

Executive Summary

moving into adulthood

IMPLEMENTATION
FINDINGS FROM
THE YOUTH VILLAGES
TRANSITIONAL LIVING
EVALUATION

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March 2014



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Moving into Adulthood

Implementation Findings from the Youth Villages Transitional Living Evaluation

**Michelle Manno
Erin Jacobs
Julianna Alson
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Overview

The Youth Villages Transitional Living program is intended to help youth who were formerly in foster care or juvenile justice custody, or who are otherwise unprepared for adult life, to make the transition to independent living. Youth Villages, which serves emotionally and behaviorally troubled young people, operates a number of programs in addition to Transitional Living. All of its programs are based on a set of core principles that emphasize treatment planning, systematic assessment of participating youth, and delivery of only evidence-informed practices within a highly structured supervisory system.

Transitional Living clients receive intensive, individualized, and clinically focused and community-based case management, support, and counseling from staff who carry caseloads of about eight clients each. Youth eligibility is determined through an extensive recruitment and assessment process. Once youth are enrolled, Transitional Living staff continue to assess them to identify needs and work with them to develop goals, which become the basis of required weekly meetings. Over nine months, on average, program participants get support for education, housing, mental or physical health, employment, and life skills. This support is provided in a variety of forms, including action-oriented activities that involve completing a specific task during a weekly session or through more traditional counseling techniques.

The Transitional Living Evaluation is focused exclusively on the program in Tennessee, although Youth Villages also has Transitional Living programs in six other states.

Key Findings

- Variation in the local context across Tennessee shaped the experiences of youth who participated in the evaluation. Resources that can be limited or challenging to navigate, particularly in rural areas, include access to transportation, employers, and social service providers.
- Staff interviews and analysis of the management information system indicated that the Transitional Living program was implemented in accordance with the program model, with the frequency and duration of Transitional Living services close to expected levels.
- Participation levels in the Transitional Living program were high, and youth were engaged in services soon after being assigned to receive them. Staff discussed a wide range of topics with their cases and made contact with other adults who were involved in each youth's life.

A report presenting the impacts of the program after one year is planned for release in 2015.

Preface

The transition from adolescence to adulthood is a critical and often challenging time for all young people, but especially for youth who have spent time in the foster care or juvenile justice system. These young people have challenges that are much less commonly experienced by their peers with no history of state custody, such as low levels of education, minimal formal work history, mental health and substance abuse problems, weak social support, extreme poverty, and housing instability. Yet individuals exiting state custody, generally between the ages of 14 and 20, are expected to make the transition to adulthood with relatively little support from the government systems that acted as their guardians, while their peers in the general population often remain dependent on parental support well into their 20s or beyond.

One promising approach to helping these young people make the transition to independent adult living is the Youth Villages Transitional Living program, which MDRC is currently evaluating. The Transitional Living program offers intensive, individualized, clinically focused, and community-based case management, support, and counseling on issues related to housing, employment, education, life skills, or behavioral health to youth who were formerly in foster care or juvenile justice custody, or who otherwise find themselves unprepared for adult life. The program is clearly articulated and documented, with an emphasis on maintaining sound clinical practice, encouraging youth to drive treatment decisions and goal planning, developing connections with adults and community resources, and sustaining comprehensive staff development.

This report describes the Transitional Living program as it operated throughout Tennessee during the approximately two-year study period. The program was implemented largely as expected. Participation rates were high, perhaps in part because Transitional Living staff provided services that both incorporated Youth Villages' approved strategies and were also highly individualized to meet the needs and goals of each participant. The findings exemplify the extremely prescriptive program model developed by Youth Villages that drives all aspects of program operation, including the intense staff supervision practices, systematic assessment of youth, and delivery of only approved, evidence-informed practices.

MDRC's evaluation of the Youth Villages Transitional Living program builds on our work to develop and study interventions that aim to help disconnected and disadvantaged young people overcome barriers to leading stable, adult lives. A second report presenting the one-year impacts of the Transitional Living program is scheduled for release in 2015. Depending on those one-year findings, longer-term follow-up may be conducted to help us learn more about the most effective ways to support youth as they leave state custody and struggle to become independent adults.

