Nurturing Neighbourhoods:
Parent Outreach Worker Program
Guelph, Ontario

Evaluation Report: November 2014

Robert Case & Sarah Haanstra

For

Guelph Community Health Centre,
Wellington-Dufferin-Guelph Public Health,
Family & Children's Services of Guelph and Wellington County,
and all program partners and stakeholders
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This evaluation was also supported by Renison University College, both with the time committed to it by Dr. Robert Case and with a Renison Research Grant that subsidized associated costs.

We thank the Parent Outreach Workers for your role in providing feedback and input into the research plan, recruiting and coordinating the logistics associated with interviewing participants, reviewing the research tools and supporting documents, and making yourselves available to provide parent participants with the supports they needed to feel safe and comfortable participating in this research. Beyond that, we thank you for your genuine commitment to the people you work with and the communities you work in. You are really making a meaningful difference in people’s lives.

We thank the Community Resource People and Service Providers who were participants in this study for taking the time to speak with us and for sharing your insightful feedback about and experience with the Parent Outreach Worker Program; your stories, thoughts and ideas were an integral part of our ability to fully understand the activities and impact of this program.

Lastly and most importantly, we owe a debt of gratitude to the parents who participated in this project. Your stories tell the story of the Parent Outreach Worker Program and without your perspectives this evaluation would not have been possible. All of you are mothers; some of you are community volunteers, employees working full and part-time, students, and helpful neighbours; many of you are struggling with tough stuff in your lives and yet all of you made the time to speak with us. We thank you for your willingness to be honest, genuine and candid with us. We also acknowledge that it is because of your resilience and the choice you have made to engage with the Parent Outreach Workers on a path to make positive change in your lives that the POW program has the level of impact it does.
Executive Summary

The "Parent Outreach Worker Program" (POW program) aims to identify, reach out to, and assist families with children who may be isolated or otherwise struggling by providing them with increased access to services and support. The POW program is currently being piloted in two priority neighbourhoods of Guelph, Ontario: Brant Avenue and Two Rivers. The POW program is part of a cross-sectoral, community-based initiative grounded in the philosophies and principles related to the social determinants of health, health equity, and early help in child welfare.

This report details the findings of an evaluation that was conducted to determine whether the POW program is being delivered as planned and the extent to which it is achieving its intended outcomes. Evidence used for the evaluation included program implementation data inputted by the Parent Outreach Workers (POWs) and a series of interviews and focus groups conducted with program stakeholders including the POWs, parents who use the POW program, and a variety of associated service providers and community resource people. This evidence indicates very clearly that the Parent Outreach Worker program is achieving results.

In particular, the program implementation data show that the program is reaching its priority population, including many low-income, single-parent-headed families with young children, who may also be socially isolated. In its first full year, from April 1, 2013 to March 31, 2014, the POWs had an ongoing working relationship with 111 registered clients (families) (48 in Brant Avenue; 63 in Two Rivers), and more than 45 anonymous (non-registered) families as well.

Impact Pathways

The interviews with parents, parent outreach workers and community resource people provided information about how the POW program operates and revealed evidence of progress toward intended outcomes. "Impact pathways" were established to describe the “how” and the “what” of Parent Outreach Workers’ work with parents and children. These impact pathways are the major strategies that the POWs use in their work with families that appear to be central to achieving the intended outcomes of the program and reinforcing the program's impacts. The evaluation data uncovered three primary, interrelated themes in what POWs do that generate and reinforce their impact.

In the words of a child protection social worker:

"I think the one worker that I worked with, she’s great at building relationships, which is the foundation to be able to work with so many people. The people that I’ve connected her with have praised her and said they love her. It would be a huge detriment, especially to this one family, for us to lose that..."
1. **Build relationships**: Relationships are built and strengthened through the trust, safety and comfort parents feel when working with the POW; through the sense parents have that they are not being judged; through gentle encouragement from the POWs; by the ability of POWs to make people feel noticed; by the local nature of the outreach – that POWs are visible and perceived as accessible, and available; and through a holistic understanding of the community and the people who live there.

2. **Provide support**: Parent Outreach Workers provide emotional support as a listening ear or someone to vent to about a difficult day. They provide directed support to overcome specific barriers to well-being or to help a parent address a specific issue or need in the life of her family. Parenting support includes sharing parenting tips and strategies, acting as an entry point to parenting supports and services and supporting parents to develop skills. POWs also help parents develop other concrete skills by supporting employment, education and personal development. Lastly they support children’s healthy development by facilitating parents’ and children’s access to food, recreational activities and other services and supports, identifying and addressing program and service gaps, providing emotional support to children in need, and supporting or reinforcing positive messages parents are trying to pass on to their children.

