

Testing the Eight Steps Model

**Evaluation of the method for young homeless people
in the Netherlands, Portugal, United Kingdom and
Czech Republic**

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1 INTRODUCTION

In this introduction the context of the evaluation is being explained as well as some basics about the Eight Steps Model (ESM). We conclude this chapter with a reading guide.

This report describes the outcomes of the evaluation of the Eight Steps Model (ESM) in four European countries: United Kingdom (UK), Czech Republic (CZ), Portugal (PT) and the Netherlands (NL).

ESM is a way of key working that is leading in the help for the homeless in the Netherlands. Can ESM be of use to young homeless populations in other European countries? That was one of the questions in our research *Combating social exclusion among young homeless populations* (CSEYHP). This report reflects on testing ESM in NL, UK, CZ and PT with young homeless populations as part of the CSEYHP project. Because time was limited, this evaluation should be seen as a *small-scale experiment*.

All research teams have produced national reports about their experiences as contributions to this research. This *comparative* report brings together all findings. It does not however replace the national reports, which contain more detailed information about the situation in each country.

About ESM

To understand this report, we will first introduce shortly ESM. ESM provides a 'structure for working with socially vulnerable individuals based upon planning, a holistic view and a positive, strength-based attitude, and it seeks to maintain or improve their quality of life focusing upon all aspects of life' (definition by MOVISIE, 2010). Two main characteristics of the model are:

- working with eight life domains,
- the division of the key works in eight different stages.

ESM has been leading in the work for adult homeless people in the Netherlands since its development in 2002. About 75 per cent of all shelters use this method and some parts of the method have been included in national programmes for the homeless. What makes ESM so useful for the homeless in the Netherlands? Several explanations can be given. One of the strengths of the model is that it is strongly embedded in daily practice. Social workers, clients and researchers have been involved in its development and have taken into account seriously the possibilities and limits of all partners involved. Results in the Netherlands have shown an improved quality of support for the homeless. The method helped to structure the work that was mostly 'crisis based' due to a lack of time and human resources. It also raised awareness of the importance of clients' own participation in their trajectory and a more strength based approach. These last two aspects are still work in progress in the Netherlands. More information about ESM can be found in the Toolkit ESM on www.movisie.nl/homelessyouth.

About this report

In the next chapter we will explain the research methodology of the evaluation of ESM (chapter 2). Because ESM is mainly a way to promote reinsertion, we will describe some general notes about reinsertion for young homeless people in the four participating countries (chapter 3). The concepts of social exclusion, resilience, capability and empowerment have been included in this chapter to grasp the leading vision in these countries. More information can be found in previous research findings (see

www.movisie.nl/homelessyouth). Then we will describe the process in testing the model in chapter 4. This will help to understand the outcomes presented in chapter 5. We use some quotes from the national reports to illustrate the text. Also we will present cases of young people who participated.

2 RESEARCH METHODOLOGY

In this chapter we describe our research methodology. This concerns work package (WP) 8 and 9 in CSEYHP. WP 8 concentrated on an evaluation of the ESM for young people in the Netherlands, while WP 9 was concerned with testing the model in CZ, PT and UK.

Research design

The overall research question of WP 8 and 9 was *Can ESM be of use for young homeless populations in NL and other European countries?* The Dutch research team designed the research methodology and tools for WP 8 and 9. WP 8 concerned an evaluation of ESM for young homeless people in NL. WP 9 concentrated on testing ESM in CZ, UK and PT. The research design has been made in close co-operation with the research teams. Activities in WP 9 consisted of observations, training, interviews and files analysis. All countries took care that ethics and confidentiality were taken into account at every stage. The research design for WP 9 is described in *Tools for evaluation of ESM* (see Appendix 1).

Research activities

In WP 8 the Dutch research team evaluated the model for homeless young people in the Netherlands. This was done through focus groups with social workers, managers and young homeless people within three organisations in the Netherlands. Based on the outcomes of these focus groups and already existing publications, the Dutch team made an international toolkit about ESM. This contained a DVD about the method, ESM software and a manual about the method. This toolkit has been made for the European partners to get acquainted with the method. The toolkit was translated into Portuguese, English and Czech.

The general outline of the evaluation of ESM in NL is that ESM works for young homeless people. The method as an individual programme with SMART goals and key working makes it efficient. But we found also areas of particular relevance for young homeless people in ESM, for example the domains daily activities and general outlook, key working in a pedagogical climate and cooperation with education programmes and learning environments. (NL evaluation ESM)

In CZ, PT and UK agencies working with homeless young people were selected to participate in testing ESM in WP 9. The aim was to work with at least two different organisations, three social workers and fifteen young people per country.

A national researcher observed all selected social workers in their interaction with clients. Observations were done before and after ESM training of the social workers, trying to see if anything had changed in the interaction between social workers and young people. After observations, all social workers received one-day (UK and CZ) or two-day training (PT) by Petra van Leeuwen, one of the authors of ESM, about ESM and motivational interviewing techniques. In PT the second day concentrated on the use of the software.

Testing ESM with young people started after the training and lasted for at least six weeks. During this testing period the national researcher gave support to social workers when needed. Social workers could use ESM software to fill in important documents that are part of the method, such as a support plan.