Gordon L. Berlin
President, MDRC

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The Youth Villages Transitional Living Evaluation was made possible through the support of many individuals and organizations. It was funded by The Edna McConnell Clark Foundation, the Bill & Melinda Gates Foundation, and The Annie E. Casey Foundation. We would also like to thank Mark Courtney for his central role in helping to design the evaluation and shape this report with his expertise in child welfare policy.

To conduct the research across Tennessee, we relied on invaluable partnerships and collaboration with Sarah Hurley, Melanie Manns, Tim Goldsmith, Kristin Landers, and Pat Lawler of Youth Villages — all of whom also reviewed a draft of this report and provided insightful feedback. Sarah Hurley and Melanie Manns played especially integral roles. Dr. Hurley worked closely with MDRC to conceptualize and launch the evaluation, communicate with Youth Villages and partner agency staff, provide program participation data, and plan the implementation research, among many other things that made this evaluation possible. Ms. Manns monitored study enrollment, tracked participant samples, organized study paperwork for MDRC, and generally kept track of research activities onsite. Kristin Landers also met with MDRC staff to help us understand the Transitional Living model and interpret program data and procedures.

We extend many thanks to the Youth Villages Transitional Living specialists, clinical consultants, clinical supervisors, regional managers, regional supervisors, regional directors, and educational/vocational coordinators who shared their experiences of implementing the Transitional Living program during our site visits and interviews. We are grateful to the family service workers and independent living specialists from the Tennessee Department of Children's Services (DCS) who took the time to meet with us, as well as representatives from other entities working with the young people who were in foster care and juvenile justice custody in Tennessee. We greatly appreciate their openness, generosity, and demonstrated commitment to advancing understanding of the best ways to support youth as they make the transition into adulthood. We would also like to thank Dave Aguzzi and Dhivya Ben of DCS, who provided us with state custody data and patiently answered our many questions.

At MDRC, Sara Muller-Ravett and Joseph Broadus started up early operations. John Martinez, Dan Bloom, and Virginia Knox provided helpful feedback on report drafts. Brittany Henderson processed the quantitative data used in this report. Janae Bonsu helped to conduct in-depth interviews with youth in the study and, with Ada Tso, coordinated the production of the report. Alice Tufel provided feedback on report drafts and edited the report, and Stephanie Cowell and Carolyn Thomas prepared it for publication.

We conclude with deepest thanks to the study participants who took the time to speak with us in interviews and helped us understand their experiences both in the Transitional Living program and on their own. Their perspectives were invaluable. This report is dedicated to them and to youth who are making the transition out of foster care and juvenile justice custody everywhere.

The Authors

Executive Summary

About 70,000 young people between 14 and 20 years of age leave the foster care system in the United States each year.¹ Roughly one-third of those individuals exit foster care because they “age out” of the system upon reaching adulthood, often at the age of 18. In addition, nearly 100,000 youths leave juvenile justice facilities each year.² Crossover between the foster care and juvenile justice systems is commonplace, as young people who experience unstable or abusive family environments, poverty, and other harmful situations are at increased risk of entering both systems.³ For young people who are leaving these systems, the transition to adulthood can be particularly difficult, as they may have few resources and little or no state or family support.

The transition from adolescence to adulthood is a critical and often trying time for young people in general as they attempt to complete their education, obtain full-time employment, form their own families or households, and achieve financial independence. For youth who have spent time in state custody through the foster care or juvenile justice system, this transition can be particularly challenging. Such youth contend with a myriad of issues that are much less commonly experienced by their peers with no history of state custody placement, including low levels of educational attainment, minimal formal work experience, mental health and substance use problems, lack of social support, extreme poverty, and housing instability.⁴

This report presents program implementation and participation findings from an evaluation of the Youth Villages Transitional Living program, which is designed to help youth who were formerly in foster care or juvenile justice custody, or who otherwise find themselves unprepared for adult life, make the transition to adulthood. The Transitional Living program model is clearly articulated and documented, with an emphasis on counseling and case management along with employment and education supports, youth-driven treatment decisions and goal planning, connections with adults and community resources, and comprehensive staff development practices. The evaluation was launched in October 2010 and uses a rigorous random assignment design to test the impacts of the Transitional Living program that is operating across

¹See, for example, U.S. Department of Health and Human Services, *The AFCARS Report: Preliminary FY 2011 Estimates as of July 2012* (Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau, 2012).

