Monitoring and Evaluation Framework for Waverley Action for Youth Service

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*MONITORING AND EVALUATION
FRAMEWORK FOR WAVERLEY ACTION
FOR YOUTH SERVICE*

FOR WAVERLEY ACTION FOR YOUTH
SERVICES

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Abbreviations

ACOSS	Australian Council of Social Services
AOD	Alcohol and other drug
CEO	Chief Executive Officer
NCETA	National Centre for Education and Training on Addiction
NGO	Non-government organisation
PEST	Political, Economic, Social-cultural and Technical analysis
SWOT	Strengths, Weaknesses, Opportunities and Threats
WAYS	Waverley Action for Youth Services

1   Introduction and approach

Waverley Action for Youth Services (WAYS) offers a range of services that aim to build a community of young people who are aware, informed and who have the ability to make healthy lifestyle choices. This is achieved through an integrated model of service delivery that acts as a "one-stop shop" for youth aged 9-25 and their families. WAYS receives funding from a variety of sources, including federal, state and local grants, as well as money from private organisations and foundations. The monitoring and evaluation system has evolved to meet the reporting requirements for each funding body.

WAYS management identified the following issues relating to monitoring, evaluation, and organisational development:

1. Due to multiple funding sources and the individual histories of different programs, there is no service-wide monitoring system. That is, each program collects different information and this information cannot be put together to identify what the service as a whole is achieving.

2. Some youth participate in more than one program. There is no way of linking client information across programs. This can result in repetitive data collection and the service cannot identify and describe who participates in multiple programs.

3. Monitoring and evaluation procedures and tools that are in place have been developed either in response to funding accountability requirements or on an ad-hoc basis. There is no cohesive system of data collection linked to program logic.

4. Much of the data that is collected is not analysed or reported.

5. WAYS lacks information that could assist with program development and funding

6. WAYS would like to increase participation in research and evaluation projects beyond basic monitoring. This will increase the relevant information available to WAYS, enhance the reputation of WAYS and enable WAYS to contribute to the evidence base.

Given these issues, WAYS commissioned the Social Policy Research Centre to:

1.   develop a monitoring and evaluation framework for WAYS; and

2.   identify , prioritise and explore a potential research project for WAYS.

A program logic model was used to develop the monitoring and evaluation framework. Logic models are used to identify the intended relationships between the program's resources, activities, outputs and outcomes (Savaya and Waysman, 2005). This process is useful because it identifies the underlying assumptions of various interventions and, by identifying the elements of a program, makes it possible to measure the occurrence of each element.

The approach used to develop this framework was participatory. It involved collaborating with WAYS staff to produce new knowledge through sharing perspectives and experiences (Blackstock et al., 2007). Participatory approaches to evaluation ensure that changes to the current monitoring and evaluation system are consensual, explicit and useful for program development and funding applications (Savaya and Waysman, 2005). In addition, this

approach increased the likelihood that a system in which data is easily collected, stored, and analysed would be created.

The aim of this report is to provide a resource for WAYS for further development of the organisation's monitoring and evaluation system. To this end, the report provides a brief overview of some key resources that relate to program planning, monitoring and evaluation, and the research literature to inform WAYS program planning. The report then provides the results of research that was conducted with WAYS staff on their current monitoring and evaluation activities, followed by suggestions for improvements that can be made to WAYS systems to ensure that the information collected across the organisation is comprehensive, systematic and useful.

In developing this framework, it was anticipated that WAYS will, in future, invest resources into the implementation of the monitoring system. In particular, it was anticipated that a part-time research position would be created in the organisation to implement the framework.

2   Literature review

WAYS management noted a lack of capacity for staff to keep up to date with the literature that supports program planning and evaluation. This issue is common amongst NGOs, which struggle to both access information and to effectively evaluate complex literature. Skinner et al (2003: 72-73) suggested various strategies for dealing with this issue, including:

- Sharing the responsibility for collecting and disseminating information amongst team members;

- Setting aside discreet time periods to analyse the literature; and

- Share information with organisations with similar aims and information needs.

This literature review contributes a starting point for staff to familiarise themselves with literature that is relevant for seeking funding, planning and evaluating programs. It is outside of the brief of this report to provide a comprehensive and original review of the literature on all of the topics that are relevant to WAYS. Instead, this review identifies key reviews and resources that WAYS staff can easily access and use, particularly new staff who might be unfamiliar with the topics covered. Key points from these texts are summarised on the topics of: planning; monitoring and evaluation; workforce development; youth development and aetiology of problem behaviours; the service model, and interventions.

2.1   Planning

Successful monitoring and evaluation systems are contingent on the quality of planning done by the organisation. Programs that do not have clear objectives will not be able to measure whether the program is doing what the staff think it should be doing or whether it is performing well. This section provides a brief overview of the process of strategic organisational and program planning.

Strategic planning

Key text: Anheier HK. *Nonprofit organizations: Theory, management, policy*. Routledge: Abingdon, OX, 2005.

Strategic plans aim to "create organisational objectives (the vision statement, the strategic goals, and the mission statement) that provide a framework for program objectives" (McDavid and Hawthorn, 2006: 66). The mission is a statement of the primary purpose of the organisation and acts to contain the work that is done by the organisation. According to Anheier (2005), good mission statements include the organisation's purpose, long-term goals, the need the organisation fills, and the organisation's core values and principles. An organisation's vision states its future aspirations. Statements of an organisation's vision and mission are important in making the long-term direction and performance of an organisation explicit in the face of rapid social change (Anheier, 2005). Anheier (2005, p. 262) described five basic steps to strategic planning:

1. Revisit the mission statement;

2. Identify goals that follow from the mission statement and prioritise those that assist the organisation in meeting its mission;

3. Identify specific strategies that should be implemented to reach the goals;

4. Identify activities and programs used to implement each strategy and define measures and indicators; and

5. Monitor and evaluate the plan.

Managing and anticipating organisational change can be done through the use of a number of management tools such as:

-   PEST (Political, Economic, Socio-cultural and Technological) analysis to identify factors that impact on the work of the organisation;

-   Stakeholder surveys; and

-   SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis of the organisation.

Business plans are tools that are used to implement the vision and mission of the organisation. A good business plan includes the following information: vision, mission and values; organisational description; needs assessment; services provided (including quality and quantity); operations (how services are delivered and why); marketing and outreach plan; governance and list of members; management approach and personnel policies; financial analysis; assessment and program evaluation (Anheier, 2005: 277).

Program planning

Key text: Hawe P, Degeling D, Hall J. *Evaluating health promotion. A health worker's guide*. Sydney: Maclennan and Petty, 1992.

Program planning begins with identifying a need in the community. According to (Hawe et al., 1992: 18-20), various types of need can be identified when a needs analysis is conducted:

-   Normative need: This is need that is defined by expert opinion (for example, standards of acceptable alcohol intake). Normative standards change over time;

-   Expressed need: This type of need is inferred by observation of the use of services (for example, you may notice that more young people are coming into the sexual health clinic with Chlamydia, signalling that youth in the area might need more information about Chlamydia and its prevention);

-   Comparative need: This type of need is determined by comparing the need in one area with need in another area that is similar in composition (for example, there may be more problems with graffiti in La Perouse than in Maroubra); and

-   Felt need: What individuals in the community consider is a problem (for example, some communities might think that young people hanging out in public spaces is a problem more than in other communities).

Needs assessments are thorough investigations of problems and the need for intervention. This involves identifying the problem by collecting data and opinions, analysing the data, then collecting additional information if needed. Once the problem has been analysed, a

program appropriate to the problem can be developed. Hawe and colleagues outlined ten basic steps for program plans (Hawe et al., 1992: 55):

1. Assess the resources available, including the setting, infrastructure and amount of financial support needed;

2. Set the goal by deciding what is ultimately to be achieved by the program;

3. Set the objectives and sub-objectives. Objectives describe the change desired in the target group (do not simply describe what you want to do). Objectives should specify the geographical region in which the program takes place; target group; the timeframe; the magnitude of the change (McDavid and Hawthorn, 2006). Sub-objectives are what has to happen before the objective can be achieved;

4. Select the strategy: the type of strategies chosen depend upon the community context and the philosophy of the organisation;

5. Set the objectives of the particular strategy: This includes a description of what the program will provide and deliver;

6. Devise strategy activities: What actions will be taken to meet the objectives of the strategy;

7. Develop and test programme materials;

8. Train staff: familiarise staff with the program and their role within the program;

9. Set up administration, advertising and record keeping procedures and develop program manual with this information; then

10. Implement the program.

Making program plans as detailed as possible is necessary to avoid employees interpreting the plan differently. This section has provided a short overview of what is required for organisational planning. The next section discusses monitoring and evaluation and its importance for NGOs.

2.2 Monitoring and evaluation

Key text: Unrau YA, Gabor P, Grinnell RM. *Evaluation in the Human Services*: Wadsworth Publishing Company, 2001.[a]

Program monitoring involves the continuous collection of information about the activities and operation of a program to determine whether set standards or requirements are being met. Evaluation is about assessing the effectiveness of a program in achieving its objectives using methods that distinguish the program's impacts from those of other factors. Monitoring and

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[a] There are a number of useful online resources for evaluation, including a resource developed by the National Centre for Education and Training in the Addictions, O'Neill, M., D. Addy and A. M. Roche (2004), *Guidelines for evaluating alcohol and other drug education and training pograms*, Australian Government Department of Health and Ageing, Canberra. http://www.nceta.flinders.edu.au/pdf/evalu-guide.pdf. available from www.nceta.flinders.edu.au/pdf/evalu-guide.pdf (accessed 29 April 2008)

evaluation are the flipside to program planning; the specific objectives and sub-objectives that were set during the program planning stage act as the focus for program evaluation and ensures that the evaluation is tied to organisational practices (Hawe et al., 1992). This section provides a brief overview of why and how to monitor and evaluate.

Purposes of monitoring and evaluation

Monitoring and evaluating organisational practices are necessary to improve and enhance the quality of existing programs; NGOs are facing increasing requirements to provide evidence to support their performance (Anheier, 2005). According to McDonald (2003), monitoring and evaluation helps organisations to:

- Assess efficiency and effectiveness of a program;

- Refine and improve an existing program;

- Decide whether to continue or replicate an initiative;

- Contribute to the established evidence base; and

- Justify the program or initiative and to help procure further funding.

For these reasons, it is important that organisations devote resources towards improving their monitoring and evaluation processes, as well as their capacity to collect and use social indicators (Eccles and Gootman, 2002: 18).

Considerations and components of a monitoring system

Monitoring and evaluation can raise some fears among staff. Some staff might be concerned that evaluation and monitoring will take time and money away from clients. Administrators might be concerned that negative aspects of programs will be uncovered (Unrau et al., 2001). To address these concerns, it is necessary that administrators and evaluators allow staff to openly voice these concerns. Effective monitoring and evaluation systems can also minimise staff concerns by making monitoring part of everyday work and emphasising that the ultimate aim is to improve programs for the benefit of clients. According to Unrau et al (2001) ideal monitoring systems are:

- Internally driven: There is continuous and routine use of evaluation methods by practitioners for their own and their client's benefit without being requested by outside sources;

- Integrated into daily practice: Evaluation systems are an accepted part of daily tasks. Changes to these tasks are instigated by line-level staff, who are given the opportunity to identify problems and suggest solutions based on program data;

- Fed back to staff: It is necessary to constantly review the instruments used in monitoring systems and to talk to staff about questions that may arise. This allows staff to see what happens with the information they collect and includes them in decisions that come from that information. Inclusion in the process helps staff to value the monitoring that takes place;

- Informs and improves practice: Information collected from monitoring should be used to inform decision-making at all levels of the organisation to improve the programs and services offered by the organisation;

- Informs planning: Effective monitoring can help administrators to determine which interventions work, or how interventions can be modified to become more effective;

- Helps in obtaining funding: Data that clearly comes from a systematic monitoring system may help to convince funders that the program is worth being funded; and

- Accountability: Good monitoring systems can help organisations to demonstrate transparency in making claims about the work done by the organisation.