   **In the words of a child protection social worker:**
   
   "For families [who are struggling], there is a lot of support from the Parent Outreach Worker. They bring food, take people to appointments, to the doctor, and help with medical needs. I have seen them help a client get their toddler into a program that was really needed. We can only visit our clients about once a month, so the Parent Outreach Worker is providing so much more than that. They help with the little things and more the day to day. That might not sound like a lot, but it really puts a spark of faith in the people that there is someone there to support them. It lets them know that there are other community resources for them that they can rely on."

3. **Connect parents and families to others**: POWs connect parents with services, with other parents and with their community. They do this by providing information about and helping parents to navigate the system of services and support; by creating and facilitating opportunities for parents to connect with each other and their community; and by providing support and practical assistance for parents to make necessary connections.

The three impact pathways reinforce each other and positive outcomes for parents and children come from movement along all three impact pathways together. Building relationships is at the centre of this process, as it both reinforces and is reinforced by the
other two pathways. Strong relationships are needed to support and effectively connect people; and supporting and connecting people, conversely, strengthens relationships.

Together, these three pathways have led to evidence of significant impact for the parents accessing the Parent Outreach Worker Program.

**Outcomes and Effectiveness**

The evaluation evidence shows that the POWs have been effective in creating new social ties that strengthen social capital and build informal supports around the parents who access the program. The POWs are supporting parents to engage in mutual aid with their neighbours, and awareness and use of formal supports has increased. Although early in the program's implementation, considerable evidence exists that the POW program directly provides or connects families to "early support" or to needed support in a timely manner, and that it plays a role in increasing protective factors, supporting safety planning and prevention in a child welfare context, and linking families to early assessments.

Parent Outreach Workers most certainly play a strong role in assisting families to access their basic needs, including healthy food and shelter. Early evidence also suggests that progress is being made toward the following long-term outcomes: families are empowered to meet their needs; accessibility, responsiveness, and effectiveness of formalized services is increased; and neighbourhoods are stronger, safer and more resilient. More time will need to pass and more research needs to be done to truly understand the level of impact in these last three areas.

The research literature provides additional confidence in the design and approaches of the POW program, adding weight to the findings of this evaluation. Characteristics of effective outreach programs describe a targeted, multi-service, and voluntary (not mandated) approach that, like the POW program, is grounded in the local context with activities that take place where people naturally congregate. The literature affirms the importance given by the POWs to the building of trusting relationships, the creation of "networks of supports" for families, and the provision of practical supports, as well as to the specific techniques the POWs use to find clients. Many of the characteristics, skills and activities that define the Parent Outreach Worker Program directly align with these best practices outlined in the literature.

Although calculating the cost-benefit ratio of the POW program in concrete dollars is beyond the scope of this current evaluation, cost-benefit calculations related to social determinants of health and to similar initiatives, combined with estimates of the benefits of investments in early child development, suggest that this program is a sound social investment.
Conclusions

The findings from this evaluation suggest that the Parent Outreach Worker Program is highly relevant (appropriate to the context and to demonstrated needs), effective (making progress toward the program's intended outcomes), and that it represents considerable potential for cost savings through efficiencies it generates in the formalized health and social services systems and by lessening the long-term costs of social vulnerability. Moreover, many of the benefits the POW program is generating for priority families now will have a permanent or sustained effect.

At the same time, data gathered for this evaluation leave many questions unanswered. The data provide few specifics about the quantitative impact of the program and we cannot say with certainty that it is evenly benefiting all priority families in the neighbourhoods. Even with these data limitations, nonetheless, it is clear to us that the POW program occupies an important gap that exists in marginalized communities between the formal service sector, the informal community sector, and the families most in need of support, and that it is generating very significant outcomes for priority families as direct supports and as intermediaries between those families and the community resources they need.