²Howard N. Snyder, “An Empirical Portrait of the Youth Reentry Population,” *Youth Violence and Juvenile Justice* 2, no.1 (January 2004): 39-55.

³See, for example, Kathy Barbell and Madelyn Freundlich, *Foster Care Today* (Washington, DC: Casey Family Programs, 2001).

⁴See, for example, Mark E. Courtney, Irving Piliavin, Andrew Grogan-Kaylor, and Ande Nesmith, *Foster Youth Transitions to Adulthood: A Longitudinal View of Youth Leaving Care* (Madison, WI: Institute for Research on Poverty, 1998).

the state of Tennessee. Individuals who were deemed eligible for the study were assigned at random to a program group, which was offered Transitional Living program services, or to a control group, which was not offered Transitional Living services but was provided with a list of social service resources that are available in the community. A second report, scheduled for release in 2015, will present one-year impacts of the program. The evaluation is being funded by The Edna McConnell Clark Foundation, The Annie E. Casey Foundation, and the Bill & Melinda Gates Foundation. MDRC is conducting the evaluation, along with Mark Courtney of the University of Chicago.

Key findings presented in this report include:

- The Transitional Living Evaluation took place across the state of Tennessee, where local context and service availability vary widely. The variations in the infrastructure of each community influenced the services that Transitional Living staff provided to their clients. Access to transportation, employment, or education opportunities was not the same for every participant. Furthermore, access to other social services varied by community, affecting Transitional Living staff's ability to develop connections with those services or youth's options for relying on such services in the absence of the Transitional Living program.
- Youth Villages' operations and staffing arrangements are very prescriptive. All Youth Villages programs, which are operated across the country, share core principles and systems for service delivery, supervision, and quality assurance. Like all of Youth Villages' programs, the Transitional Living program is highly structured.
- Recruiting a sufficient number of individuals into the study proved more challenging than expected, but ultimately 1,322 youths were enrolled, which exceeded the target sample size. Transitional Living staff welcomed the enhanced eligibility assessment process that was implemented as part of the study, as it facilitated a more accurate, efficient, and thorough identification of appropriate program participants.
- The Transitional Living program was implemented largely as expected. Nearly all program group members participated in at least one Transitional Living program service, and a substantial portion received services at the expected level and intensity (or "dosage").

Background

Until the 1980s, little focus was placed on preparing foster youth for adulthood. However, in 1985 the Independent Living Initiative was established to provide federal funds to states to help adolescent foster youth develop the skills needed to live independently. Since then, Congress has passed major legislation three times to provide services for young people who are making the transition from foster care to independent living. Most recently, in 2008 Congress passed the Fostering Connections to Success and Increasing Adoptions Act (hereafter referred to as Fostering Connections), which dramatically changed the nature of support for youth who are making the transition to adulthood from foster care. In Tennessee, Fostering Connections is implemented by the Department of Children's Services (DCS) with a program called the Extension or Re-Establishment of Foster Care (EFC). EFC services include financial assistance for transportation, education, and job-training programs, as well as case management and an independent living allowance; young people who qualify are also offered the option to continue foster care placement past age 18 until the age of 21.

Unlike services for those who are aging out of foster care, services for youth who are leaving juvenile justice placements have not been enacted as entitlements by federal legislation; therefore, they are not consistently and uniformly supported by federal funding. However, general support for "reentry" services for adults who are leaving prison and jail has led to some funding support for those who are leaving juvenile justice placements.