After the testing period there was a second round of interview observations, to see if anything had changed in the interaction between social workers and young people. Semi-structured interviews with social workers have been conducted to evaluate their experiences.

Also young people's files were analysed by the researchers, in order to get a picture of the young people involved, whether they were representative of young homeless people. It was also intended to involve young people's views. Together, this resulted in three national reports on ESM from PT, UK and CZ.

3 REINSERTION OF HOMELESS YOUNG PEOPLE IN NL, PT, UK and CZ

This chapter gives an overview of relevant aspects relating to reinsertion of young homeless people in each country. It describes empowerment as a starting point for policies as well as key work as intervention strategies and the level of available services. The issue of institutionalism has been stressed several times during the evaluation of the ESM it is highlighted at the end of this chapter.

Young homeless people across the four countries

The young people in this study have fewer opportunities than other young people. They are youth at risk and have experienced social exclusion since an early age and along their life trajectory. They are currently, or have been in the past, homeless and many depend on social provision of services. Homeless young people need to be assisted by reinsertion services to strengthen their capabilities and resilience. Reinsertion of these young people is quite a challenging task.

The story of a young mother

This young woman P was born in 1986. She grew up in foster care because her mother had problems with alcohol and left her. She met the father of her son when she left foster care but he died shortly after their son was born (heart attack after alcohol overdose). Společnácesta is her third asylum housing since then. P has been in a long relationship with her partner who is like a father to her son who is 4 years old. P lives from social allowances, has no working experience and has to pay off her debts (from asylum housing and telephone company). P is looking for a job and taking care of her son currently. She is working on her practical skills (cooking, taking care of household and her son) and on paying off her debts. Her main needs and wishes for the future are to have a job, live on her own (with her son and partner), helping her alcohol addicted mother and mainly to be able to take good care of her son. It seems that her main aim is to be a good mother and to provide her son with a happy childhood. (CZ report)

Empowerment as a starting point

ESM is based on the concept of empowerment, as a way to increase independence of vulnerable people. ESM is a way for homeless agencies to accompany excluded people towards employment, housing and social protection, mentioned as important social objectives in the European Social Model. A strengths-based approach helps young people to increase their resilience (CAPP, 2010). ESM challenges social workers to use this strength-based way of working. The shift from problem-oriented social work towards a more strengths-based approach is inspired by the rising interest in the concept of positive psychology.

The four key elements of ESM, namely positive approach, strengths-based working, empowerment as a concept, and a holistic view, are shared principles in all participating countries, according to the social workers who participated in this evaluation.

All social workers relate to the vision of ESM. Some admitted that sometimes they forget that people are more than just problems and paperwork, and the holistic approach and strengths-based reminded them of that. (PT report, page 24)

All key workers were fully conversant with the underlying philosophy of ESM, with its view of young people in terms of their abilities rather than their deficits. (UK report, page 22)

Key work as an intervention strategy

The establishment of case management or key working in Northern Europe has been an important development in work with excluded homeless people. Key work is recognized as an important strategy for both prevention and reinsertion and a way to empower people. ESM supports individual supervision, which is convergent with UK key working methods. The primary focus of key working in UK is on action planning and achieving even quite small steps to engage and support young people to go further. The most well known model used in homeless shelters in the UK is the Outcomes Star that was developed by St. Mungo's and Triangle Consulting (UK report).

PT also strongly promotes active inclusion through the development of a personalised and tailored plan. This is a concern under the National Homeless Strategy, which institutionalises the role of a case manager who will follow up and update the needs of the clients along the reinsertion plan they have agreed on. Empowerment or active social inclusion is seen as fundamental to promote the autonomy of the individual. The need for empowerment is very much incorporated in policies, but not so much into practice yet (PT report, page 31).

Level of available services

When looking at reinsertion, it must be mentioned that the level of available services is of great importance. Without good job possibilities or housing options for young people, providing even the best individual support will never lead to successful social inclusion. Financial independence is an important condition to work on social inclusion. Here we would only like to state that there are many differences between the four countries. Services for young homeless people in CZ and PT are scarce, whereas in the UK and NL quite a variety of different services for young people are available. The research among young homeless in the four countries show some evidence that the lack of services in CZ influences the situation of young homeless over time in a negative way. Street homelessness and use of drugs and alcohol increase over the years. In PT the same holds true, but family intervenes to support the young homeless. Interventions in UK and NL improve the situation of young homeless over time. But at the same time social services and the unmentioned side effects (e.g. waiting lists & institutionalization) are sometimes considered obstacles for reinsertion of young homeless people, especially in the Netherlands where homeless young people become inactive and inert and miss a real connection to society. In the Netherlands a distinction is made between prevention strategies, shelter and reinsertion programmes. Good national policies connect these three levels with each other. Our research shows that the services for young people vary a lot between different countries and between different cities within one country.

Reinsertion is focused on becoming independent again, but the lack of social housing for young people is a huge obstacle. Especially young people leaving care or prison, lack training or protected housing where they can learn how to manage a household. (...) Reinsertion methodologies are focused mainly on regulating documents, claiming benefits where necessary or possible but especially on finding a job and keeping it (CZ report, page 13).