Objectives and indicators

Effective monitoring systems depend on whether the objectives of the program are based on the values of the organisation and are 'SMART' – a commonly used acronym referring to the need for objectives to be Specific, Measurable, Achievable, Relevant and Time specific (McDonald et al., 2003). It is difficult to build a monitoring system around objectives that do not have the following characteristics:

- Specific: Explicitly stated (for example, knowledge is obtained or specific behaviours are achieved);

- Measurable: The objective can be quantified to assess pre- and post- change;

- Achievable: Objectives are balanced between challenges and realistic expectations;

- Realistic: and also consistent with beliefs, ideology, schedule, resources and general direction of the initiative; and

- Time-specific: Specific dates are set for achievements of milestones and achievement of final objective.

Performance indicators are based on the organisational objective. Indicators measure achievement and solely refer to aspects of the program that are under your control. They are expressed numerically so as to provide an easy method of comparison and must be easy to collect and use to provide useful information (Mayo, 1992).

Types of evaluation

Monitoring systems that, as discussed earlier, are internally driven and integrated into daily practice, can be used to measure and keep track of the outcomes of program or organisational activity. Evaluation uses the information that is collected by monitoring activities to answer questions that are set by the organisation, such as 'Is this program providing services in a cost effective way?' or 'What impact is this program having on its clients?'

Unrau et al (2001) have identified six types of evaluation:

1. Needs assessment: Determines the nature, scope and locale of a social problem and proposes feasible, useful and relevant solutions to the problem;

2. Evaluability assessment: Determines the program's readiness for an evaluation. An evaluable program has clearly defined activities and program objectives, is implemented with fidelity, and there is agreement on what questions should be addressed, how the evaluation should be conducted and what should be measured;

3. Process evaluation: Describes the type, frequency and duration of program operations and client service activities;

4. Impact evaluation: Assesses the immediate effects of the program, which are measured in relation to the program objectives;

5. Outcome evaluation: Determines the change experienced by clients after a program's services have finished. This type of evaluation generally goes beyond the capacity of information provided by monitoring systems and requires extensive research and additional funding; and

6. Cost-benefit or cost-effectiveness analysis: Concerned with the costs associated with providing services to specific population and how this relates to benefits or outcomes.

Types of data used in evaluation

Once a determination has been made that a program is evaluable and the type of evaluation is determined, it is necessary to make a decision about what data will be used for the evaluation. There are two types of data. Quantitative data uses numbers, such as averages, percentages and standard deviation and qualitative data, which tends to be text (words, sentences). Both types of data can be useful depending on the type of evaluation and the questions that have been asked.

Data can be gathered from a number of sources internal and external to the organisation. *Internal* data that is routinely collected through the monitoring system, such as demographic data, can reveal recent and past characteristics of clients. Internal data can also be collected on an occasional basis. Unrau et al (2001) outlined a number of ways by which internal data can be collected:

- Face to face interviews: Interviews can be structured (to gain knowledge about a topic of which we have some prior experience) or semi-structured, which involves more open ended questions (particularly useful when little is known about a particular topic);

- Surveys: Allow the opinions of numerous people to be canvassed. Can be administered by phone, mail or in person;

- Group interviews: Allow the perspectives of individuals to be gathered at one time. Can be done in open forums, focus groups or using a nominal/Delphi method;

- Observation: Produces data about a phenomenon through observation of a particular environment;

- Case studies: Can be used as an example of a particular group you want to discuss in the context of an evaluation.

Secondary data is that which has been compiled by an external organisation. These might be specific data collections for a research study, routine data collections such as hospital or police data, or regular data collections such as the Australian Bureau of Statistics (ABS) census. Some secondary sources of data that may be relevant to WAYS are:

- Data from Waverley council [b] or the local area health services [c];

- Survey data available from the National Drug Strategy, including the Australian secondary school student drug use survey and the national household drug use surveys. [d]

- Data reported by the Australian Institute of Health and Welfare [e]

- ABS statistics [f].

The Australian Clearinghouse of Youth Studies [g] and Children and Youth Statistical Portal of the National Data Network [h] can provide information on other sources of data as they become available.

A specific method that NGOs have found useful for assessing outcomes is called the 'Most Significant Change' method (MSC). The MSC process involves identifying domains of change, or areas in which change has occurred and collecting stories that represent this change. (Dart and Davies, 2003; Davies and Dart, 2005 ; Willetts and Crawford, 2007)

Data collection instruments

Data collection instruments include self-completion questionnaires, questionnaires administered by staff members, discussion formats and observation protocols. It is necessary to take steps that ensure the data collected is of good quality. When collecting quantitative data, it is important to consider the instrument's representativeness, reliability, validity, utility, sensitivity and non-reactivity. Qualitative methods need to consider observer bias, authenticity, and truthfulness of representation. See Unrau et al (2001) for more information.

What happens to the data?

After the data is collected, it must be recorded, cleaned, and checked for data quality before being analysed. The process of analysing data will depend on the type of data that was

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[b]   http://www.waverley.nsw.gov.au/ accessed 20 April 2008

[c]   http://www.sesiahs.health.nsw.gov.au/ accessed 20 April 2008

[d]   www.nationaldrugstrategy.gov.au/internet/drugstrategy/publishing.nsf/Content/publications-lp accessed 18 April 2008

[e]   http://www.aihw.gov.au/childyouth/index.cfm accessed 20 April 2008 accessed 20 April 2008

[f]
        http://www.abs.gov.au/Websitedbs/c311215.nsf/20564c23f3183fdaca25672100813ef1/35f3e8efed45ce47ca256de2008194bd!OpenDocument accessed 20 April 2008

[g]   http://acys.info/home accessed 20 April 2008

[h]   http://www.central.nationaldatanetwork.org/NDNPortal/portal/portal.do;jsessionid=F4E3155D21C58EA06D9C87693B747FC9 accessed 20 April 2008

collected. It can be useful to use computer software to help with the data preparation (see Royce et al., 2006 for more information). Analysing quantitative data can be greatly assisted with the use of a statistical program such as the Statistical Package for Social Sciences (SPSS); qualitative analysis can be assisted with the use of a qualitative data analysis program such as NVivo. Analysis of data and the use of these analytical programs require specific training. The more sophisticated the analysis, the more training and experience is required of the analyst. Once the data is analysed, it is necessary to write up the findings in a manner that is useful and easy to understand. Finally, the data needs to be reported to the staff and participants of the evaluation for comment.

Ethical issues

For the safety of research participants, evaluators need to be aware of ethical issues relating to their research (National Statement on Ethical Conduct in Human Research, 2007). Researchers are required to respect the autonomy of research participants by giving them full information about the evaluation. Research participants must give informed consent to participate in research and be allowed to refuse to participate without experiencing any negative repercussions. Conducting research with youth under the age of 16 requires extra caution because younger people may have a more difficult time understanding that they do not have to take part in research. Because of this, it is essential that parental consent also be sought whenever youth are requested to take part in research activities. Researchers need to take into account any additional issues faced by a particular group of individuals, such as specific issues arising as a result of ethnic background or language barriers. Finally, it is essential that researchers respect individual's right to confidentiality and privacy.

This section has examined a number of concepts that are important to developing an effective monitoring system and conducting program evaluation. Developing an effective system, however, depends strongly on the capability of the staff to implement a good quality monitoring system. The next section briefly discusses the key issue of workforce development.

2.3 Workforce development

Key text: Skinner N, Freeman T, Shoobridge J, Roche A. Workforce development and the Alcohol and Other Drugs field: A literature review of key issues for the NGO sector. Melbourne, VIC: NCETA (National Centre for Education and Training on Addiction), 2003. www.nceta.flinders.edu.au/pdf/NGO.pdf accessed 20 April 2008.

According to Australian reports, there is an urgent need for the NGO sector to develop and invest in its workforce capacity (Skinner et al., 2003; Taylor and Dryfoos, 1998). This need appears to be exacerbated by the increasingly complex needs of clients in community NGOs. From a survey of 857 community service NGOs conducted by the Australian Council Of Social Service (ACOSS) in 2007, 69% of respondents reported that their clients in 2005-06 had more complex needs than in 2004-05. In view of this trend, agencies reported that their most pressing training need was how to work with clients that have difficult and complex problems.

Skinner and colleagues at the National Centre for Education and Training on Addiction (NCETA) have reviewed the literature on workforce development for the AOD field. (Skinner et al., 2003) Skinner et al emphasised that workforce development is not simply staff training. It requires a multi-faceted approach to improve the effectiveness of the

workforce. They conceptualised workforce development intervention on three levels (Figure 3.1). These were:

1. A broad systems level, where consideration is given to organisational policy and procedures e.g. policy, recruitment, incentives;

2. The level of organisational capacity building that support the sustainability of the AOD workforce and help transform knowledge and skill into practice e.g. clinical supervision, mentoring, job redesign; and

3. The level of individual workers, where support is directed at their capacity to utilise evidence-based practice e.g. training.

Skinner et al noted that workforce development is required not just for frontline staff, but also for management, who need to be effective in such areas as leadership, networking, understanding the context in which the organisation operates and managing staff performance. There is also a need for activities and mechanisms to ensure board members function with maximum effectiveness (Fishel, 2003).

Organisational change is an integral part of workforce development. Organisational change can be stressful for all involved and must be managed carefully to be effective. Strategies such as involving employees and other stakeholders in decision-making processes, encouraging staff commitment to change, and building in reward systems for change can facilitate what can otherwise be a stressful process (Skinner et al., 2003).

Another important issue for workforce development is workforce sustainability. Skinner et al (2003: 23) described a sustainable workforce as one in which:

1. The number and skills of the workforce matches the needs of the client population;

2. Individuals are positively engaged with their work and have the capacity to perform at their highest potential;

3. Individuals' work contributes to their well-being; and

4. Opportunities are provided for individuals to further their professional development and career prospects (career paths).

Building sustainability requires multiple strategies to enhance the organisations capacity to recruit and retain staff, maintain high motivation, alleviate stress, prevent burnout, enhance job satisfaction, reduce staff turnover.

2.4 Youth development and aetiology of problem behaviours

Key text: Spooner C, Hetherington K. *Social determinants of drug use (NDARC Technical Report No. 228).* Sydney: National Drug and Alcohol Research Centre, 2005. http://ndarc.med.unsw.edu.au/ndarcweb.nsf/website/Publications.reports.TR228 accessed 20 April 2008.

We now turn away from literature on organisational development to that which specifically relates to WAYS' mission and programs. WAYS targets programs and services to a broad age range of 9-25 years old. This section provides a review of some of the literature that

supports WAYS' holistic approach to youth development. In particular, it focuses on the importance of understanding youth development and how this can contribute to risk factors for multiple problems. In addition, this section makes the argument that, although early childhood is a current focus in government policy, it is still crucial to support adolescents through their transition to adulthood because of the potential for development of risky behaviours.