Youth Villages and the Transitional Living Program

Youth Villages has operated a variety of residential and community-based programs for emotionally and behaviorally troubled boys and girls of all ages since 1986. Based in Memphis, Tennessee, the organization serves young people in 11 states and the District of Columbia. All Youth Villages programs have shared philosophies and consistency in processes, although the intensity of services, target age group, and treatment settings vary. Within each program, staff follow a common set of core principles and adhere to a common clinical model that emphasizes the importance of connections with family or other supportive adults, a holistic approach to service provision to create long-term and sustainable behavioral change, goal-oriented treatment, and continuous review of staff performance and youth outcomes. Furthermore, Youth Villages promotes consistency in clinical practices through its treatment manual, which contains all of the organization's acceptable, evidence-informed practices for use with youth.

The Transitional Living program, which is just one of many Youth Villages programs, began in 1999 and targets young people between 17 and 22 years of age who have a history in the foster care or juvenile justice system, or who otherwise find themselves unprepared for adult life. The funding mechanisms for Transitional Living vary by state; in Tennessee, services are

largely paid for through a contract with DCS. The program provides intensive and individualized, clinically focused, and community-based case management, support, and counseling for eligible young adults. Though this study is only focused on Tennessee, which is the flagship location of the Transitional Living program, the target group and program goals hold true across the program's many other locations. Following Youth Villages' lead, the Transitional Living program adheres to a specific and systematic program model (depicted in Figure ES.1) that emphasizes thorough assessment of participating youth, treatment planning, youth's active involvement in treatment decisions and goal planning, building supports with family or community contacts, and comprehensive staff supervision.

The goal of the Transitional Living program is to assist with participants' successful transition to adulthood over approximately nine months. Eligible youth are identified through an extensive recruitment and assessment process. The program model indicates that Transitional Living services should begin with an assessment of the youth — including a psychosocial assessment, which presents a comprehensive picture of the youth's life — to determine what course of treatment may be necessary. The assessment is conducted by direct service staff, namely Transitional Living (TL) Specialists, who each manage an average caseload of eight youths. During this initial assessment period, youth are also expected to develop goals to pursue with their TL Specialist throughout treatment. Based on the result of assessment and goal planning, the TL Specialist develops treatment goals that address topics such as education, housing, mental or physical health, employment, or life skills. Treatment goals are recorded in a treatment plan that outlines each participant's behaviors and issues upon entering the program and what will be addressed; the treatment plan is updated monthly to reflect progress toward existing goals and the development of new ones.

