who provided baseline assessment data. In addition, there is a significant amount of fluctuation in the number of youth who report on each CANS module at baseline and at discharge. In order to understand how to more effectively address the needs of all youth served by Insights, attention should be paid to ensuring that baseline and discharge CANS assessments are provided for every youth on all required modules.

Justice Outcomes

The table below presents justice-related outcomes for 75 youth whose six month post-entry evaluation milestone occurred in FY 2017-18. As shown, the rates of arrests for a new law violation stayed relatively stable from FY 2016-17, while the number of detentions decreased considerably from 50% to 32% in FY 2017-18. The number of youth with probation violations increased slightly from 29% to 36% in FY 2017-18. Furthermore, the number of youth completing court-ordered probation and court-ordered restitution increased markedly over FY 2016-17, but youth completing court-ordered community service rates decreased to 38%.³

Table 4. Justice Outcomes

JUSTICE OUTCOMES	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18
Arrests for a new law violation	16%	18%	27%	26%	15%	13%
Detentions	26%	30%	42%	54%	50%	32%
Probation violations	24%	26%	39%	48%	29%	36%
Completed court-ordered probation	29%	15%	14%	13%	13%	29%
Completed court-ordered restitution	16%	18%	27%	26%	15%	60%
Completed court-ordered community service	78%	45%	39%	54%	50%	38%

Arrests n=75; Detentions n=75; Probation Violations n=58; Completed Court-Ordered Probation n=17; Completed Court-Ordered Restitution n=5; Completed Court-Ordered Community Service n=16

³ Small numbers of youth were assigned court-ordered restitution and community service, which can lead to unstable results.

Program Specific Outcomes

Each year, Insights sets three program goals for their clients to achieve over the course of the fiscal year: improvements in decision-making, relationship building, and progress towards an identified goal. Insights surpassed their FY 2017-18 goals, particularly on the relationship building measure (89%).

Table 5. Insights Program Outcomes

PROGRAM-SPECIFIC OUTCOMES	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18 TARGET	FY 17-18 RESULTS
Percentage of participants showing progress toward an identified goal	98%	98%	89%	98%	97%	75%	87%
Percentage of participants showing improvement in decision-making	85%	86%	84%	67%	92%	75%	87%
Percentage of participants showing improved relationship skills	74%	90%	100%	67%	92%	75%	89%

Note: Sample sizes vary for each fiscal year

Evidence-Based Practices

In FY 2017-18, JJCPA-funded programs were asked to provide the practices employed in their programs. ASR then evaluated the given practices to determine whether the programs they shared were evidence-based or promising practices through a thorough search of evidence-based practice clearinghouses. The table below details the curricula and practices that Insights utilizes in their programs.

Table 6. Evidence-Based Practices

CURRICULUM	CURRICULUM IMPLEMENTATION	RATING
Seeking Safety	Seeking Safety is a present-focused therapy to help people attain safety from symptoms of trauma/PTSD and substance abuse. Seeking Safety topics applied at Insights include: safety, self-empowerment, substance use, high-risk behavior, honesty, asking for help, healthy relationships, community resources, compassion, creating meaning, self-care, coping skills, identifying triggers, and life choices. Insights clinicians receive on-going training on the curriculum. Clinicians work together to continue to develop creative and interactive ways of engaging clients in the material, using various modalities of therapy.	Evidence-based practice according to The California Evidence-Based Clearinghouse for Child Welfare, with a rating of 2 on a scale from 1 to 5 (with 1 as well-supported with evidence and 5 as concerning). ⁴
Motivational Interviewing/ Motivational Enhancement Therapy	Insights clinicians utilize principals of MI/MET to support clients who may be ambivalent about changing maladaptive behaviors. The therapist meets the client where they are and does not attempt to change the client in any way. Rather, the therapist supports the client in identifying values and goals, and how these align or not with their current behaviors and thought processes.	Evidence-based practice according to The California Evidence-Based Clearinghouse for Child Welfare, with a rating of 1 on a scale from 1 to 5 (with 1 as well-supported with evidence and 5 as concerning). ⁵ However, the Office of Justice Programs rates Motivational Interviewing for Juvenile Substance Abuse as having no effect for clients age 14-19. ⁶

⁴ <http://www.cebc4cw.org/topic/substance-abuse-treatment-adult/>

⁵ <http://www.cebc4cw.org/program/motivational-interviewing/>

⁶ <https://www.crimesolutions.gov/ProgramDetails.aspx?ID=180>

Client Story

Each year, Insights staff provide a client story to help illustrate the effect of services. The following is the client story provided by Insights for FY 2017-18.

Name of client	Juan (Pseudonym)
Age and gender	15, male
Reason for referral	<p>Juan was mandated to complete the Insights program by Probation due to breaking into multiple cars with his peers over the course of a month. He had also been using Xanax and cannabis, which caused the court to be concerned about his substance abuse. Although he regretted stealing from others and damaging their property, Juan didn't think he had a substance issue. He continued to use cannabis and believed that he could quit whenever he was ready to do so.</p>
Client's behavior, affect, and appearance when they first started in the program	<p>During Juan's first session, he shared with his therapist that he was not looking forward to being in therapy, and the behaviors he exhibited exemplified that sentiment. He was frequently absent from sessions (at one point not attending for close to a month). When Juan did attend, he didn't participate and was mostly silent throughout his session.</p>
Activity engagement and consistency	<p>As Juan developed rapport with his therapist, he began to open up and share. He talked about his struggles with his identity as a first generation immigrant. Juan shared frustration about his inability to communicate with his parents, who mostly speak Spanish in the home. He also shared his disappointment about not being able to communicate with his grandfather, who only speaks Spanish. Juan identified that these family stresses often led him to use cannabis as a source of release and relief. His resistance to engaging in therapy began to dissipate. It seemed that a strong therapeutic alliance with his clinician had aided him in embarking on a journey to address and deal with some of the interpersonal issues pertaining to his immediate family.</p> <p>On this journey, Juan began to process certain issues that he had with his father. He created a genogram (a diagram of family relationships) with his clinician, where they worked to identify generational patterns of substance use and trauma in his family. As Juan continued to participate in the therapeutic process, he started to learn new ways to manage his stress, while initiating a process to build a healthy relationship with his father. As he dealt with his interpersonal challenges, his substance use consistently decreased.</p>
Client's behavior, affect, and appearance toward the end of the program	<p>Six months after his intake session, Juan successfully graduated from the Insights program. Upon graduation, he shared with his clinician that this was the first time he had ever disclosed deeply personal issues with anyone. He also shared that he felt fortunate to have been at Insights because he was leaving with a greater</p>

	<p>understanding about who he was, in addition to how to handle his stress without relying on substances.</p>
<p>What the client learned as a result of the program</p>	<p>Juan was able to identify the connection between family stress and his substance use. As he increased his engagement in therapy, he learned that talking with a trusted individual was a healthier outlet for this stress that helped him to avoid substances.</p>
<p>What the client is doing differently in their life now as a result of the program</p>	<p>Juan accepts greater accountability for his actions and is attempting to build relationships with individuals who do not increase his risk of violating probation. He seems able to better externalize his feelings, rather than numbing them with cannabis and benzodiazepines.</p> <p>As Juan was leaving Insights, he shared with his clinician that he would miss coming and asked if he could give her a hug.</p>