Institutionalisation

One project manager working with young mothers and their babies thought young people should only stay up to a year in order to prevent institutionalisation but within London the length of stay is often two years because the lack of move on accommodation. (UK report, page 9)

The issue of institutionalisation of young people is mentioned in UK, NL and CZ reports as one of the obstacles for the empowerment of young homeless people.

The institutional care tends to develop dependency pattern with young homeless people, which is reinforced partly by the system of care provided by the NGOs. Because of the institutional care related problems and also because of often dysfunctional family background life skills training services are related to managing basic duties of everyday life such as obtaining documents, paying bills, applying for social benefits, etc. (...) Some clients spend entire day walking from one NGO to another at the time when they offer food or clothing. Some key workers complained that the current system in which a client can use the same service but within various organizations reinforces the dependency in managing everyday life and even that it might be beneficial for some NGOs to keep the clients dependent. (CZ report)

4 TESTING ESM IN CZ, PT AND UK

This chapter describes the process of work package 9. First, we present a timetable of all research activities in each country. Then we describe the process per research activity, starting with the selection of agencies and ending with the evaluation report in each country. An overview of participating clients and agencies can be found in appendix 2.

Timetable

All countries agreed to conduct the same research activities following the research design for WP 9 (see Appendix 1). This overview shows the process in time.

Timetable process work package 9

| | Defining WP 9 | Selection of agencies | 1 st observation round | Training by MOVISIE | Testing period | 2 nd observation round | File analysis | Interviews with social workers | National evaluation report |
|----|---------------|-----------------------|---|---------------------------------|-------------------------------|--|---------------|--|----------------------------|
| CZ | May 2010 | July – August 2010 | September 2010 | 29 + 30 September 2010 | October – December 2010 | December 2010 | December 2010 | December 2010 | December 2010 |
| PT | May 2010 | May 2010 | June 15 th – July 16 th 2010 & November 2 nd | 1 + 2 July 2010 | July – December 2010 | September 10 th – October 22 nd & December 9 th and 17 th 2010 | December 2010 | October 19 th – December 17 th + 1 questionnaire | December 2010 |
| UK | May 2010 | March – July 2010 | August – September 2010 | September 16 th 2010 | September 2010 – January 2011 | December 2010 – January 2011 | January 2011 | January 2011 | January 2010 |

Recruitment of agencies and social workers

All countries managed to find agencies that were interested to take part in this evaluation. CZ managed to involve two agencies working with the homeless. PT involved six agencies that work with immigrants, families and/or homeless people. UK involved two agencies. One organisation had a remit to work with young single people and the other was working with single homeless and vulnerable young parents and families. A third organization withdrew from the research due to internal reorganisation. An important reason for all agencies to be part of this evaluation was their interest in possibilities to improve their own work and be part of international exchange of experience.

Pre-training observations

National researchers observed the social workers in their interaction with young people, using a standard observation form containing observation on the interaction, but also on the content of the conversation. The observations were time-consuming. They became more difficult to plan when an organization wasn't merely working with young homeless people. All young people consented to being observed.

Training

All social workers received introductory training on working with ESM. This training was supposed to be a two-day training, but agencies in both UK and CZ weren't able to invest these two days due to a lack of human and financial resources. Therefore in UK and CZ the training was limited to one day, explaining the method in headlines and practicing with interviews skills. Training in PT lasted two days and also included practice with ESM software. The national researchers trained the social workers who joined the research afterwards. In PT and CZ effective time for training was also reduced because of translation time. Social workers felt this training was too short to fully understand ESM.

I hadn't understood the concept fully until I had read the literature and had the chance to trial the model with a service user. (UK report, key worker)

The holistic approach was very important, no doubt about that, but, in my opinion, insufficient in the training. The procedures of the software were very important and sufficient, according to the material existing so far. (PT, social worker)

Testing period

The testing period started directly after training and lasted until the second observation. During this time, social workers had interviews with young people and experimented with the use of an analysis, support plan and evaluation form. National researchers assisted the social workers when and where needed.

The length of this testing period varies from six to twelve weeks. UK used a longer period of time than expected because of initial problems with software, weather conditions bad for travel and illness. Also in PT and CZ obstacles arose on the use of the software, due to technical issues, organizational reasons, lack of time and incapability of some social workers to use software.

Some agencies found it hard to find time or ways to test the method. In CZ, one of the agencies withdrew in this period. This agency turned out not to have the necessary conditions to work with ESM, e.g. there wasn't time or even a room to have interviews with homeless young people. This kind of shelter is unable to work individually with clients.

It is not unusual for the social worker to talk to 25 different homeless people and answering the phone and questions from other staff all day. (CZ report, page 13)

I really like ESM, mainly the fact that it focuses on a client's strengths, not on problems. Our way of working is focused on problems, which is not suitable for young people... but in present conditions... the way our service is set up based on the law about social services – how we have to take notes, make statistics, registers – in these conditions it is impossible to work differently... you do need so many employees – not so much staff is needed when we focus on problems. It is much easier to evaluate the progress because in this case it is visible and measurable... it would be much better to have a chance to be happy about the fact that my client is in touch with his family again even when he/she still doesn't have ID. (CZ report, page 14)

In PT one of the agencies withdrew for similar reasons. These agencies didn't meet with the conditions needed to work with ESM. The PT report states that difficulties in communication with this agency might have caused the misunderstanding in the suitability of ESM in their work (PT report, page 7).