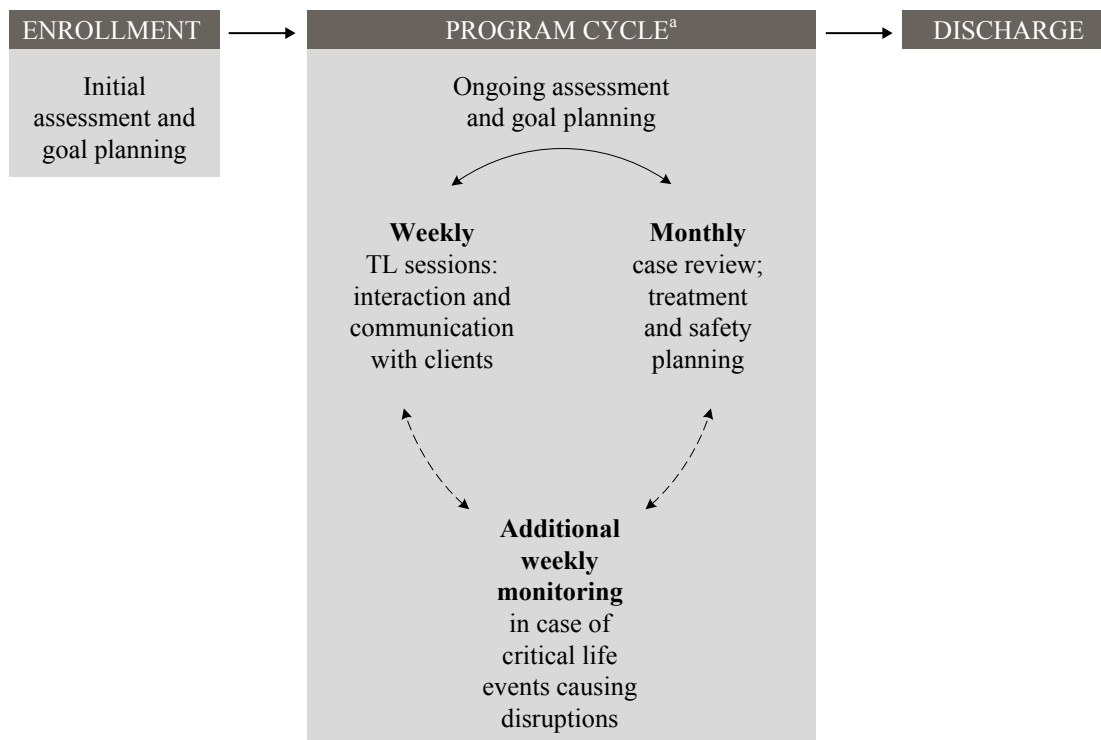
TL Specialists are expected to meet with each of their cases at least once a week, which typically occurs at the youth's home or elsewhere in the community. These Transitional Living sessions last for at least one hour, and missed sessions must be made up within one week. Staff have flexibility to individualize their sessions with youth, though they must adhere to recommendations from supervisory clinical staff and draw on Youth Villages' approved evidence-informed practices. Once the initial treatment plan is developed and weekly sessions begin, the program flow is cyclical; ongoing assessment and goal planning are incorporated into the sessions to address participants' changing needs throughout their engagement with the program. Though the cycle is predictable, the TL Specialist's plans are sometimes altered when a critical event occurs, such as job loss, arrest, or hospitalization, which triggers the need for temporary increased monitoring of that individual.

During the weekly Transitional Living sessions, TL Specialists provide support for a number of focus areas, including securing stable housing, education maintenance or attainment, employment and job-seeking skills development, management of safe relationships, alleviating

The Youth Villages Transitional Living Evaluation

Figure ES.1

The Youth Villages Transitional Living Program Model



NOTE: ^aThe solid line indicates a continuous cycle of assessment and goal planning. The dashed lines indicate how the cycle occasionally expands if there is a critical event.

symptoms of poor mental health, and life skills development. TL Specialists use three types of strategies to address these areas: (1) explicit use of evidence-informed tools, (2) counseling or conversation-based interventions, and (3) action-oriented activities. The first, explicit use of tools, refers to the use of very specific documents, forms, or techniques, such as forms to teach youth how to budget, keep track of medication, or develop a résumé. The second strategy most closely resembles what one thinks of as traditional counseling, in which a client and clinician talk about particular issues that exist in the client's life. The final strategy, action-oriented activities, involves working with youth in the community to complete a specific task (such as touring potential apartments to rent) during a weekly Transitional Living session.

Aside from direct support by the TL Specialist through these three strategies, the program offers other resources to participating youth. Outside of weekly sessions, the TL Specialists have at least one other contact with each of their cases every week, often in the form of a text message or phone call. TL Specialists have access to some flexible funds to support youth who need money for expenses such as appropriate clothing for interviews or an apartment application fee. Youth are also encouraged to participate in monthly “Peer 2 Peer” meetings that provide them with opportunities to interact with other youth in the Transitional Living program. These group meetings, required by Youth Villages’ contract with the Department of Children’s Services, also provide Transitional Living staff with additional opportunities to emphasize information on employment-readiness skills, plans for attending college or a technical training school, or other topics that are frequently addressed in Transitional Living sessions by way of guided small-group activities. Educational/vocational coordinators are also available to work with the TL Specialists or youth who require additional support when seeking postsecondary education, vocational training, or employment opportunities.

The program cycle operates within a comprehensive structure of clinical oversight and quality assurance. All treatment plans are reviewed by supervisors and clinically licensed staff to ensure completeness and fidelity to Youth Villages and Transitional Living standards. Furthermore, TL Specialists’ work is closely monitored through a series of weekly meetings with their immediate supervisor and clinical consultants (licensed therapists), who provide clinical guidance; in addition, the supervisors and clinical consultants frequently review the TL Specialists’ paperwork (such as treatment plans) to assess quality and timeliness. Issues with staff performance are quickly identified and addressed. The effectiveness of supervisors and other Transitional Living leadership is determined based on the performance of those they supervise.