Recommendations

The findings and conclusions from this evaluation lead to the following recommendations:

1. Continue the POW Program with possible expansion to other target neighbourhoods in Guelph.
2. Secure new commitments of funding to ensure the sustainability of the program.
3. The importance of POW activities should continue to be recognized in program planning, job descriptions and resource allocation decision-making.
4. Recruitment and training for future POW positions should include an intentional focus on relationship-building skills, effective communication, an understanding of community processes, experience in community-based practice approaches; as well as clinical assessment, intervention skills, and familiarity with available services and supports.
5. The characteristics of the POW program's target populations should be reviewed and clearly defined in program documentation for future reference.
6. Key program stakeholders should be involved in a review of the program's outcome objectives and overall theory of change to ensure a shared vision for the program and to keep program planning, data tracking, implementation and evaluation focused on results that are accurate, relevant and shared by all.
7. Consideration should be given to promoting the program across key service agencies, with clear communication on the specific roles and functions of the program.
8. The possibility of having POWs administer child development and wellbeing screening tools should be explored as a means of extending early screening and assessment to more vulnerable children, and as a base of data for measuring program outcomes and population well-being in the target neighbourhoods.

9. Data tracking should be enhanced and further research continued to strengthen the evidence base for the ongoing and future assessment of the effectiveness of the program; including a more detailed means of tracking families.

10. Access to descriptive data on the families using the POW program should be improved to strengthen the program's claim that it is reaching priority families.

11. A survey of anonymous users of the POW program should be considered as a next step in the evaluation.

12. Continue the development of monitoring and evaluation practices, and the engagement of research partnerships for longer-term, neighbourhood-level impact studies.

13. As a step toward this longer-term program of research, protocols and agreements should be established so that relevant data already being gathered by the various service systems can be accessed and used to track outcomes at the neighbourhood-level.
1.0 Introduction

The "Parent Outreach Worker Program" (POW program) aims to identify, reach out to, and facilitate access to services and support for families with vulnerable children who may be isolated or otherwise struggling. In November 2012, one POW was assigned to each of two target neighbourhoods in Guelph, Ontario (Brant Avenue and Two Rivers). This report represents an independent evaluation of the implementation and outcomes to date of the POW Program.

1.1 Project context and rationale

The POW program is the first new program being delivered under the framework of a broader, multi-agency, cross-sectoral, neighbourhood-based early intervention and prevention initiative being called "Nurturing Neighbourhoods: A Community-Based Strategy to Support Vulnerable Children and Families."

1.1.1 Nurturing Neighbourhoods

The Nurturing Neighbourhoods Initiative (NNI) is grounded in the philosophies and principles related to the social determinants of health, health equity, and early help in child welfare. Supported by practice and academic literature from these three perspectives, Nurturing Neighbourhoods reflects the belief that building strong, healthy communities fosters resilience in children and families. This leads to better health, improved safety and security of vulnerable children, improved child development and social outcomes, and, consequently, lower overall costs to health, child protection and other social service systems.

NNI emerged in response to needs identified by service providers working in disadvantaged neighbourhoods; the findings and recommendations of a major 2013 Public Health report on health and social indicators in the Wellington-Dufferin-Guelph region (WDG Public Health, 2013); and the perspectives and priorities outlined in emerging literature on health equity and early help.

The philosophy of "early help" in child welfare services focuses on the early detection of risk and the prevention of child maltreatment by "strengthening both the individual and social factors that ameliorate the effects of adversities" (Freymond, Moore, Scott, Spencer & Buckingham-Rivard, 2012, p. 3). Like the social determinants approach to health promotion, an early help approach to child welfare calls for collaboration across sectors to address risk factors such as social isolation, poverty, parental mental and physical health, and to build protective factors around vulnerable children and their families before serious problems develop. A health equity approach, similarly, recognizes that the roots of health disparities lie in broader social and economic inequality and exclusion, and calls therefore for action to
address the social determinants affecting the most health-disadvantaged populations and to "identify opportunities for collaboration with other organizations on health equity, social justice and determinants of health" (OPHA, 2013).

In 2013, Wellington-Dufferin-Guelph Public Health (WDG Public Health) tabled a major report titled “Addressing the Social Determinants of Health in Wellington-Dufferin-Guelph: A public health perspective on local health, policy and program needs" (WDG Public Health, 2013). The report was based on an examination of a range of health and social indicators in the region and an extensive review of literature on the social determinants of health (SDOH). In it, WDG Public Health identifies several priority neighbourhoods within the City of Guelph and calls for "whole of community" approaches that address the root causes of poor health and development, whereby "action is taken collectively with concerned citizens, the private sector, business, faith communities and other service providers" (WDG Public Health, 2013, p. 100).