In what concerns the social workers included in the testing period, the majority of them was clearly overloaded with different tasks, lacking time and capability to become really involved in a new project. (PT report, page 22)

Second round of observations

The second round of observations was held after the testing period. Post training observations were problematic for a number of reasons. Some clients had left the agencies. Severe winter weather conditions in UK limited the possibilities to schedule the observations.

The second observation list was the same as the first observation list. Differences in outcomes would show results in the interaction between social workers and young persons. The number of observations was limited the second time and a comparison was hard. UK and PT managed to compare. UK found some clear differences between the first and second observations (see UK report) and PT found hardly any clear results: only in one organisation there seemed to be a small shift towards a more structured approach.

Data collection from the ESM files

The national researchers have analysed the clients' files that the social workers made. This involved six case files in UK, twelve files in PT and two files in CZ. There was no time to practice with more files. The files were analysed to compare the data with the previous data in the research. The files represented the CSEHYP profiles of interviewed young people, also because the selected agencies had participated in the research earlier.

Evaluation with social workers

All teams received feedback from social workers. UK key workers' feedback was gained using an email survey at the end of the testing period. Two of the key workers gave their feedback verbally and one returned the email survey. PT interviewed five social workers and had one questionnaire filled in. CZ interviewed three social workers to ask their feedback. The feedback of social workers provided a lot of information about the strengths and weaknesses of ESM.

Feedback from young people

Only the UK managed also to receive feedback from three young people after the second observation.

One young person felt that ESM allowed him to form goals that represented what he wanted and not what the organisation pushed them towards. ESM allowed them to use their own language. (UK report, page 30)

In PT it was not possible to conduct interviews to clients as we understood that the social workers did not really involve the clients in the process of testing ESM (...) ... we can't really say they were part of the trial as it would have been desirable. (PT report, page 32)

National reports

All teams collected and analysed the data and made national reports on the evaluation of ESM. They were delivered in December and January 2011.

5 OUTCOMES OF THE EVALUATION

Can the ESM be of use for young homeless populations in other European countries? This evaluation has given insights in the possible benefits. In this chapter we explain the main outcomes that are relevant for all four countries.

Overall: a positive acquaintance

In all countries, testing ESM turned out to be valued highly by most social workers. The overall view is that ESM is an attractive model for young people. Social workers also stress that because of the limits in time and human resource, they couldn't really explore ESM to the full.

All the social workers think that ESM might be very useful and its implementation on national level would be very fruitful but probably more financial/human resources would be needed in order to have capacity to work with this model. (CZ report)

The general first impression was very positive for all social workers. Mostly they felt this model brought them a structure they needed in their work. (PT report, page 28)

Several internal and external circumstances limited the possibility of achieving a noticeable change in the attitude of key workers and their interaction with the clients. Some of these are inherent of the national context; others are more specific to this project. (...) There are two factors needed to enable key workers to explore these possibilities: time and more human resources. Only so they would be able to explore ESM in all its potential. (PT report, page 21, 30)

One limitation of ESM that had already established is that ESM is not suitable for agencies that offer only crisis help, like day and night shelters.

Strengths-based and holistic view is very attractive

The strength-based and holistic view of ESM is highly appreciated in the evaluation. Building on client's strengths seems to be interesting.

The key workers found the personal analysis form far superior to the Outcome Star in getting the whole of the young person's 'story' using the young person's words. (UK report)

ESM makes the key worker make an effort to look for the client's strengths, capabilities and potential of the clients. (PT report, page 28)

It is very important the holistic character of the model, as it works with the less visible and more human sides of the person: spiritual aspect, psychological, emotional. It makes the key workers think broader, not only in terms of documents, housing and finances. (PT report, page 28)

During observations however, this experiment did not lead to a huge shift towards a more strengths-based approach. No huge changes in this interaction have been observed for the whole group of key workers in the three participating countries. On an individual level some changes has been measured, mainly in UK where social workers moved to a more goal and person centred approach (UK report).

The philosophy is surely what takes longer to change. (PT report, page 23)

ESM added value to the individuality and also the broad way of looking at clients, because the use of eight domains. Both organizations think that working with ESM on national level would improve the co-operation with partner organizations, because sharing information about a client would be easier. This could be fruitful and save time for both social workers and clients. In order to be able to work with ESM, an effective training would be needed and more money for employees. (CZ report)

Working systematically keeps the future in perspective

Worked with goals and plans helped social workers and young people to keep the future in mind and helps young people to realise that the decisions they make now may be critical in terms of future opportunities.

The supervision plan is important because young people should know what actions they have to carry out during their stay. The young person expresses his or her own goal, but the process of 'SMART' formulation happens in the supervision interview. The supervision plan is often written by the social worker, but the young person reads it afterwards (NL evaluation ESM).