Overview of developmental tasks and issues

Human development can be conceptualised as a series of transitions from one phase of life to the next, with successful transition to the next phase reliant on successful achievement of developmental tasks in the previous phase. Developmental tasks and risk factors for WAYS client age group are represented in Table 1, based upon the National Crime Prevention review of pathways to criminal behaviour. (National Crime Prevention, 1999)

Table 1: Developmental phases, tasks and risk factors

Developmental phase	Developmental tasks	Risk factors for criminal behaviour and drug abuse
School	Adaptation to school	School failure
	Peer relationships	Lack of parental monitoring
	Experiences of success and failure	Inconsistent discipline
		Peer rejection
TRANSITION TO HIGH SCHOOL		
Adolescence	Defining identity	Teenage pregnancy
	Intimate relationships	Risk-taking behaviour
	Developing value system	Unemployment
	Growth of autonomy in a context of peer conformity	Antisocial peers
		Lack of parental support
TRANSITION TO WORK AND ADULT RELATIONSHIPS		
Adulthood	Adult roles and responsibilities	Unemployment
		Poverty
		Homelessness
		Social isolation

Source: Adapted from National Crime Prevention (1999)

WAYS role is to assist young people in the achievement of developmental tasks and transitions.

As illustrated by Silburn's depiction of developmental pathways in Figure 1 below, (Silburn, 2002) failure to achieve developmental tasks can lead to a range of poor outcomes. Developmental models highlight that problems that come to the attention of WAYS might have antecedents in early childhood. Just as problems take a long time to develop, they can take a long time to address. Silburn's flow chart also emphasises how a problematic beginning can result in a number of problem outcomes. Consequently, it can be better to build resilience to the range of possible outcomes, rather than address problems in isolation. The issue of resilience is further discussed below.

Figure 1: Pathways to poor outcomes
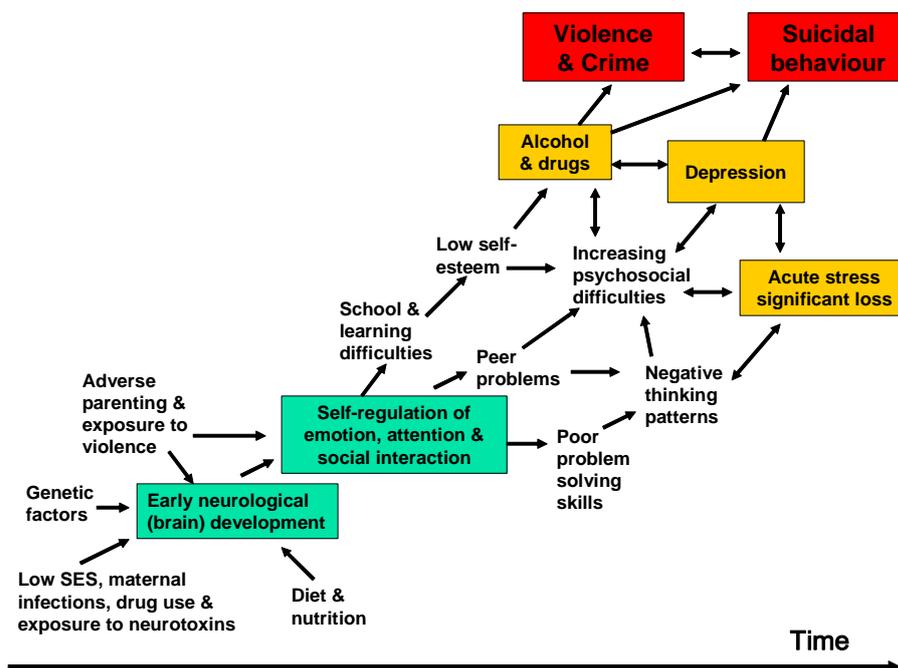
Source: Silburn (2002)

Youth development: adolescence

As reviewed by Spooner and Hetherington (2005), the adolescent years are important for many reasons, not least of which is that these are the years during which experimentation with drugs begins and the brain is still developing, Adolescence is a time of upheaval and change for individuals. Leffert and Petersen (1995) described some of the major changes that occur during this period:

- Major hormonal changes that lead to puberty;

- Physical changes such as the development of breasts (girls) or facial hair (boys);

- Increases in cognitive competency, including abstract reasoning and increased decision-making ability;

- Developments in social relationships. While there is a decrease in parental supervision as adolescents move towards autonomy, parents continue to be important sources of support. Peer relationships also shift at this time;

- Development of social and psychological autonomy;

- Onset of psychosocial disorders, including drug abuse, crime, depression, suicide and eating disorders; and

- Important role transitions; for example, first sexual relationships, driving a car, and first job.

These changes impact on risk-taking behaviour. Tarter (2002) argued that characteristics of adolescence predispose adolescents to drug 'abuse'. For example, adolescents have the propensity to take risks and immature cognitive functioning can contribute to poor decision-making around drug use. This combination of factors highlights the importance of harm reduction at this time.

Societal changes mean that many Australian teenagers experience the significant transition to adolescence in a less supportive environment than in the past, making them vulnerable to risk factors that contribute to negative youth development. Leffert and Petersen (1995), for example, described how adolescents now experience greater exposure to stressors such as parental divorce, step-families, being a victim of crime and drugs. Furthermore, as a result of adolescents being raised separately from adults, the developmental needs of children and adolescents are not met as well today as they were before World War I. Because adolescents are less connected with family and other adult role models, they spend less time interacting with adults which can lead to a greater sense of disconnectedness. Eckersley has described how difficulties faced by young people in western society, with its focus on individualism, consumerism, materialism, and secularism. (R. Eckersley, 2004; R. M. Eckersley, 2005)

Much of the 'antisocial' behaviour of adolescents is limited to this developmental period (Moffitt, 1993) and is symptomatic of adolescents seeking appropriate pathways to achieving developmental tasks (Siegel and Scovill, 2000). During this transition, it is necessary that services and the wider support system work to temper the internal and external stressors of this period, such as during school transitions, and assist adolescents in their preparations for life as an adult.

Transition to adulthood

Some WAYS programs target young adults. Arnett has argued that this period of 'emerging' adulthood (around 18–25 years) is a distinct developmental period marked with new freedom and independent role exploration (Arnett, 2000). Demographic and social changes in the past half-century have contributed to making 'the late teens and early twenties not simply a brief period of transition into adult roles but a distinct period of the life course, characterised by change and exploration of possible life directions' (Arnett, 2000: 469).

Furlong (2000) contended that young people are staying in education for longer periods of time. As a result, transitions between education and employment are no longer linear as young people combine work and education, or return to study after a period in employment. Young adults risk being lost in the multiple transitions from school to work and, in the context of modern values relating to individual responsibility, those who do not successfully manage this transition are blamed, and blame themselves, for their failure (Furlong, 1998). He described life as a young adult in modern times as 'marked by discontinuities, uncertainties and backtracking' (Furlong, 2000: 132).

The transition from school to work can produce a "pathway to marginalisation and long-term unemployment" (The Boston Consulting Group, 2000: 11). Boston Consulting Group argued that the many services that have evolved to deal with labour market problems in Australia work independently and rarely share best practice. Young people are particularly at risk of becoming long term unemployed for a number of reasons:

- Lack of availability of full time employment;

- Lack of role models and social connectedness;

- Inadequacy of traditional schooling; and

- Geographic isolation.

The longer that one is jobless, the more difficult it is to find a job; in this way, it is important to intervene well before persistent joblessness becomes a problem. Particularly important is supporting youth during transitions between school and work as well as the transition between redundancy and work (The Boston Consulting Group, 2000).

During the period of transition from adolescence to adulthood, youth have more freedom to use drugs and more access to drugs (Spooner and Hetherington, 2005). At the same time, developmental challenges such as leaving home, commencing a career or completing tertiary education need to be managed. Schulenberg and Maggs (2002) reviewed the literature on alcohol use during the transition to college to describe how a number of developmental changes impact on alcohol use. They found that this period is characterised by the desire to look (and appear) older and drinking alcohol can be a symbol of adulthood. Cognitive development affects perspective taking and decision making, so there is greater awareness of the benefits of drinking, less conviction that there are risks or costs with drinking, and greater identification of adult hypocrisy in relation to telling young people not to drink. During this period, interactions with parents reduce while peer influences (including inflated norms of peer drinking) increase.

The literature confirms that human development is a complex process, comprising a series of transitions and developmental tasks that can be hindered or aided by the environment (Spooner and Hetherington, 2005). Current social changes, including the loss of opportunities for interaction between adults and adolescents and the risks and uncertainties of the modern world, present challenges to youth development. WAYS can help young people to successfully meet these challenges.

The next section discusses two topics are particularly important for youth development: resilience and attachment.

Resilience

Resilience refers to the ability to avoid negative outcomes despite being exposed to a high-risk environment (Rutter, 2000). The development of resilience can enable young people to avoid negative outcomes, despite a negative environment. No single protective factor is sufficient to provide resilience, and resilience does not make a person 'bullet-proof' against all adversity in life (Spooner and Hetherington, 2005). However, it is likely that the more protective factors there are, the greater the likelihood of resilience to a range of problem outcomes. It follows that programs and structures that promote and maintain these protective factors will build resilience to a range of adverse events, such as drug abuse, unemployment, school drop-out and suicide.

Attachment

Attachment has been identified as essential for human development in early life and throughout the life course (National Research Council and Institute of Medicine et al., 2000). A lack of attachment is recognised in theories of delinquency. Similarly, alienation has

proved to be predictive of drug use (Spooner, 1999). Lee and Bell (2003) defined attachment as

> Emotional closeness to parents and is conceptualised as an indicator of the adoption of adult norms and expectations. Thus, attachment is designated as a protective factor for risk behaviour because it signals identification with conventional societal values. (pp 347-348)

The balance between attachment and autonomy is important in understanding risk taking behaviours, as this is associated with developing confidence, competence in peer relationships and a good coping ability. These elements should contribute to the ability of young people to handle experimentation with limits and to avoid excessive, problematic and dysfunctional involvement in risk behaviours (Lee and Bell, 2003). Research highlights the importance of family relationships and social supports, (National Research Council and Institute of Medicine et al., 2000) which is likely the basis for the success of mentor programs for the prevention of drug use and other problem behaviours (Sipe, 2002).

Rationale for investing in adolescents

While the benefits of investing in early childhood have been well articulated in the past decade, investment in adolescents is also important. Burt (2002: 143), for example, presented information to argue for investment in adolescents. While the costs presented are for the United States of America, the points are relevant to the Australian context. He calculated:

- Each year's class of high school drop-outs will, over their lifetimes, cost the nation $260 billion in lost earnings and forgone taxes;

- Over a lifetime, the average high school drop-out will earn $230,000 less than a high school graduate and contribute $70,000 less in taxes;

- Each added year of secondary education reduces the probability of public welfare dependence in adulthood by 35 per cent (with associated reductions in public costs); and

- Each year, the United States spends roughly $20 billion in payments for income maintenance, health care and nutrition to support families begun by teenagers.

Looking specifically at youth drug abuse and associated crime, Burt cited research by Cohen that provided 'an overall estimate of the "monetary value of saving a high risk youth" of between $1.5 and $2.0 million' (Burt, 2002: 146). In another paper, Burt and colleagues explored the costs and benefits of various policy choices relating to interventions that reduce risk profiles and increase resiliency for a range of negative and positive outcomes for youths and the community. (Burt et al., 2002) Their discussion illustrated that the benefits to both youth and society are far more enduring when a range of risk reduction and youth development interventions are put in place. Their model has been used by the Common Solutions Project in Victoria to explore how different sectors can work together to improve outcomes for young people and the community (Hulme et al., 2003).