The Transitional Living Evaluation

The evaluation targeted a subset of young people who are typically served by the Transitional Living program and it expanded the recruitment effort to include slightly older individuals. The final target group included young adults between 18 and 24 years of age who had been in Department of Children’s Services custody in the state of Tennessee for at least 365 days (not necessarily continuously) after age 14 or at least one day after age 17.⁵ Additional assessment was

⁵Transitional Living eligibility criteria were originally based largely on DCS’s funding requirements for contracts with independent living service providers. Transitional Living criteria were expanded beyond DCS requirements to allow youth who were leaving secure facilities and youth who were receiving Post-Custody Services (and who were therefore ineligible to receive other services funded by DCS) to participate in Transitional Living with alternate funding from The Day Foundation. (Post-Custody Services were established by the state of Tennessee in 2002 for youth who emancipated from foster care at age 18 and who were engaged in an education or job-training program and met other criteria. Youth who were leaving juvenile justice custody, excluding those who were housed in a secure facility at 18 or 19 years of age, were also eligible. Post-Custody
(continued)

conducted to determine whether youth who met these basic eligibility criteria were also interested in program services, were appropriate for the program (for instance, did not have histories of severe violence, mental health problems, drug use, or developmental delays), and had the capacity to live independently with appropriate supports.

Study enrollment occurred between October 2010 and October 2012 and resulted in a sample of 1,322 youth being randomly assigned into the program or control group. The 788 program group members were offered Transitional Living program services, while the 534 control group members could not participate in the Transitional Living program, but were provided with a list of social service resources that were available in the community to assist them. A random assignment design, which is generally considered the most rigorous method of evaluating large-scale social service programs, ensures that the demographic characteristics, foster care and juvenile justice histories, motivation levels, and other characteristics of sample members in the program and control groups are the same at the start of the study. Thus, any differences in outcomes between the program and control groups can be attributed with confidence to the program that is being evaluated.

Similar to other youth with histories of foster care or juvenile justice custody, the youth who are enrolled in the study averaged relatively low levels of educational attainment, employment, and social support at study entry, while experiencing relatively high rates of young parenthood, mental health and substance use problems, involvement with the criminal justice system, and housing instability. Youth in the study were diverse in terms of gender and race, with over 50 percent of the sample being white/non-Hispanic, while a significant minority was black/non-Hispanic (37 percent). Study participants came from varied custody backgrounds, and their first custody placement — often of many — tended to occur in their teens; youth in custody tended to move between placements, with a majority reportedly experiencing at least two placements. Furthermore, 61 percent of the sample reported having been in custody because they had been neglected or abused (foster care), while 52 percent indicated that they had been in custody for delinquency (juvenile justice). Regardless of custody experiences, youth had somewhat regular interaction with family members, most often their biological mothers or extended family.

Services offered continued financial and case management support for eligible youth. Extension or Re-Establishment of Foster Care services, which replaced Post-Custody Services in 2012, offers the same services, with the added option of remaining in a supported foster care placement until age 21.) Additional changes to program eligibility requirements were made for the purposes of the study and are discussed in greater depth in Chapter 4 of the full report.

Implementation of the Transitional Living Program

Implementation of the Transitional Living program during the study period was assessed through interviews with Youth Villages leadership and Transitional Living management and staff, as well as through observations, survey data collected from Transitional Living staff, interviews with select program and control group members,⁶ and analysis of data collected from all youth when they enrolled in the study and from the Youth Villages management information system (MIS). Select findings are summarized below.