The analysis of ESM documentation shows far more SMART goals than pre-observation indicated. In line with the above most goals were achieved by the time the evaluation session was observed. (UK report)

To work with intermediate and final goals is good, to keep the future in perspective. It was also stated that it may be of particular importance for young people to work in this way, as they are used to living only in the "here and now". (PT report, page 28, 30)

It is very important that there is a mandatory evaluation, because this is something that often lacks in other intervention models. (PT report, page 28)

The Outcomes Star seems to be good in measuring distance travelled. ESM strength seems to be in bringing about this movement. (UK report, page 21)

ESM challenges young people to be actively involved

ESM gives young people a voice. In all countries there is a shared global view on empowerment and the need to take clients seriously. This is important for implementing EMS on a national level. Empowerment practices should be included in policies concerning social inclusion. Some reports also mention the tension between empowerment policies and practice.

Even if formally it doesn't look so, as policies, strategies, organisations' missions and the way people talk all take empowerment needs on board and seem very committed to a change of attitude and paradigm. Still, the truth is that these theories are not yet broadly put into practice. (PT report, page 22)

Working with ESM helped social workers to involve clients more than they were used to. One of the strengths of ESM is that it values the point of view of the young person.

ESM helps to explore possibilities for/with young people. The “with” was repeatedly stressed as a clear advantage of this model. As many of these children and young people have often an already long experience of institutions, key workers etc, the point that they can make a difference is to propose them a framework where they are the actors and not the objects of the intervention. (PT report, page 30)

What is noticeable in the pre-training observations is that key workers seem to be oriented towards the need of the hostel/foyer. The needs of the organisation seemingly take precedence over the individual goals of young people. After implementation of ESM housing was attended in a radically different way in both organisations, evidenced in the 3 observations and ESM documentation. (UK report, page 17)

It always takes into account the needs of clients and what they want for themselves (PT report, page 28)

ESM obliges the key worker to work deeply with the client and explore lots of different issues, to get really involved. (PT report, page 28)

Basic conditions are needed to work systematically

All reports show that basic conditions need to be met in order to make it possible to work systematically. The UK reports them as *materiality*. The UK team mentioned the material aspects of the practice of key working as an important part of the observations. They include ‘the use of space when conducting the key working session. Other material aspects include the case notes, how they were shared, whose voice did they represent. The context in which the key worker session takes place has a language of its own and can have a huge impact on the work. The UK defines needs of materiality as following. Room needs to be: private, away from distractions and interruptions, comfortably furnished, allows choice of seating arrangements and gives an indication that the young person is valued and that the process is an important part of project life.’ (UK report, page 27)

The fact that the consultations takes place in the same room where all the clients meet means that there usually is quite a lot of noise there and that the consultations are frequently interrupted in order to answer questions from the newcomers, other staff, answering the phone or just asking for less noise. The social workers said that this interrupts them and makes it much harder to concentrate. There is no air-conditioning in this room, which makes it sometimes hard to even breathe in there, especially when the weather is warm. (CZ report, page 6)

PT reports the same problem. For instance, during observations other staff was systematically interrupting the key worker and client, opening the door of the office regularly. Other basic conditions are mainly related to time and human resources to guide young people individually.

There was a shared opinion amongst key workers that time is the most needed resource for such a model to be implemented. (PT report, page 26)

Our evaluation has shown the need in some shelters to improve the basic conditions within the organization, like having privacy to talk to clients. Without these conditions it has hardly any use to implement key work at all, no matter what methodology is being used. The need for basic conditions needs to be addressed first in that case (see also chapter 3).

Reinsertion possibilities for (disadvantaged) youth – employment and housing

Working on reinsertion only makes sense when there are indeed reinsertion possibilities for young homeless people.

The constraints the clients find are shared with the Portuguese youth in general, namely unemployment, lack of training options, difficulties to find independent housing and with disadvantaged youth in particular, like drugs addiction, homelessness, low qualifications, undocumented and so forth. (PT report, page 15)

Other client's goals that have not been achieved have to do with the lack of adequate training/work options for people with poor specific qualifications in Portugal. (PT report, page 17)

Domains for young people and families need adjustments

ESM could be improved in terms of language, terminology and content. That conclusion was also drawn in NL evaluation. The model should also be adjusted for the needs of families. It has been designed for individual clients and has not enough possibilities to work with families.

There should be a specific heading for legal questions, documentation, permits etc as this is a major issue, sometimes very complex. (PT report, page 29)

Managers, social workers and young homeless people agreed that domains such as daily activities and general outlook do not fit completely in the young person's point of view. The Dutch team decided on a development of the domain index of ESM especially for young homeless people. (NL evaluation ESM)

It would be good to have some space to make the analysis and plan for children, for clients who are young mothers, for instance, as they belong together with the mother's files. (PT report, page 29)

Key workers supporting young families felt that ESM model needs some modification to meet their needs. (UK report)

ESM lacks something more visual, like a page the worker could look at and have a global idea at a glance. (PT report, page 29)

Software might be a useful tool

The software wasn't very supportive in the testing period after all, due to several technical issues. It was however considered to be a very interesting tool. In CZ software is considered as attractive, also to improve the co-operation between agencies in future. The technical equipment, both in materials and in human capabilities, needs to be improved first in the agencies in CZ.

From limited sources we had at disposal we could recommend to work more on accessibility of the EMS software. Its structure seems very attractive and useful for the users and could increase share of information in the area of organizations working with homeless youth in the CZ. In our view this is the most important point from testing the EMS in the CZ. (CZ report)

Put empowerment into practice!