Apart from cost-effectiveness issues, as a basic human right, adolescents are entitled to the opportunity for health and social participation. (Gruskin et al., 2007)

Barriers to seeking help

Health services have a history of difficulty in attracting young people. From the perspective of young people, a number of barriers exist to seeking help with health and social problems. These include concerns about confidentiality, knowledge of services and discomfort in disclosing health concerns, harassment from other peers, and accessibility and characteristics of services (Booth et al., 2004; NSW Commission for Children and Young People, 2003). A youth service such as WAYS needs to address such barriers.

This section has demonstrated that developmental tasks experienced during transitions between youth and adulthood can contribute to negative youth development. This is particularly the case for youth who experience long term stresses, lack attachment or who have not, for one reason or another, developed resilience. Because of the shared reasons for negative youth development, it is necessary that youth services develop a holistic approach to youth development (Spooner and Hetherington, 2005). The following provides an overview of some of the literature that addresses the type of service model espoused by WAYS.

2.5   Service model

Key text: White R. Youth service provision: Mapping the terrain. *Youth Studies Australia* 2004;23(2):31-37.

WAYS has adopted a "'one-stop shop' integrated model of service delivery" (WAYS Youth Services, 2006: 4). This section explores the rationale behind the integrated service model that sits at the core of WAYS services.

WAYS seeks to address risk taking behaviours among youth aged 9-25 and to promote positive youth development. It has been argued by a number of people that youth services are, ideally, holistic and work at the level of the community (Kim-Ju et al., 2008; White, 2004). Organisations that work holistically at the community level are important to address the many factors that can contribute to problem behaviour in youth. These organisations can be an "important source of social connection for young people both in terms of peer group relationships and the intersection of participation in the family, school and work" (White, 2002: 19).

A recent initiative that supports the idea of holistic youth services is that of full-service schools, in which schools partner with community agencies to provide services to all members of the community (J. Dryfoos, 2002; J. G. Dryfoos, 1995, 1996, 1998). To increase access to services, the schools remain open before, during and after school hours and provide an array of health and education services. Providing fully integrated services through schools emerged as a "reaction to the proliferation of fragmented and often inaccessible programs for children and families" (J. Dryfoos, 2002: 2).

The concept of integration is supported by the report *Youth and the Future: Effective Youth Services for the Year 2015*, which concluded that effective services are integrated with schools, non-government organisations, and private organisations (Sercombe et al., 2002).

The effectiveness of holistic approaches can be increased when they include mobilising the community to come together to address a social problem. In this way, the community is empowered utilise their collective expertise to collaboratively plan and act to address issues that face that particular community (Kim-Ju et al., 2008). Community mobilisation can include youth in planning, decision-making and action (Kim-Ju et al., 2008; Watson-

Thompson et al., 2008). Delgado and Staples (2008) and others have argued that allowing youth to become directly involved in planning and community action in an authentic way can empower youth to promote positive social change, can help them to develop leadership skills, promote learning and have fun.

In addition to community mobilisation, holistic youth services depend on the creation of collaborative partnerships with other youth-focused organisations. While collaborative arrangements are important for information sharing and leveraging existing organisational resources, such relationships can be difficult to create and maintain. Some of the barriers to coordinating services with other organisations include complex governance arrangements (such as accountability), who is to coordinate the process, and dispute over "turf" (where organisations fear that their purpose is being overtaken by another agency) (J. G. Dryfoos, 1996; White, 2002).

2.6   Specific programs

Key reference: Loxley W, Toumbourou J, Stockwell T, Haines B, Scott K, Godfrey EW, et al. *The prevention of substance use, risk and harm in Australia: a review of the evidence (Ministerial on Council on Drug Strategy Monograph)*. Canberra: Australian Government Department of Health and Aging, 2003.
 http://www.health.gov.au/pubhlth/publicat/document/mono_prevention.pdf

WAYS' holistic and place-based service model encompasses a variety of strategies and programs, including:

- Youth centre: recreational programs; outreach

- Urban Arts Base: recreational art program for youth with mental health problems

- Schools program: education programs on a range of health topics;

- Counselling: for families and children, includings parents groups;

- Youth Drug and Alcohol Court Case Management and Brokerage service

- Safe Summer Survival: outreach and peer education;

- Employment services;

- POEM: an alternative school for those who have not been successful in mainstream education; and

- Satellite Sexual Health Clinic: Partnership program with Sydney Sexual Health Service.

The following section provides an overview of some of the key literature that can inform these specific strategies. It is beyond the scope of this report to review all of the possible strategies for all the relevant outcomes. One area that has been extensively reviewed is drug prevention, which includes such strategies as: family interventions, recreational programs, school-based programs, case management, peer education, and employment (Loxley et al., 2003). The following section provides an outline of the evidence base on these interventions.

Family interventions

Loxley et al (2003) found that parental education is a promising strategy for delaying drug use. In addition, there is also evidence that family interventions which involve repeated sessions giving parents and children information about strategies to communicate, deal with stress, resolve conflicts, and building social skills are effective in preventing harmful drug use. One example of this is the Resilient Families program, which provided support to all students in the first two years of secondary school and aimed to give parents the tools to care for developing adolescents (Loxley et al., 2003: 130).

Recreational programs

Recreational programs aim to substitute drug use with positive alternatives such as art, music or sport. Few studies on recreational programs have included evaluations that are strong enough to determine any long term impact(Loxley et al., 2003). However, it has been found that recreation strategies may be more relevant to adolescents who have dropped out of school (Elkington et al., 2006).

School-based programs

School based educational programs attempt to "influence the attitudes and behaviours of adolescents" (Elkington et al., 2006: 18). However, given the multiple factors that contribute to drug use it is necessary to have realistic expectations of their outcomes. School-based programs have been shown to impact on knowledge, but it is unrealistic to expect that they will necessarily lead to a change in behaviour (Kowalenko et al., 2002).

In a review of the literature on school-based drug-education programs, Midford and Munro offer a number of best practice guidelines (Midford and Munro, 2006: 217-226):

- Effective programs are derived from an evidence-based understanding of the factors that lead to problematic drug use and the strategies that can be used to prevent this. They should also include the consequences that have a direct impact on and relevance to young people;

- Whole of community or whole of school approaches that support what is taught in the classroom are more effective;

- Programs that are based on the experiences of the students are more effective than those based on what adults think kids should be told;

- Education should take place before students start to take drugs, preferably during the transition from primary school to high school;

- Programs should have realistic objectives (e.g. abstinence programs have been proven to have little effectiveness);

- Interactive teaching methods (role playing, discussion and small group projects) are the most effective;

- Classroom teachers are a core resource and are sometimes best placed to provide the education, and hence require training;

- Programs led by peers may be more effective in the short term than those run by adults;

- Programs that are based on the social-influence approach, in which youth are taught skills to resist social pressures are more effective than other approaches; and

- Effective programs also contain follow up sessions.

The literature that guided the development of these guidelines was based upon multi-session programs. There is little information on the value of professionals from youth services such as WAYS conducting guest education sessions in schools. There might be value in terms of factors such as the credibility of the presenter on a topic such as drugs.

Case management

Case management is offered by WAYS staff at the Youth Centre, Drug and Alcohol Court and Employment services. According to Gursansky et al (2003: 7), the term case management is used to describe two broad activities:

1. Generic case management: focus on tasks and processes involved in the practice of working with a particular group. Does not place itself within a particular discipline or focus

2. Clinical or advanced case management: Role includes coordination and other clinical tasks and usually deals with a high-risk target group or group with complex needs

WAYS primarily does generic case management as the activities do not have clinical tasks associated with it. The activities of case management include "outreach, screening and intake, comprehensive assessment, care planning, service arrangement, monitoring and reassessment" (Gursansky et al., 2003: 17). Case managers respond to the unique needs of individuals and ensure that services are coordinated and integrated so they can meet those needs.

Given the variety of settings in which case management is practiced, best practice depends on "targeting the approach on the populations or individual circumstances that can be improved through a coordinated approach to service delivery" (Gursansky et al., 2003: 200). This requires that individuals are reflective in their practice, and that they measure client progress through client logs, behavioural observations, rating scales, goal attainment scales and other standardised measures (Poulin, 2005).

Peer education

Peer education is defined by McDonald et al (2003: 13) as:

> Sharing and providing information about alcohol and other drugs to individuals or groups. It occurs through a messenger who is similar to the target group in terms of characteristics such as age, gender or cultural background, has had similar experiences and has sufficient social standing or status within the group to exert influence.

This strategy is based on the premise that peer educators can influence the knowledge, action and behaviour of their peers. It is important, however, to choose peers who are not just the

same age as the target group, but who share other characteristics, group membership and experience. Peers are chosen to provide information about risky behaviour because they are believed to be credible role models, can have access to hidden populations and can provide services to youth in a cost effective way (McDonald et al., 2003). Peer education also offers a number of benefits to the educators themselves, such as increased confidence.

Limited studies examine the effectiveness of peer education programs. Those that have done so have found that peer education can provide a positive influence on knowledge as long as programs are implemented according to the above criteria. However, in some instances, peer education has been shown to increase contact between high-risk youth, which means such strategies are "at risk of being counter-productive" (Loxley et al., 2003: 129).

Employment

Job Network is one of the main employment activities that WAYS is engaged in and one of the primary ways in which the Australian government is addressing youth unemployment. In 2002, the Productivity Commission conducted a review of the Job Network, which aimed to decrease the number of young people who are employed. Job Network works by applying market principles to the provision of services to unemployed people by contracting out these services to NGOs (Productivity Commission, 2002). This service has three functions:

1. *Job placement*: refers eligible youth to job vacancies;

2. *Customised assistance* provided for six months to those who are at high risk of remaining unemployed; and

3. *Job search training* and support for three months to unemployed people.

The Commission (2002) found that challenges arose around measuring outcomes that are not easily quantified. Measuring the effectiveness of these services is difficult because some of the youth who contact the services would have received jobs even without help. With that said, however, the Commission concluded that giving youth more skills can, over time, decrease unemployment (Productivity Commission, 2002). They found that Job Network has had "modest effects on job seekers' chances of gaining employment" but that more improvements are likely to be seen over time, especially if accompanied by other labour market programs (p. xxvii). They call for a number of improvements to be made to Job Network, including more effective targeting of programs, less micro-managing by the Department of Education, Employment and Workplace Relations, and more choice given to people when choosing a job network provider.

Little evidence about changes in employment outcomes for young people due to their involvement in employment programs exists (Carson et al., 2003). It is assumed that employment programs work because they give young people the skills and motivation to work. However it is possible that these assumptions may be false, as some studies have shown that self esteem has little impact on criminal behaviour, educational attainment or employment (Carson et al., 2003). In the study conducted by Carson et al (2003) on Work for the Dole, they found that there was no evidence of the program impacting on self esteem or employment commitment. However, the program did help those who were suffering from depression to improve in terms of their general well being and confidence in getting a job. Young people who participated in the study were less supportive of Work for the Dole over time because they believed that the program did not actually help them get jobs and some

regarded the program as a punitive measure through which they earned their welfare cheques (Carson et al., 2003: 24).

Sources for more information

There are numerous sources for information that can be used to inform WAYS program planning. For example:

- Australian Clearinghouse for Youth Studies http://www.acys.info/about/

- Internet searches using search engines such as Google and Google Scholar

- Electronic journal databases such as Web of Science (this requires access)

- Cochrane reviews on health interventions http://www.cochrane.org/reviews/

- Campbell Collaboration reviews on education, crime and justice and social welfare www.campbellcollaboration.org

- headspace Knowledge Centre http://www.headspace.org.au/default.aspx?page=27

- UNSW Drug Policy Modelling Program: www.dpmp.unsw.edu.au

As noted above, it is difficult for staff of NGOs to keep up to date with the literature. However, an investment of time and a specific strategy for this task is essential for professional development and organisational excellence. One method used by many organisations is a *journal club*: once a month an article of relevance to all staff is circulated and then discussed, perhaps over lunch. This enables peer learning.