Youth Villages operates the Transitional Living program out of 13 offices across the state of Tennessee,⁷ which together serve all the counties in the state. Contextual factors such as demographic and economic characteristics, cultural nuances, and the availability of resources for basic needs and social services vary substantially across counties. For example, many of the youth in the study live in very rural areas, where basic needs and social service resources are relatively scarce, while others live in urban environments that have greater resources but other pervasive challenges, like gang involvement. While these wide variations make it difficult to generalize about youth's experiences in their place of residence, access to transportation, affordable housing, social services, and technology (such as the Internet) are limited for youth across the state. These limitations present difficulties for the youth in both study groups, constraining the resources from which TL Specialists can draw to support program group youth as they move into adulthood.

- **Youth Villages operates the Transitional Living program according to organizationwide core principles that emphasize treatment planning, systematic assessment of participants, and delivery of only approved, evidence-informed practices.**

All Youth Villages programs have shared principles, structures, and consistency in processes. Treatment planning is based on the results of a systematic assessment of the conditions that drive a youth to exhibit certain behaviors or to have particular experiences. Through assessment of all aspects of a youth's life (social or environmental, for example), staff determine the most appropriate course of treatment to lead to positive outcomes. Youth Villages only uses practices that it has determined to be either sufficiently supported by evidence (that is, promising practices, though not necessarily tested in a randomized control trial) or that have been

⁶For the program group sample of interviews, youth who participated in at least one Transitional Living service were randomly selected, stratified by Tennessee region of residence. The randomly selected sample was adjusted so that a range of educational backgrounds, living situations, and delinquency experiences were represented. Similar criteria were used for selecting the control group sample, less the program participation requirement.

⁷The 13 offices where Youth Villages operates its Transitional Living program do not include the Youth Villages residential locations; the Transitional Living program does not operate out of the residential locations.

deemed “evidence-based practices” through randomized control trial outcomes or meta-analysis of existing outcome studies. All approved interventions and the systematic processes for determining which interventions can best address each behavior are compiled in the Youth Villages Treatment Manual, which is used by all Youth Villages programs. Although clinical treatment is administered via the same process regardless of the program, the intensity of services, the target age group, and treatment settings vary. For example, TL Specialists have access to parenting skills materials that they can use with their clients who are very young parents, and they can use the same materials with traditional-age parents of young children who participate in another Youth Villages program.

Furthermore, the treatment practices that TL Specialists use to educate clients about mental health behaviors or ways to deal with anxiety and stress are the same ones that staff in Youth Villages’ residential facilities use with their clients.

A robust supervision structure and multiple avenues for quality assurance shape all aspects of operation across the organization.

- **As an extension of Youth Villages’ well developed administrative, management, and clinical structures, the Transitional Living program is highly structured. Staff must follow specified processes for service delivery and supervision.**

The Transitional Living service model includes detailed assessments of each youth’s strengths and needs, which are then incorporated into individualized treatment plans. TL Specialists must meet specific deadlines each month, including submitting treatment plan updates to their clinical supervisors. Guided by the Youth Villages Treatment Manual and the recommendations of a clinical consultant, TL Specialists are expected to use a variety of interventions to address each youth’s needs. These interventions include cognitive behavioral therapies and other practices that are informed by research evidence. Though the program is highly structured, TL Specialists have a great deal of flexibility to personalize the weekly sessions and use strategies to which youth will respond well. However, the robust clinical nature of the program generated a significant amount of paperwork (including clinical assessments, treatment plan updates, and so forth), which made it challenging for some TL Specialists to find the time to build engagement and rapport with their cases, especially early on in treatment.

- **The significant structure and precise codification of the Transitional Living program allow program operators to maintain a special focus on ensuring fidelity to the model.**

Both the service provision and the supervision structure of the program are guided by an established program model that shapes all aspects of program operations. This model in-

cludes staff supervision and model fidelity standards, which are continuously monitored and reinforced by a strong organizational culture. The formalized tracking of TL Specialists' performance is an indicator of model fidelity at the individual staff level. Formal reviews of model fidelity at the regional or state level identify more systematic breaks from the model.