We end this report with a final recommendation for all people involved with the reinsertion of young homeless people. *Put empowerment into practice!* This can be done in different ways and on different levels. One concern that was significant in this evaluation was the need to work on empowerment of young people in care. These young people need to gain life skills to be able to live their lives as best as possible in adulthood. Using strengths-based methodologies like ESM can help to bridge the gap between policy expectations and daily social practice.

Appendix 1: Tools for evaluation of ESM

Introduction

In WP 9 we test the use of ESM in CZ, PT and UK. Its main aim is to see in what way ESM might contribute to the reinsertion of homeless youth, but also to underline the main issues per country relation to reinsertion. Therefore WP 9 will also reflect on earlier results in CYH. In our factsheet of WP 9 is described how we will work on this small testing period. It will result in national reports by PT, CZ and UK and a summarized report by NL. This document contains our suggestions for evaluation. Please give us your comments, so we can take them into account.

1 Evaluation of the personal files (content of the software and other relevant documents on the participating homeless youth)

General profile (objective information)

- Profiles of clients > Number, Age, gender, cultural background
- Profiles of organizations
- Trajectories / files >
 - Number of Analysis
 - Number of Plans
 - Number of Evaluation
 - Kind and number of other relevant documents (like intake)
 - Duration of the trajectories
 - Number of conversations (if known)

About the Analysis (including information of intake)

- What similarities do you find in the Analysis?
- Do you find in the Analysis both positive and 'negative' aspects of the clients? If yes, what is the relation (10-90%, 50%-50%)
- Do the analysis meet with the objective criteria (how to write an analysis, see toolkit)?
- What indicators do you find terms of capability and resilience?
- What can be said in regards to social exclusion?
- Are these representative with the results of the 54 interviews (in general lines)?
- If yes, what are the similarities? If not, what are the differences?

About the plans

- Do the plans meet with the objective criteria (how to write an plan, see toolkit)?
- How many and what kind of goals and actions have been formulated?
- On what domains are the most goals? (top 3?)
- Are there similarities or major differences In these goals?
- In what way do these goals reflect the local or national situation?

About evaluation

- Have the goals in the plan been achieved? If yes, why? If not, why?
- What can be said about the goals that have or have not been achieved?
- What measurable achievements can be found, based on these documents, based on the indicators: Shelter / Income / Support (social work) or other? (indicators from Maas & Planije, 2008)

2 Observations

The main aim of the observations is to see if anything has happened because of ESM in relation to both process and content (domains) of the meeting. In regards of process: interaction, motivational interview techniques, making agreements, body language, positive approach and so on.

Please analyse the first and second observation and use this information, please reflect on:

1. Schedule, framework, interaction (process) of the meeting.
2. Content of the conversation (domains).
3. Please summarize the final outcomes of the observation: what has clearly changed, what happens and why?

3 Feedback of participating social workers

The main aim of the feedback of social workers is to know what they think ESM has to offer to their clients, organization and/or country. Of course, this is just based on this small experience, where there has not been either proper training or proper implementation. But despite this, we expect that they are able to reflect on this. Per country we suggest to interview all social workers. In case this is too much (PT for example), you might choose to ask feedback on paper or through email or additional focusgroup. Let's agree that we all interview 3 social workers individually, to be able to compare and to collect the feedback of other social workers in your own way (but based on the questions below).

Feedback of social workers

1. Current situation
2. Reflection on training and support
3. Evaluation of ESM
4. Reflection and suggestions

Current situation

- Are you responsible for keyworking? (How long, how many clients?)
- How much time do you in general have per client for individual meetings, conversations? (how much time do you work per week and how many clients do you support?)
- In what way does/did the vision of ESM (holistic, positive, strength based, empowerment) meet your own vision? Please explain.
- In what way does/did the vision of ESM (holistic, positive, strength based, empowerment) meet the vision of the organization you are working for? Please explain.
- What methods or instruments do you usually use in keyworking? (Please collect as much as possible information, like example framework for plans, work descriptions and so on)

Conditions

- What do you think is necessary in terms of conditions?
 - Personal conditions (skills, knowledge and so on?)
 - Institutional conditions (time, support, finance?)
 - Local and national conditions (policies, different institutions...)

Reflection on training and support

- What have you learned most in the training of NL? What did you find most useful? Why?
- What did you think of the support of the national research team?

Evaluation of ESM

- What is your first general impression of ESM?
- How would you – in your own words – describe ESM?
- What did you test in this period?
 - Analysis, Plan, Evaluation, Motivational Interview Techniques, Holistic approach, strength based attitude, positive approach, empowerment
- What of ESM was to you most useful, positive experience? Why?
- What of ESM was not useful to you? Why?
- What was the reaction of the young people? Please explain more.
- Could you use all eight domain for the young people? Why (not?) Is something missing in the domains or topics? Or does something needs to be changed?

Reflection and suggestions

- What do you think of a way of working systematically like in ESM? Is it useful? Why?
- What do you think can/are the effects of working systematically with young people?
- Does ESM meet the needs of young people? Why yes or no?
- Does ESM helps you to explore possibilities for/with young people and are you able to use those possibilities? Please explain.
- Would you recommend your organization to work with ESM, if the conditions can be met for implementation?
- In your country, is empowerment of vulnerable people considered as major challenge for social inclusion?