The next section outlines the existing monitoring and evaluation system at WAYS, links what WAYS is doing to an organisation-wide program logic model, and offers suggestions for improving the existing system.

3   WAYS monitoring and evaluation system

This section provides a brief discussion of the methods used to develop the monitoring and evaluation framework and the results of the consultation with staff about the existing monitoring and evaluation system at WAYS.

3.1   Method

As stated in the introduction, a participatory process was used to inform the monitoring and evaluation framework that is presented later in this section. While actual methods can vary, a number of principles of genuine participatory research have been identified by Patton (2002). These include:

- Involving participants in learning inquiry logic and skills;

- Participants owning the research – participation is real, not token;

- Participants work as a group, the researcher supports group cohesion and functioning;

- All aspects of the research are conducted in ways that are meaningful and understood by the participants;

- The researcher acts as a facilitator, collaborator and resource; participants are co-equal;

- The researcher recognises and values the views and skills of the participants and works to help participants recognise their own and each other's expertise; and

- Status and power differences between researcher and participants are minimised.

Participatory approaches break away from the tradition of 'experts' conducting research *on* people and increase the use of findings by participants, mobilise social action and ground the data in participants' perspectives. Based on this approach, WAYS staff members were consulted throughout the development of the monitoring and evaluation framework. The steps undertaken to develop the framework were as follows:

1. Interviews with 12 program managers and staff (Oct-Nov, 2007) to ascertain current status of monitoring and evaluation (see instrument: Appendix A)

2. Drafting of a program logic model (Dec 2007)

3. Workshop with all staff to refine the logic model, identify performance indicators and consider future research (Jan 2007)

4. Meetings with Business Manager and General Manager- Programmes to refine the performance indicators (Feb 2007)

5. Consultation by Business Manager with Program Managers to identify how data would be collected (Mar 2007).

The following section presents the results from the interviews with staff in October and November, 2007.

3.2   Staff experiences of the existing system

Staff reported that, as WAYS has evolved over time, monitoring and evaluation methods have developed as requested by various funding bodies. In this way, data collection is imposed on staff by the funding body; little of the data that is collected is internally driven, with the exception of monthly management reports, advocacy, information and referral sheets, and the WAYS intake form. Much of the data that is collection is paper-based and the hard copy of documents is kept in files; other data is stored via a variety of computer programs such as Excel and other systems, some of which are mandated by government departments such as the Department of Education, Employment and Workplace Relations. Measuring the outcomes of each of the programs is the responsibility of the manager of each program.

What is working well?

Most of the staff who were consulted for this report were unsure about what works in the current system of monitoring and evaluation. They reported that the system works to the extent that they are able to gather the information that is required by funding bodies for reporting purposes. Some staff reported that monthly reporting forms were useful to keep track of the work that they have been doing. From these reports, some staff and particularly the CEO, are able to identify trends that are being experienced by the programs. Others reported that the knowledge tests used by some programs are useful to gather information and to engage young people in a discussion of issues. Simple outcome measures, such as the number of young people who attended an event or the number of health packs handed out, are useful because they are easy to collect and to analyse. One program reported that the quarterly client satisfaction survey is useful to get a sense of how the program is going.

Two programs reported that debriefing after events contributed to organisational learning because it helped them to identify the aspects of a program that worked in some cases but not in others. Informal conversations with young people are used in other programs to assess whether the program is meeting the needs of the young people who are involved. This type of feedback has been found to be useful for recreational programs and for programs that have particular issues with confidentiality.

Improvements needed

A number of improvements were suggested by the staff who were consulted. All staff reported that the measurement of program outcomes is confined to what is required by funding bodies; data collected outside of those requirements is purely anecdotal in nature. They reported that funding bodies tend to require simple quantitative measures based on the service contract, and indicators such as the number of people served or the number of programs that were run. Because most of WAYS monitoring and evaluation systems were built around the requirements of funding bodies, there has been little capacity to draw aggregated conclusions about the effectiveness of programs or to determine whether WAYS operates as a one stop shop for youth. Some instruments, such as the monthly management report, are not always accurate because they do not reflect the reality that some programs are affected by school terms. The current data collection system does not pick up information about cross referrals.

Some of the existing instruments were considered to be problematic. They reported that not all staff use the generic intake sheet because it is not considered relevant for their specific programs: for example, workers implementing shorter-term interventions have little

motivation to fill out the form because it takes proportionally more time away from program activities than for longer-term interventions. Staff who work on specialised programs reported that the intake sheet does not provide them with enough information. Because of this, they have developed forms that suit the needs of their programs. A number of interviewees also expressed confusion about the use of the *Advocacy, Information and Referral Form*: some use it only when referring youth to other services; others use it to record when they give out information or when they refer people to other services.

Analysis is a particularly difficult problem across the organisation. As much of the information that is useful to WAYS at the organisational level is collected on paper, kept in individual client files (such as the intake form) and resources have not been dedicated to data analysis, the data is rarely analysed. In some programs, the government analyses data directly from its own databases. While these databases have the capability to be used for WAYS, they are not currently used for the purpose of informing program development at the organisational level. A further problem with analysis is that the responsibility of doing the analysis lies with program managers, who have little time to analyse data that is not required by funding bodies. Some of the staff stated that they are required to collect information and analyse it, but that their analysis is hampered because they have minimal research skills. These individuals found the task frustrating, inaccurate, and time consuming.

Finally, some staff reported that there is no feedback loop built into the current system so, while staff report on their activities to the management, they do not know what happens to the information once it is reported.

Practical issues

A number of practical issues to developing an organisational-wide monitoring and evaluation system arose in discussions with staff. The primary issue is that they have few resources to devote towards additional monitoring and evaluation activities. Staff asserted that it is crucial that more resources be devoted to monitoring systems for them to be effective. A few staff members noted that, while the organisation can put more instruments in place, without extra resources there is a risk that the data collected will be of poor quality. Managers stated that they would eventually like to set up a database which would allow easy data collection across the entirety of the organisation, but they thought that it will be a while longer until the organisation can afford such a system.

In terms of linking data across the programs, some staff raised concerns about ethical issues about the availability of the data that is collected from clients. They pointed out that any system of data collection would need to have extra protections for clients in programs that deal with particularly sensitive and personal issues.

Measures

A great deal of data is currently collected across the organisation. The following summary is not a comprehensive audit, but it does provide an overview of the main methods of data collection that are used across the organisation.

Client satisfaction survey

A number of different client satisfaction surveys are conducted across various programs (including the Youth Centre, Schools Program, Urban Arts Base, and counselling). A client satisfaction survey was also implemented across the organisation.

Monthly management reports and meetings

All monthly management reports include updates of organisational financial position, tenders submitted and received, fundraising activities and updates of programs as reported by the program managers. Monthly management reports include data regarding:

1. Service delivery: This includes the monthly and yearly target output measures against the actual numbers that the program achieved. The output measures vary depending on the program but can include number of attendees, number of activities, number of schools visited, or the number of surveys completed.
2. Participation and partnership: The number of interagency meetings that were attended and the extent to which youth participated in program planning.
3. Financial sustainability: Efforts made to generate sufficient funding to support organisational objectives, operations, and anticipated growth.
4. Advocacy: The number of activities staff undertook with peak bodies and contact with politicians, government departments, and the media.
5. Workforce development: The number and type of activities courses and other training activities run by WAYS to promote the ability of staff to meet the organisation's vision and mission.

Intake form

The intake form was recently simplified so it could be used across the organisation. It enables basic information to be collected about new clients, including the client's date of birth, gender, address, education, employment status, ethnicity, language, benefits, living situation, legal situation, and interests. The form also includes an item for identifying the site of service delivery. Some programs have developed more specialised assessment forms because the simplified form is not detailed enough to meet their needs.

Advocacy, referral and information

This form aims to collect information about instances in which staff referred clients to other services or took a referral over the phone. It requests information on the date, client's sex, age, which staff member made the referral, where the person was referred to, and which target group to which the individual identifies.

Pre-post knowledge test

A knowledge test is used as a part of the education process in Safe Summer Survival and the Schools Program. The knowledge test used by Safe Summer Survival is in a True/False format and has 15 questions. The Schools Program measures an increase in knowledge (questions two and three) as part of the overall workshop evaluation.

Behaviour survey

Behaviour surveys are used by the Schools program and SSS to get an understanding of the drug, alcohol and sexual behaviour and knowledge of youth contacted prior to the intervention.

Debrief/ informal feedback from clients

Feedback is collected across the organisation from clients informally or through debrief sessions. At Urban Arts Base, for example, debrief techniques are used at the beginning and end of sessions to explore how clients are feeling and their experiences of the session.

Staff log

Logs are kept by some programs to record the impressions of staff about their impression of how activities were run. Logs record the date/time of an event, the venue, the number of people contacted, the number of resources handed out/collected and the impressions of the peer educators/trainers.

This section has provided an overview of the information that is collected in WAYS current monitoring and evaluation system. The next section discusses the logic model that was developed following the interviews with WAYS staff.

3.3   Logic model for WAYS

Results from interviews with the staff informed the initial development of a program logic model for WAYS (see Appendix B for the condensed version and Appendix C for the full version). As stated previously, logic models involve identifying the program elements and then articulating how these elements relate to each other. Specifically, logic models identify the:

- Inputs: including the human, organisational, and community resources invested in a program so it can perform its planned activities;

- Activities: what the program does with the inputs, including the processes, events and actions;

- Outputs: the direct products of program activities, such as the volume of the work accomplished, the number of people reached; and

- Outcomes: the benefits or changes in the target population; they may be linked to show outcomes over a longer period of time.

Logic models are used to identify the intended relationships between resources, activities, outputs and outcomes and to measure the occurrence of each element (Savaya and Waysman, 2005). The elements of this model can be compared to data to determine whether what happens in practice is comparable to the intentions of the program.

The initial program logic was presented to staff for discussion in a half-day workshop on 22 January 2008 (see Appendix D for the meeting agenda). The discussion allowed staff to identify gaps and inaccuracies in the program logic and staff comments fed into a revised program logic model, which is presented in Table 2. Logic models can be very complex. A simple logic model was developed so that it would be easy to understand and to use.

Table 2: WAYS program logic

Inputs →	Activities →	Outputs →	Short term Outcomes →	Long Term Outcomes
Money Staff Volunteers Pro bono work Infrastructure Community resources	Recreation Education (resource development, education) Employment (training, job & educational placement) Support services (Counselling, accommodation, referral, resources, client advocacy) Outreach Organisational development (Funding, promotion, Workforce development, monitoring & research, evaluation)	Number of meetings Number and type of clients served by age, gender, ethnicity, problem, SES, activity Number of activities by type, duration, location Number of referrals Number of promotional activities Funding submissions Staff training, policies	↑ Knowledge ↑ Employment skills ↑ Job/ educational placement ↑ Access to accommodation ↑ connection with services ↑ Personal supports ↑ Well-being/ resilience ↑ Funding ↑ Staff retention & capacity	↓ Sexual health problems ↓ Mental health problems ↓ Drug harms ↓ Youth crime ↓Unemployment ↓Homelessness ↑ Secure income

3.4 Indicators

Once there was agreement on the WAYS program logic model, staff were asked to discuss and add to a draft set of indicators that would identify whether WAYS was effectively implementing each stage of the model. In a subsequent series of meetings with the Business Manager and the General Manager - Programmes, these indicators were refined. The rationale for each indicator, the person responsible for collecting each indictor, and the frequency of reporting each indicator were delineated. These are presented in columns 1-4 of Table 3.