- **The Transitional Living program was implemented largely in accordance with the program model. There were high levels of participation in Transitional Living sessions and other activities, and youth were engaged in services soon after random assignment.**

Based on the research team's analysis of information collected from staff interviews and the Youth Villages MIS, Transitional Living staff provided program youth with services that incorporated the strategies prescribed by the Youth Villages Treatment Manual, but that were also highly individualized to the needs and goals of each participant. To do this, the TL Specialists played different roles, such as case manager, mentor, and clinician, depending on the situation and the youth. Analysis of the MIS data show that nearly all youth participated in at least one Transitional Living service; two-thirds of the program group youth participated in Transitional Living services for at least five months and about half participated for the expected program length of at least nine months. In addition, about 69 percent of the program group members began receiving services on the day they were randomly assigned to the program group, which may account for the high rate of participation. The average amount of time between random assignment and the first service was 1.7 days, which aligns with program expectations.

- **The frequency and duration of Transitional Living sessions were close to the expected levels, and participants and TL Specialists discussed a wide range of topics during the sessions. Benchmarks that were recorded in the MIS were generally completed as expected.**

During the nine months that followed random assignment, program group youth averaged about 23 Transitional Living sessions, with the first being about eight days after random assignment, and spent a total of 30 hours, on average, in those sessions. The rate of session frequency during the time youth participated was close to the expected level of one session per week; they lasted an average of more than one hour per session. Aside from weekly sessions, 90 percent of youth had contact with their TL Specialist at other times. Participant needs that were related to education, employment, housing, economic stability, criminal justice issues, and health were addressed with most youth. Nearly all individuals who participated in Transitional Living had an initial treatment plan, which typically was created within one week after random assignment. A psychosocial assessment was completed within 30 days after random assignment, on average, although only 84 percent of the program group members had one.

- **TL Specialists also made contact with others, such as family members or school personnel, who were involved in the participants' lives.**

Contact with other adults was made for various reasons, including to gather information about the youth early on in the assessment phase, to coordinate services, to locate youth who had lost contact, or to discuss problems with school or work. For about 92 percent of the program group members, Transitional Living staff contacted other relevant adults, averaging about nine such contacts per program group member.

Conclusion

The Transitional Living program in Tennessee was implemented as expected during the study period. The highly structured program model, including intense supervision practices, ensured the program's fidelity to the model. The study team found evidence of fidelity to the model through interviews with program staff and participants, and through analysis of the Youth Villages management information system. A report presenting the one-year impacts of the Transitional Living program on participant outcomes is scheduled for release in 2015.

About MDRC

MDRC is a nonprofit, nonpartisan social and education policy research organization dedicated to learning what works to improve the well-being of low-income people. Through its research and the active communication of its findings, MDRC seeks to enhance the effectiveness of social and education policies and programs.

Founded in 1974 and located in New York City and Oakland, California, MDRC is best known for mounting rigorous, large-scale, real-world tests of new and existing policies and programs. Its projects are a mix of demonstrations (field tests of promising new program approaches) and evaluations of ongoing government and community initiatives. MDRC's staff bring an unusual combination of research and organizational experience to their work, providing expertise on the latest in qualitative and quantitative methods and on program design, development, implementation, and management. MDRC seeks to learn not just whether a program is effective but also how and why the program's effects occur. In addition, it tries to place each project's findings in the broader context of related research — in order to build knowledge about what works across the social and education policy fields. MDRC's findings, lessons, and best practices are proactively shared with a broad audience in the policy and practitioner community as well as with the general public and the media.

Over the years, MDRC has brought its unique approach to an ever-growing range of policy areas and target populations. Once known primarily for evaluations of state welfare-to-work programs, today MDRC is also studying public school reforms, employment programs for ex-offenders and people with disabilities, and programs to help low-income students succeed in college. MDRC's projects are organized into five areas:

- Promoting Family Well-Being and Children's Development
- Improving Public Education
- Raising Academic Achievement and Persistence in College
- Supporting Low-Wage Workers and Communities
- Overcoming Barriers to Employment

Working in almost every state, all of the nation's largest cities, and Canada and the United Kingdom, MDRC conducts its projects in partnership with national, state, and local governments, public school systems, community organizations, and numerous private philanthropies.