4 Feedback of clients

If possible, it would be great to get some feedback of clients on ESM. Some general questions will do, since they have only experienced a very small part of ESM:

- What do you think of the eight spheres? Are they all relevant to you?
- What do you think of the Analysis (if being made) > did you find it helpful? Why (not)?
- What do you think of working with a plan? More specific: do you like ESM plan (why?). If the person is familiar with another kind of plan, please try to get feedback. What should be changed? What should be kept?
- What do you think is important in the interaction with your key worker?

Version 2.0, September 7th 2010

Petra van Leeuwen

Appendix 2: Participants

| | Agency | Social Workers | Clients 1 st observation round | Clients 2 nd observation round | Files | Interviews with social workers |
|-----------|-----------------|--|--|---|---|--|
| CZ | Nadeje | 1 female, 30 yrs, dominant ethnic background 1 female, 27 yrs, dominant ethnic background | 1 young man, 25 yrs 1 young man, 20 yrs 1 young man, 21 yrs 1 young man, 26 yrs 1 young man, 26 yrs 1 young woman, 21 yrs 1 young woman, 22 yrs 1 young woman, 20 yrs | None, withdrawn from the experiment because lack of conditions | None | 1 female, 30 yrs, dominant ethnic background |
| | SpolecnouCestou | 1 female, 26 yrs, dominant ethnic background 1 female, 24 yrs, dominant ethnic background | 1 young woman, 24 yrs and her son 1 young woman, 24 yrs old and her 4-yr old son | 1 young woman -24 and her son 1 young woman, 24 years old and her 4-yr old son | 1 Young woman, 24 yrs, with her son (4 yrs) Family, young man (24 yrs) and young woman (25 yrs) and two sons (1 and 5 yrs) | 1 female, 26 yrs, dominant ethnic background 1 female, 24 yrs, dominant ethnic background |
| PT | O Companheiro | | 1 male, 19 yrs, immigrant 1 male, 20 yrs, ethnic minority | 1 male, 19 yrs, immigrant 1 male, 20 yrs, ethnic minority | 1 male, 19 yrs, immigrant 1 male, 20 yrs, ethnic minority | |
| | CVP | | 1 male, 26 yrs, dominant ethnic 1 male, 22 yrs, immigrant 1 male, 23, ethnic dominant | None, withdrawn from the experiment because lack of conditions | None | |
| | IAC | | 1 female, 19 yrs, illegal immigrant 1 female, 17 yrs, dominant ethnic | 1 female, 19 yrs, illegal immigrant | 1 female, 19 yrs, illegal immigrant 1 female, 17 yrs, dominant ethnic | |
| | CRIVA | | 1 male, 22 yrs, mixed ethnic dominant and minority | 1 male, 22 yrs, mixed ethnic dominant and minority | 1 male, 22 yrs, mixed ethnic dominant and minority | |
| | HUMANUS | | 1 female, 19 yrs, illegal immigrant | 1 female, 19 yrs, illegal immigrant | | |
| | CPA-JRS | | 1 male, 23 yrs, illegal immigrant 1 male, 23 yrs, asylum seeker | 1 male, 23, asylum seeker | 1 male, 23 yrs, illegal immigrant 1 male, 23 yrs, asylum seeker | |

| | Agency | Social Workers | Clients 1st observation round | Clients 2nd observation round | Files | Interviews with social workers |
|-----------|---------------|--|--|---|--------------|---------------------------------------|
| UK | A | 1 female, 34 yrs, dominant ethnic background 1 male, 30 yrs, dominant ethnic background | 1 female, 17 yrs, dominant ethnic background 1 male, 19 yrs, dominant ethnic background 1 male, 21 yrs, dominant ethnic background | | | |
| | B | Female, 30 yrs, dominant ethnic background Female, 45 yrs, dominant ethnic background | 1 female, 18 yrs, dominant ethnic background, with child 1 female, 18 yrs, dominant ethnic background, with partner and child 1 female, 16 yrs, dominant ethnic background, with child 1 male, 18 yrs, dominant ethnic background, with partner and child 1 female, 18 yrs, dominant ethnic background, with partner and child | | | |

Appendix 3: Observation scheme UK

| | | | | | | |
|---|--------------------------------|----------------------------------|--------------------------|---------------------------|-------------------|--------------------------|
| Name of observer: | | Date of observation: | | Observation Schedule (UK) | Observation No. | |
| Pre ESM training Observation | <input type="checkbox"/> | Post ESM training Observation | <input type="checkbox"/> | | Duration hr/min | |
| 1 Key Worker | Male | <input type="checkbox"/> | Female | <input type="checkbox"/> | Age | <input type="checkbox"/> |
| | Qualifications? | | | | | |
| 2 Client | Years of Experience? | | | | | |
| | Time with the agency? | | | | | |
| 3.1 Type of meeting | Ethnicity/cultural background? | | | | | |
| | Male | <input type="checkbox"/> | Female | <input type="checkbox"/> | Ethnic Background | |
| Extra notes clients homeless pathway and current situation i.e. How long in current situation? | | | | | | |
| Age <input type="checkbox"/> Ethnic Background <input type="checkbox"/> Immigration Status <input type="checkbox"/> Current Housing <input type="checkbox"/> <ul style="list-style-type: none"> <input type="checkbox"/> Living at home <input type="checkbox"/> Living in hostel <input type="checkbox"/> Living on streets <input type="checkbox"/> Living with friends and family | | | | | | |
| Application <input type="checkbox"/> Analysis <input type="checkbox"/> Evaluation <input type="checkbox"/> Intake <input type="checkbox"/> Planning <input type="checkbox"/> Exit <input type="checkbox"/> Admission <input type="checkbox"/> Implementation <input type="checkbox"/> OTHER <input type="checkbox"/> | | | | | | |