3.5 Data collection

Having identified the program logic and the performance indicators, the method of data collection needed to be ascertained. The Business Manager worked with Program Managers to identify how the data would be collected, with consideration for the following questions:

- who will collect data? e.g. the counsellor, the educator;

- from whom/where will data be collected? e.g. all clients, all people spoken to, every second person spoken to;

- how often will data be collected? e.g. every session, daily;

- how will data be collected? e.g. self-completion questionnaire, individual interview, focus group, observation, document analysis;

- when will data be collected? e.g. at the beginning and at the end of the session, at the first session and the last session, at the first session then every three months, monthly, daily;

- what instrument will be used? e.g. intake form, client satisfaction questionnaire;

- what resources are needed to collect and record this information.

To assist this process, some relevant data collection instruments were provided for the Program Managers' consideration. These included instruments being trialled by Social Ventures Australia for use by youth organisations across Australia such as the *Self Belief Chart*, the *Life Change Assessment Tool* and the *Personal Network Map*. (*Whitelion Evaluation Manual*, 2007).

The data collection methods agreed by the Program Managers are presented in column 5 of Table 3. The details of these data collections are under consideration in each program area. This, then, represents a framework for evaluation of WAYS as an organisation. It does not preclude each program collecting specific information on their own activities. Nor is it 'set in stone'. Like any plan, it should be modified as appropriate over time. When implemented, it will allow the organisation to describe its performance as a whole, and each component will be able to better articulate how it contributes to that whole.

Table 3: What will be measured?

Inputs

Are resources adequate to implement the program?

Indicator	Will be used for….	Who responsible	How often reported	Data collection method
Level of funding per annum per program and source (cost of each activity per client/session/week/chair/etc as appropriate)	Funding applications Accountability Budgeting	All program cost centres	Annual Start and end of project/contract	Programme and project budgets Income and expenditure statements
List of funding bodies: available, applied, and successful per year	Planning Funding applications	Business Manager	Monthly	Funding application schedule Programme report schedule WAYS Contract Information
Office facilities/assets: list of equipment (fax, photocopiers, cars, computers, program materials eg music instruments) by date of purchase	Capital works planning Equipment planning	Finance Department	Annual	Asset register
Number, type and qualifications of program/support staff	Funding applications Communicating the staff profile externally Planning workforce development Annual report	Business Manager	Annual	Training and development application forms Career development plans. Employee details entered into the payroll module of attaché.
Number of formal partnerships with service providers and the contribution (descriptive) of each partnership	Promotion Funding applications	General Manager (programs)	Annual	WAYS Partnership Programmes
Staff assessment of adequacy of community resources and gaps	Advocacy (need for services) Planning (new services) Funding applications	All program managers	Quarterly	Referral and Advocacy report Monthly management reports

Number of alumni available to contribute to WAYS, skills & time available	Planning Promotion	All program managers	Annual	Client satisfaction survey Client exit interviews
Number of alumni who have contributed to WAYS, type and amount (time) of contribution	Planning Promotion	All program managers	Annual	Monthly management Annual report
WAYS program materials: list of program materials developed (e.g. pamphlets, courses, workshops); list and amount of program materials purchased (e.g. pamphlets, condoms)	Planning Promotion Funding applications	All program managers	Annual	Index of WAYS workshops and courses. Website Index of WAYS publications
Volunteers/students: number, skills (volunteers) or study program (students), number of hours/events worked, contribution (what they did)	Funding reports Funding applications Annual report	Volunteer Coordinator	Annual	WAYS Contact database(volunteers) WAYS Volunteer Contribution spreadsheet WAYS Student spreadsheet
Management Committee: Number, qualifications, level of involvement (attendance, participation in subcommittees)	Annual report Funding applications Management of board	CEO	Annual	Management Committee contact list.
Client participation in governance: number of youth representatives on the board	Funding applications Promotion Planning	CEO	Annual	Management Committee contact list.

Activities

Are the activities implemented as planned?

Indicator	Will be used for….	Who responsible	How often reported	Data collection method
Who is using WAYS? What is the background of clients?: Gender, age, ethnicity, school, postcode, presenting problem, number homeless or at risk of homelessness, student/employed/unemployed.	Planning: Is the group for whom the program is designed accessing the program? Accountability Promotion	All programs except schools-based and outreach programs	Collected at intake, reported annually	Client intake form
Client satisfaction	Planning Promotion	All programs except outreach and events	Annual	Quarterly review(UAB) WAYS Client satisfaction survey WAYS Client Exit interviews
% programs that have an annual business plan (including workforce development)	Planning Fundraising	All program managers	Annual	Annual programme planning
% annual business plans that include an evidence base	Planning Fundraising	All program managers	Annual	Annual programme planning
Unplanned activities: what are they, how many minutes did each unplanned activity take; what proportion of your working day was this?	Funding applications (full cost of service) Staff management Planning	Employment program managers	Audit: one week, twice a year	Currently no system to assess or collect data. Discussion centred on the fact that there are scheduled appointments and unscheduled activities.
Number of hours per week (% time) staff are involved in administration/compliance[9]	Planning Advocacy (for the sector)	All program managers	Audit: one week, twice a year	Currently no system to assess or collect data, and we agree that this could be the basis of the research project.
Number and list of organisations with whom WAYS staff network	To encourage networking Management tool Planning	All program managers	Monthly	Monthly Management Reports WAYS Networking Schedule

[9] consider expanding this to a research project

Number of WAYS clients who are referred to other WAYS programs [10]	Promotion (of 'one stop shop' concept) Funding applications	All program managers	Report monthly, collate annually	No existing method to collect. Requires the development of a client identifier system.
Staff satisfaction with workforce development (support, supervision, training, etc)	Planning	Business manager	Annual	Staff satisfaction survey Staff exit interview summary
Number of critical incidents reported	Planning Accountability	All program managers	Report monthly, collate annually	Critical incident form
Percentage of critical incidents appropriately managed	Planning Accountability	All program managers	Report monthly, collate annually	Critical incident form

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[10] Need client ID system to be able to more accurately track clients through the program

Outputs

How many, how much was produced?

Indicator	Will be used for….	Who responsible	How often reported	Data collection method
How many sessions/classes are conducted?	Accountability Planning	All program managers	~~Monthly~~ Quarterly	Youth Centre Activities Schedule UAB Activities Schedule EA3000 (Employment) diary PPS (PSP) diary JSA (JPET) diary Schools Programme booking schedule Funding agreements(deliverables) Monthly management reports
How many clients participate?	Accountability Planning	All program managers	Monthly	Youth Centre diary. UAB attendance records EA3000 diary, sign ups, active caseload, PSP , commencements, active caseload JPET SSA – commencements and active caseload Schools Programme Workshop reports Safe Summer Survival(health packs/surveys completed) Youth Drug and Alcohol Court-active caseload Counselling –active caseload, enrolments in parents workshops. POEM Enrolments
% of clients who have completed the program	Planning Accountability Program management Funding submissions Promotion	Program managers as appropriate eg Counselling, case management, POEM, Employment	Annual	EA3000 placements – employment and educational, exits to other programmes. PSP database – economic outcomes, exit reports. JPET SSA database –employment and educational placements, exits to other programmes. Graduation ceremonies – POEM, Youth Alcohol and Drug Court, UAB

Number and type of new resources produced by WAYS	Planning Promotion Accountability	All program managers	Annual	
Number and type of resources distributed by outreach	Promotion Accountability Planning	Manager of SSS	Annual	Outreach debriefing reports
Number of referrals to other agencies, which type	Planning Accountability Promotion Management/review	All program manager as appropriate (not outreach or schools)	Annual	Referral and advocacy report. Needs developing.
Number and type of promotional activities	Planning	All program managers	Annual	Networking Schedule WAYS Fundraising and Events planning Schedule. WAYS and MEANS
Number and type of media mentions	Promotion Funding applications Annual report	All program managers	Monthly	Press releases Management reports Requests for interviews and comments
Number and $ value of funding submissions	Annual report Planning	Business Manager	Annual	WAYS Funding Schedule
Success rate of funding submissions	Planning	Business Manager	Annual	WAYS Funding Schedule
Number and type of in-house training courses	Planning Accountability	Business Manager	Annual	
$ spent on staff training (by internal and external training). List of training topics	Planning Accountability	Business Manager	Annual	Annual Financial Statements. Training and Development applications. Business Managers monthly report
$ resources for coordinating monitoring and evaluation across WAYS	Planning Accountability	Business Manager	Annual	

Outcomes (short term)

What are the immediate impacts of WAYS activities/programs?

Indicator	Will be used for….	Who responsible	How often reported	Data collection method
What % of participants demonstrate an increase in:	Promotion Getting funding	Program Managers as appropriate	Annually	
• Knowledge		Schools program, SSS, counselling, youth centre, Satellite clinic.		Schools Programme Surveys Safe Summer Survival Knowledge surveys
• Employment skills		Employment, case-management programs		Job Search Training Module completion.
• Employment		Employment, case-management programs		Employment placement/outcomes spreadsheet. PSP placements/outcomes JPET placements/outcomes
• Participation in education or training		POEM, case-management programs, employment programs		Employment education placement/outcomes spreadsheet. PSP education placements/outcomes JPET education placements/outcomes. POEM transition plans
• Access to accommodation		Case-management programs		
• Personal supports		Case-management programs, POEM, counselling		Programme exit interviews
• Well-being/ resilience		Urban Arts Base, youth centre, counselling, case-management programs		
What % of participants demonstrate an improvement in relation to: • drug use • criminal behaviour	Promotion Getting funding	Youth Drug and Alcohol Court team Case-management programs Counselling team	Annual	Pre-post questionnaire

Level of funding received per year	Planning	Business Manager	Annual	Annual Financial Statements

As discussed in the Social Ventures Australia Future Builders Program report, (Social Ventures Australia, 2008) attributing outcomes to the program is also important. This can be done by:

- asking participants about the role the program played in changes

- use of the Most Significant Change method (Davies and Dart, 2005)

- analyses that investigate how impacts differ for program completers compared with those who do not complete the program.

It will also be informative to analyse how changes in people who participate in a single program compare with those who participate in multiple programs.

3.6 Making it happen

Agreement on a program logic model as well as deciding on the information that can be collected across the organisation represents a significant step towards creating an integrated and useful system of data collection across the organisation. However, implementing such a system requires significant change at the organisational level; this will take time and resources to implement effectively.

This project was initiated with the expectation that the organisation will devote resources towards implementing the monitoring and information system. It will be necessary for the organisation to hire a research officer to assist in the implementation of this system, as well as the data collection and analysis of information that is collected. Duties of the research officer might include:

- Assist in data collection;

- Analyse and report both qualitative and quantitative data;

- Write reports and disseminate to staff and wider community, possibly via a newsletter;

- Provide a support and training role for staff in relation to monitoring and evaluation;

- Review monitoring and evaluation processes and instruments;

- Create and maintain a feedback loop to staff.

Some other actions that could be considered as next steps are to:

- Assign responsibilities for data collection, analysis and reporting to staff members and ensure those staff have resources and skills to perform this function;

- Invest in workforce training, such as training in the use of excel and regular meetings for staff to share ideas, issues and learnings relating to monitoring and evaluation;

- Provide a feedback mechanism to staff so the benefits of collecting data are clear;

- Develop program-specific program logic models and monitoring and evaluation plans; and

- Review the organisational IT system to accommodate the monitoring and evaluation system.