| | | | | | | |
|---|--|-----------------------------|--------------|-------|--|--|
| 3.2 Frequency of meetings Total number of meetings (to date) | | Meeting arranged via | Phone | | | |
| | | | Mobile phone | | | |
| | | | | Email | | |
| | | | | other | | |
| <p>Note - who initiates the meeting and takes the lead in setting the aims.</p> <p>Note - are the aims clear and have all the aims of the meeting been met and how is the meeting brought to a conclusion</p> | | | | | | |

| Observation On Interaction Characteristics | | | | | |
|--|-----------------------|--------------------------|-----------------|--------------------------|----------------------|
| Observation | Key Worker | | Client | | Notes on Interaction |
| 4.1 Overall estimation % Talking | | | | | |
| 4.2 Body Language | Mainly Open | | Mainly Open | | |
| | Mainly Closed | | Mainly Closed | | |
| | Open and closed | | Open and Closed | | |
| 4.3 Asking questions | Often | | Often | | |
| | Occasionally | | Occasionally | | |
| | Rarely | | Rarely | | |
| 4.4 Given space to talk | Yes | <input type="checkbox"/> | yes | <input type="checkbox"/> | |
| | No | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| 4.5 Client Influences on interaction | Learning needs issues | | Notes | | |
| | Psychiatric issues | | | | |
| | Drug or alcohol | | | | |
| | Other | | | | |

| | | Making Plans | | | | |
|-----|---|--------------|--------------------------|-----------|--------------------------|---------------|
| | | Key Worker | Client | Notes | | |
| 5.1 | Observation Capability - Plan activities | Yes many | <input type="checkbox"/> | Yes many | <input type="checkbox"/> | |
| | | Yes a few | <input type="checkbox"/> | Yes a few | <input type="checkbox"/> | |
| | | No plans | <input type="checkbox"/> | No plans | <input type="checkbox"/> | |
| 5.2 | Suggestions - client's own | N/A | | Yes | <input type="checkbox"/> | |
| | | | | No | <input type="checkbox"/> | |
| 5.3 | Does worker listen | Yes | <input type="checkbox"/> | | | |
| | | No | <input type="checkbox"/> | | | |
| 5.4 | Motivation - setting goals | yes | <input type="checkbox"/> | Yes | <input type="checkbox"/> | What goals |
| | | No | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| 5.5 | Date for next meeting | Yes | <input type="checkbox"/> | Yes | <input type="checkbox"/> | Verbal/letter |
| | | No | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| 5.6 | Worker checks satisfaction | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| 5.7 | Client satisfied | | | Yes | <input type="checkbox"/> | No |
| | | | | | | |

| Observations on the eight domains | | | | | | | |
|-----------------------------------|-----------------------|----------|----------|---------------|-------------------|----------|----------|
| Domain | Sub Category | Positive | Negative | Domain | Sub Category | Positive | Negative |
| Housing | Own housing | | | Finance | Income | | |
| | Shelter | | | | Debt | | |
| | House Rules | | | | Administration | | |
| | Living on the streets | | | | Way of spending | | |
| | Previous housing | | | | | | |
| | Running away | | | | | | |
| Notes | | | | Notes | | | |
| Domain | Sub Category | Positive | Negative | Domain | Sub Category | Positive | Negative |
| Social behaviour | Parents | | | Mental Health | Drugs and alcohol | | |
| | Family | | | | Trauma | | |
| | Friends | | | | Mental health | | |
| | VIP | | | | Emotional state | | |
| | Sexual Relationship | | | | Professional help | | |
| | Professionals | | | | | | |
| | Criminal record | | | | | | |
| Notes | | | | Notes | | | |

| Domain | Sub Category | Negative | Positive | Domain | Sub Category | Positive | Negative |
|------------------|-------------------|----------|----------|------------------|----------------------|----------|----------|
| Motivation | Daily Motivation | | | Physical Health | General Condition | | |
| | Religion | | | | Medical care | | |
| | Spirituality | | | | Dental care | | |
| | Family (Children) | | | | Personal hygiene | | |
| | | | | | Sexual health | | |
| Notes | | | | Notes | | | |
| Domain | Sub Category | Positive | Negative | Daily activities | Sub Category | Positive | Negative |
| Practical skills | IT skills | | | | Work | | |
| | Household skills | | | | Voluntary job | | |
| | Literacy | | | | Education | | |
| | Travelling | | | | Daily meaningful act | | |
| Notes | | | | | Leisure time | | |
| Notes | | | | Notes | | | |

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