In developing the methods and instruments for data collection, it is recommended that the teams that are relevant for each indicator work together. For example, if case-management programs, POEM and the counselling team are all reporting on 'personal supports', these three programs should work together to refine the indicator and discuss how they will collect data for this indicator. It is not essential (and will often not be appropriate) for each team to use the same methods and instruments. However it is important that the teams are unified in their conception of the indicator so the data they collect can be combined.

It is also recommended that WAYS makes use of the Future Builders Program being conducted by Social Ventures Australia. [11] (Social Ventures Australia, 2008) This three-year program includes an evaluation framework and evaluation tools which are being trialled in youth services across Australia and have relevance for WAYS.

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[11] Contact person: Regina Hill, Effective Consulting, reginahill@effectiveconsulting.com.au

4   Possibilities for further research

Staff did not identify any specific areas for further research that were not already incorporated into the monitoring and evaluation framework. However, there are multiple topics that WAYS may consider investigating in the future, such as

- longer term outcomes for longer-term clients

- family/community influences on client outcomes;

- youth who do not use WAYS services and their reasons for non-use;

- issues for risk groups, such as young people with a Pacific Island background and backpackers: the different drivers for problems and different sources of resilience.

- problems (e.g. stress, drug use) among affluent youth;

- prevalence and impacts of youth gambling in the community;

- the amount of time that is spent on compliance with funding; or

- young people and the police.

Building links with university-based researchers is likely to assist WAYS to pursue further research. Schemes that fund such research include:

- government funding programs: National Health and Medical Research Council, Australian Research Council

- One-off government research funding programs on particular topics, such as the recent funding of dual diagnosis research for NGOs

- Government departments can be approached about specific research projects that align with their portfolio

- Non-government philanthropic sources e.g. Foundations for Children

- Businesses.

Appendix A: WAYS interview schedule

Interviewee Name

Program:

WAYS Youth Services offers a range of services across a number of areas in order to act as a one stop shop for youth and their families. Funding is received from a range of grants as well as through fundraising. The aim of this project is to:

- Design a monitoring system that collects information efficiently across the programs
- Linking information about clients across the services
- Developing a more cohesive system of data collection that it is linked with program logic
- Making better use of the data that is collected
- Collect information that can assist in program development and funding
- Increase participation in research projects to enhance the reputation of WAYS

This research, then, has two aims:

1. Improve the monitoring and evaluation systems
2. Identify and prioritise a future research project for the organisation

Introduction

What is the target population for your program?

What are the needs of this population?

Inputs:

How is your program funded?

How many staff members do you have?

Volunteers?

Are there any other inputs into your program that are necessary to preform the activities?

Activities:

What do your staff do/what activities are run through your organisation?

Outputs:

What are the products of these activities? (the volume of work, the number of people reached)

Outcomes:

What are the intended outcomes of your program?

Short term

Medium term

Long term

How do you know you are achieving these outcomes? What evidence do you have/literature do you refer to?

Are there other outcomes apart from the primary outcomes that are happening because of this program but are not measured? (things that we could explore in future research)

Current evaluation practices:

What data do you currently collect?

How do you collect it? (database? Paper files?)

How do you store the data?

Is it analysed?

Do you have any system in place for measuring the outcomes of your program?

What information is required for reporting purposes? Who requires this information?

What works about your current data collection practices? What doesn't work?

Are there any practical issues about the data that is collected (such as confidentiality, time, software expertise)?

What sort of resources do you have for data collection? Are you prepared to commit resources to collect data? (i.e. extra resources)

Any other comments on how you think data should be collected in your program and organisation-wide?

Appendix B: Initial program logic (condensed)

Program Logic	Description	WAYS Youth Service
1. Target population	Who does the program aim to serve?	Young people aged 9-25 living in the inner city and eastern suburbs
2. Issues	What issues are faced by this population?	At risk from getting involved with alcohol, drugs, gambling or crime, bullying, STIs and sexual health, Disconnection from mainstream services, Welfare dependency, Homelessness/lack of accommodation, Access to positive adult role models, Mental health issues, Family conflict
3. Inputs	What inputs are necessary to perform activities?	Funding: Local government: Randwick, Waverley, and Woollahra Councils (yearly applications). Waverley partially funds the CEO position; State government: DOCS, Juvenile Justice and the Department of Health grants; Federal government: Grants received from DEST and DEWR; Private: grants received from various foundations and trusts; Other donations: received from local hotels, Bondi night markets, fundraising

Staff: 35 full time, 15 casuals; Volunteers: 40

Other: Waverley Council owns youth centre building; Woollahra Council rents out the Double Bay property for reduced amount; Bondi Junction office rented at $1 per year; Pro bono legal services and printing; Contractors: provide all IT services; Computers are rented as are the other office locations |
| 4. Activities | What activities are performed? | **Youth Centre**: music programs, educational programs, after school care, holiday care, case management
Employment services: Foster skills needed for employment. Also help youth who have multiple barriers to employment
Schools program: Provides drug and alcohol workshops in schools
Safe Summer Survival: Outreach done in inner city and eastern suburbs
Urban Arts Base: Provides art therapy to youth with mental health issues
Counselling: Aims to give kids the skills to deal with life issues such as bullying, gambling, family environment
POEM (alternative school) for those who are not or cannot be involved in mainstream education
Youth drug and alcohol court program
Sexual health clinic: run as a partnership with the Sydney Sexual Health clinic
Case management program: to link up youth with other services
Parents groups: increase knowledge among parents about practical parenting skills
Accommodation: to prevent youth from becoming homeless and entering into the juvenile justice system |
5. Outputs	What are the results of these activities?	1000 youth contacted each week; a one stop shop for youth needs
6. Short term outcomes	What are the short term impacts?	Employment skills, employment, reduce anti-social behaviour, increase coping skills and confidence, prevent homelessness, link up with services, safe behaviours and choices
7. Medium to long term outcomes	What are the longer term impacts?	Sustainable employment, divert from criminal behaviour, connection with community, educational attainment, minimise dependence on government

Appendix C: Initial program logic (full version)

	Overall WAYS organisation	Safe Summer Survival	Youth Centre	POEM	Schools Program	Urban Art Base	Counselling	Employment	Satellite	Youth Drug and Alcohol Court
Target Population	Young people aged 9-25 living in the inner city and eastern suburbs	Young people between the ages of 13 and 25.	9-19 year olds (although 13-15 year olds are the main group served by the youth centre).	Young people from the eastern suburbs who are no longer accepted in mainstream education	Target high schools, secondary schools, parents	Youth between the ages of 15 and 25 who have mental health issues.	Youth 11-24 and their families	Job Network: Any youth age 15-25 **JPET:** Youth aged 15-21 who are homeless, at risk of becoming homeless **PSP:** Youth aged 15-24 who have disabilities or mental health issues **ESP:** Youth aged 15-18 who have been in contact with the Juvenile Justice System	Young people up to the age of 25	NA
Needs	At risk behaviour involving alcohol, drugs, gambling or crime, bullying, STIs and sexual health. Disconnection from mainstream services, Welfare dependency, Homelessness/lack of accommodation, Access to positive adult role models, Mental health issues, Family conflict	Lack of knowledge surrounding safe sex, drugs, and alcohol; Lack of knowledge of services; Lack of engagement of young people; Impaired judgment due to substance abuse; Harm minimisation	This group is at risk of getting in trouble with the law (though graffiti, alcohol and drugs).	Complex needs Marginalised from services	Lack knowledge about making good life choices	Relapse prevention; Suicide prevention; Increase socialisation and connection with the community; Problem solving skills	Lack information about drugs and alcohol, relationships, and gambling; family conflict; mental health problems	Unemployment Homelessness Criminal and anti-social behaviour Limited skills Multiple barriers to employment	Lack information about sexual health; need access to confidential services	NA

	Overall WAYS organisation	Safe Summer Survival	Youth Centre	POEM	Schools Program	Urban Art Base	Counselling	Employment	Satellite	Youth Drug and Alcohol Court
Funding	Local government: Randwick, Waverley, and Woollahra Councils (yearly applications). Waverley partially funds the CEO position; State government: DOCS, Juvenile Justice and the Department of Health grants; Federal government: Grants received from DEST and DEWR; Private: grants received from various foundations and trusts; Other donations: received from local hotels, Bondi night markets, fundraising	The program receives the majority of its funding through the NSW Department of Health (particularly the HARP program). This money provides for the cost of trainings, staff, and some outreach. Money is also received from local councils,	DOCS and NSW Health the two staff positions; NSW Ministry of the Arts (though Indent) also funds music specific programs; Council; Fundraising and support from local businesses	50% funded by DEST; is a partnership with Salvation Army/Oasis Youth Support Network	Primarily fee for service from high schools.	The program receives no government funding outside of a $5000 grant received from the local council. Annual applications are made to independent foundations and charities.	Alcohol and other drug counselling is funded by Department of Health; Gambling program is funded by the Department of Gaming and Racing; Adolescent & Family counselling is funded by DOCS.	Job Network: DEWR; 3 year contract; yearly reviews JPET: DEWR; Quarterly funding; 120 youth/year PSP: DEWR; 3 year contract; yearly reviews; Up to 100 youth served/year ESP: Juvenile Justice; Quarterly funding; 40/year; 3 month program	NSW Health; Partnership with Sydney Sexual Health Clinic	DoCS
Staff	35 full time, 15 casuals	Coordinator works two days per week; 7-13 peer educators employed on a casual basis.	3 full time staff and a few casuals	2 staff	1 full time Casual Facilitators	Two staff, both part time	3 staff	Maroubra: 5 full time staff Redfern: 6 full time staff Bondi Junction: 8 full time staff	NA	2 staff
Volunteers	Volunteers: 40	2-3 volunteer peer educators	Volunteers are only used for short term, event based purposes, such as music events	A few regular volunteers		They have some students during the semesters come from UWS, Sydney University and the Australian College of Applied Psychology.	None	None	None	NA

	Overall WAYS organisation	Safe Summer Survival	Youth Centre	POEM	Schools Program	Urban Art Base	Counselling	Employment	Satellite	Youth Drug and Alcohol Court
Other inputs	Waverley Council owns youth centre building at Bondi Beach; Woollahra Council rents WAYS the Double Bay property for reduced rental ; Bondi Junction and office rented from the Waverley Council; Maroubra and Redfern offices are rented for market rental. Some pro bono legal services and printing; Contractors: provide all IT services; Computers are rented as are the other office locations	Condoms that are handed out at outreach events are donated by a local condom testing facility; WAYS vans used for outreach	The building is owned by the Waverley Council; Vans for outreach; Donated food for activities; The kids who participate in the programs provide some funding	Database for DEST		POW Partnership, steering committee, subcommittee	None	Some contractors used for compliance purposes	SSHC	NA

	Overall WAYS organisation	Safe Summer Survival	Youth Centre	POEM	Schools Program	Urban Art Base	Counselling	Employment	Satellite	Youth Drug and Alcohol Court
Activities/outputs	Contact 1000 youth/week through: Youth Centre Employment services Schools program Outreach services Safe Summer Survival/Peer education Urban Arts Base/art therapy for MH Counselling POEM (alternative school) Youth drug and alcohol court program: Satellite Sexual Health clinic Case management program Parents groups Accommodation information and referral	Outreach done at various beaches, events that attract youth, and in other locations that youth hang out. They hand out health packs (contain resource information for young people), Not So Fun packs (contain information about drugs), condoms, and lollipops. They have also received funding to do outreach at pubs and clubs in an attempt to get information about safe sex out to heterosexuals, who are believed to be more at risk from unsafe sexual activity than homosexuals. This program will also be targeting backpackers. This past year, 5600 young people were contacted by safe summer survival activities. They collected 712 outreach surveys.	Drop in from 3:30-9pm (16-17 kids per day) Out of school hours care (30 kids /week) Courses (10 people max per class. Classes per year?) Music lessons provided two times per week (6 people per class) Basketball run twice a week Indoor (10 kids), Outdoor (20 kids) Ten music events held per year (Pavilion (300 kids), Home nightclub (1100), Outdoor festival (about 2000)) Outreach is run from Coogee to Dover Heights Holidays program (About 20 kids per trip) Case management(about 12-13 youth this year)	This alternative school assists young people who can no longer participate in mainstream education. Ideal target is 15 graduating youth per year; 8 graduated last year	Provides education about drugs, alcohol and sexual health to young people in school setting. 5000 from 20 schools were contacted last year	UAB runs three general program groups per week during which the youth participate in art activities. Outreach to other health and youth organisations is also undertaken. An estimated 100 youth per year are served by these programs.	Health counselling: runs programs that focus on drugs and alcohol (longer term as well as crisis sessions two hours per week). Also run parents groups, schools programs, and information sessions for parents. Terri: about 40 clients per year; Warren: about 50 clients per year; Madeline: about 15 clients per year. Two parents groups are run per year, serving about 25 people in total; Five parents evenings are run per year, serving about 200 people in total.	Job network: Place youth into jobs. Assist with interview skills, job searching, some help with other issues is provided. 300/yr JPET: Youth who are homeless or who are at risk of becoming homeless, program length 6 months. 120/yr; 185/yr served PSP: Youth do not have to look for work over a two year period and can still receive Centrelink payments. 100/yr ESP: Client in this program have been involved in the Juvenile Justice system and are required to see their Juvenile Justice officer if enrolled. 120/yr	NA	Case management and brokerage services for YDAC participants

	Overall WAYS organisation	Safe Summer Survival	Youth Centre	POEM	Schools Program	Urban Art Base	Counselling	Employment	Satellite	Youth Drug and Alcohol Court
Short term outcomes	Employment skills, employment, reduce anti-social behaviour, increase coping skills and confidence, prevent homelessness, link up with services, safe behaviours and choices; act as a one stop shop for youth	Educate youth about services that are available to assist them; Educate youth about safe sex, drugs, and alcohol	The short term aim is to divert youth from criminal activities and to get them linked up with other services and support	Give them skills and finish degree; connect with service and re-engage with the community.	The contact made with youth across the programs will make youth more likely to seek out services and to re-engage with the community. This program allows young people to have a positive interaction with professionals who are not teachers or parents; this knowledge will make them more comfortable and likely to access services when it is needed.	Increased confidence Artistic skills Socialisation Relaxation	Give youth control over their issues Reduce symptoms Minimise harm Education	That youth stay involved in education or employment That they stay out of trouble Gain and maintain accommodation Rehabilitation Build skills needed for employment	Educate youth Make good life choices Reduce sexual health problems	NA
Long term outcomes	Sustainable employment, divert from criminal behaviour, connection with community, educational attainment, minimise dependence on goverment	That the education helped individuals to make good choices around sex, drugs and alcohol	Setting the youth up to make the right choices, such as getting and maintaining a job, staying in school, and to assist in developing coping skills.	The longer term aim is that youth do not need services or if they do, that they are properly connected up to services. Increase employment opportunities and coping skills	Stay connected with services or no need for services at all	Increased participation in social and employment opportunities; More general recovery: managing mental illness and other problems, taking medication	Minimise harm, increase insight, increase capacity to manage issues that arise	Foster sustainable employment Minimise dependency on Centrelink throughout life.	NA	NA

Appendix D: Agenda for WAYS Workshop

WAYS Workshop
Tuesday, 22 January
9:00-12:30

The aim of the workshop is to discuss and amend the draft monitoring and framework.
Provide introduction to the day by outlining what we will cover.

1. Why evaluate and disseminate? Include how and talk about MSC technique in context of the fieldwork (Shannon)

2. Explain program logic and why it is important to evaluation (Cate)
   Overview of research methods:
   a. qualitative and quantitative
   b. routine and one-off methods
   c. monitoring (identifying need, accountability) and evaluation
   d. action research
   e. Most Significant Change

3. Present and discuss WAYS program logic

4. Break into small groups based on activity groupings (Organisational level, Recreation, Education, Training and employment, Support Services). First give an example, then discuss in groups where their programs fit into the program logic. Discuss any gaps or things to add in the large group.

Morning Tea.

5. In small groups, discuss instruments that are currently used to monitor and evaluate practices.
   - Are there any overlaps between what you collect?
   - What is or is not useful about the data you collect?
   - How do you use the data that is collected?
   - Discuss how information is analysed.
   - How can the measurements be improved?

6. In small groups, review other measurements that may be useful in the context of various programs

7. Discuss barriers to collecting, analysing and reporting data. What do you think would help to overcome these barriers?

8. What workforce development is needed to implement the evaluation plan?
   - Training eg Excel
   - Evaluation responsibilities and resources
   - Performance indicators
   - Discussion paper/newsletter
   - Staff meetings and presentations

- Create and maintain a feedback loop
- Research officer: analyse and report data (qual and quant); support/training role for staff; review instruments

9. Future research: ideas for grants? (Long term outcomes of programs)

10. Wrap up: Karen and Suzy

Appendix E: What will be measured

Data collection plan for _____

Instructions:

1. Identify the indicators for which you are responsible

2. Copy and paste these indicators on to a separate sheet and make each indicator a heading

3. Under each indicator, provide details of data collection method. Identify:

- who will collect data? eg the counsellor, the educator

- from whom/where will data be collected? eg all clients, all people spoken to, every second person spoken to

- how often will data be collected? eg every session, daily

- how will data be collected? eg self-completion questionnaire, individual interview, focus group, observation, document analysis

- when will data be collected? eg at the beginning and at the end of the session, at the first session and the last session, at the first session then every 3 months, monthly, daily

- what instrument will you use? eg intake form, client satisfaction questionnaire

- what additional resources (if any) you need to collect and record this information

4. Summarise the method in the last column of the table (one sentence) (below) eg 3-item test of knowledge at beginning and end of each lesson

5. Provide a copy of the instrument. If the items pertaining to the indicator are just a subset of an instrument, indicate which items are relevant to this indicator

Inputs

Are resources adequate to implement the program?

Collected already:

Indicator	Will be used for….	Who responsible	How often reported	Data collection method
Level of funding per annum per program and source (cost of each activity per client/session/week/chair/etc as appropriate)	Funding applications Accountability Budgeting	All program cost centres	Annual Start and end of project/contract	
List of funding bodies: available, applied, and successful per year	Planning Funding applications	Business Manager	Monthly	
Office facilities/assets: list of equipment (fax, photocopiers, cars, computers, program materials eg music instruments) by date of purchase	Capital works planning Equipment planning	Finance Department	Annual	
Number, type and qualifications of program/support staff	Funding applications Communicating the staff profile externally Planning workforce development Annual report	Business Manager	Annual	

Number of formal partnerships with service providers and the contribution (descriptive) of each partnership	Promotion Funding applications	General Manager (programs)	Annual	
Staff assessment of adequacy of community resources and gaps	Advocacy (need for services) Planning (new services) Funding applications	All program managers	Quarterly	
Number of alumni available to contribute to WAYS, skills and time available	Planning Promotion	All program managers	Annual	
Number of alumni who have contributed to WAYS, type and amount (time) of contribution	Planning Promotion	All program managers	Annual	
WAYS program materials: list of program materials developed (e.g. pamphlets, courses, workshops); list and amount of program materials purchased (e.g. pamphlets, condoms)	Planning Promotion Funding applications	All program managers	Annual	
Volunteers/students: number, skills (volunteers) or study program (students), number of hours/events worked, contribution (what they did)	Funding reports Funding applications Annual report	Volunteer Coordinator	Annual	

Board members: Number, qualifications, level of involvement (attendance, participation in subcommittees)	Annual report Funding applications Management of board	CEO	Annual	
Client participation in governance: number of youth representatives on the board	Funding applications Promotion Planning	CEO	Annual	

Activities

Are the activities implemented as planned?

Indicator	Will be used for….	Who responsible	How often reported	Data collection method
Who is using WAYS? What is the background of clients?: Gender, age, ethnicity, school, postcode, presenting problem, number homeless or at risk of homelessness, student/employed/unemployed.	Planning: Is the group for whom the program is designed accessing the program? Accountability Promotion	All programs except schools-based and outreach programs	Collected at intake, reported annually	
Client satisfaction	Planning Promotion	All programs except outreach and events	Annual	
% programs that have an annual business plan (including workforce development)	Planning Fundraising	All program managers	Annual	
% annual business plans that include an evidence base	Planning Fundraising	All program managers	Annual	
Unplanned activities: what are they, how many minutes did each unplanned activity take; what proportion of your working day was this?	Funding applications (full cost of service) Staff management Planning	Employment program managers	Audit: one week, twice a year	
Number of hours per week (% time) staff are involved in administration/compliance[12]	Planning Advocacy (for the sector)	All program managers	Audit: one week, twice a year	

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[12] consider expanding this to a research project

Number and list of organisations with whom WAYS staff network	To encourage networking Management tool Planning	All program managers	Monthly	
Number of WAYS clients who are referred to other WAYS programs [13]	Promotion (of 'one stop shop' concept) Funding applications	All program managers	Report monthly, collate annually	
Staff satisfaction with workforce development (support, supervision, training, etc)	Planning	Business manager	Annual	

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[13] Need client ID system to be able to more accurately track clients through the program

Outputs

How many, how much was produced?

Indicator	Will be used for….	Who responsible	How often reported	Data collection method
How many sessions/classes are conducted?	Accountability Planning	All program managers	Monthly	
How many clients participate?	Accountability Planning	All program managers	Monthly	
% of clients who have completed the program	Planning Accountability Program management Funding submissions Promotion	Program managers as appropriate eg Counselling, case management, POEM, Employment	Annual	
Number and type of new resources produced by WAYS	Planning Promotion Accountability	All program managers	Annual	
Number and type of resources distributed by outreach	Promotion Accountability Planning	Manager of SSS	Annual	
Number of referrals to other agencies, which type	Planning Accountability Promotion Management/review	All program manager as appropriate (not outreach or schools)	Annual	
Number and type of promotional activities	Planning	All program managers	Annual	
Number and type of media mentions	Promotion Funding applications Annual report	All program managers	Monthly	

Number and $ value of funding submissions	Annual report Planning	Business Manager	Annual	
Success rate of funding submissions	Planning	Business Manager	Annual	
Number and type of in-house training courses	Planning Accountability	Business Manager	Annual	
$ spent on staff training (by internal and external training). List of training topics	Planning Accountability	Business Manager	Annual	
$ resources for coordinating monitoring and evaluation across WAYS	Planning Accountability	Business Manager	Annual	

Outcomes (short term)

What are the immediate impacts of WAYS activities/programs?

Indicator	Will be used for….	Who responsible	How often reported	Data collection method
What % of participants demonstrate an increase in:	Promotion Getting funding	Program Managers as appropriate	Annually	
Knowledge		Schools program, SSS, counseling, youth centre, Satellite		
Employment skills		Employment, case-management programs		
Employment		Employment, case-management programs		
Participation in education or training		POEM, case-management programs, employment programs		
Access to accommodation		Case-management programs		
Personal supports		Case-management programs, POEM, counseling		
Well-being/ resilience		Urban Arts Base, youth centre, counseling, case-management programs		
Level of funding received per year?	Planning	Business Manager	Annual	

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