The Nurturing Neighbourhoods Initiative (NNI) responds to this call and takes up the priorities reflected in the philosophies of health equity and early help in at least two fundamental ways. First, NNI is by design a multi-sectoral, collaborative endeavour. NNI is collaboratively led by WDG Public Health, the Guelph Community Health Centre (GCHC), and Family & Children's Services of Guelph and Wellington County (F&CS), with some links to the Guelph Neighbourhood Support Coalition (GNSC), a city-wide neighbourhood capacity-building effort governed by a combination of professional service providers ("partners") and elected representatives of local neighbourhoods. NNI thus responds to the call for cross-sectoral collaboration in addressing the social determinants of health in priority neighbourhoods.

Second, NNI focuses on two of the priority neighbourhoods identified by local service providers and highlighted in the 2013 WDG Public Health report referred to above (WDP Public Health, 2013), and does so through plans for three foundational projects that represent different but complementary approaches to building neighbourhood-based supports around the needs of isolated or struggling families with potentially vulnerable children: (1) the development of community hubs for increased service integration and access, and increased opportunities for neighbours to bump into and get to know neighbours; (2) provision of support for community-based social innovation projects to stimulate community-led economic and social development; and (3) the implementation of a Parent Outreach Worker Program, which is the focus of this evaluation. Project documentation indicates that these project plans are based in considerable community consultation, including a systematic environmental scan and assets-mapping process, and on successful existing models of neighbourhood-level intervention.
1.1.2 The Parent Outreach Worker Program

The Parent Outreach Worker Program (POW program) is currently being piloted in two priority neighbourhoods in Guelph: Brant Avenue and Two Rivers. In the 2013 Public Health Report on the social determinants of health in Wellington, Dufferin and Guelph, both of these neighbourhoods were found to have high concentrations of low-income families, high unemployment, low levels of education, and a lack of social and community support among the families who live there, all of which are important social determinants of health (WDG Public Health, 2013).

Beginning in November 2012, one POW was assigned to each of the two target neighbourhoods with a broad mandate to "work with families who are struggling to enhance protective factors and develop optimal solutions that match their needs and unique circumstances" toward ensuring that "vulnerable children and families who are struggling get the supports and services they need early" (NNI, 2013).

Families are considered a priority for POW supports and services to the extent that they experience any combination of the following characteristics: low income; food insecurity; lack of affordable and reliable transportation; unemployment, underemployment and/or stressful, unsafe work conditions; low level of education; immigration status; lack of social and community support; lack of adequate, affordable and safe housing; and/or lack of experience or environment that fosters healthy early child development.¹

Based in the neighbourhood group offices and working in various contexts and locations in their respective neighbourhoods, POWs engage in a range of activities related to

- identifying, reaching out to and building relationships with isolated and/or struggling families with vulnerable children,
- providing families who are struggling with information on available supports, services, and community activities,
- connecting families who are isolated and/or struggling to formal services, to community-based supports and programs, and to their neighbours and other community members for informal support, and
- providing direct services and support for families' expressed needs.

1.1.3 Theory of change: Outcome objectives

Figure 1 "Theory of Change Program Logic Model" provides a visual summary of the intended activities and outcomes of the POW program, and the connections among them. The content and flow of this logic model were derived by the evaluation team from earlier

¹ These factors are derived from the social determinants of health as outlined in the 2013 WDG Public Health report on local health priorities and needs (WDG Public Health, 2013).
project development and evaluation planning documents, and refined through discussion with the POW evaluation sub-committee. The theory of change depicted in the logic model forms the basis for the outcomes-oriented elements of this evaluation.

At the simplest and most immediate level, the POW program is intended to increase awareness of community supports and services, particularly among priority families, and at the same time to generate larger and stronger networks of informal social support for those families, as well as increased integration of families with their communities (described as "increased social capital" on Figure 1).

With increased knowledge of available services, and with the referrals and additional direct support of the POWs, at the intermediate level the POW program is intended to make it easier for priority families to access and navigate their way through the services they need, and to enable increased and earlier use of the available services (including early assessment and support for children).

With increased social connectedness and inclusion of families in the neighbourhood, the POW program is intended to help to also build informal support around priority families and involve them in relationships of mutual aid where neighbours help neighbours in concrete ways. In this way, with improved engagement with both formal and informal supports, the POW program is intended to generate greater access to basic needs, among priority families, and increased effectiveness of the existing service system in relation to those families' unique needs.

Ultimately, by improving access to, use of, and effectiveness of formalized services among families who are isolated and/or struggling, by building networks of support around those families and involving them and their children more in community, and by equipping parents with the skills and social connections to better meet their families' needs, the POW program aims to build protective factors around vulnerable children in their homes and in the neighbourhood and to contribute to the building of safer, more resilient communities in which families and children are supported to experience optimal physical, social, emotional, and mental health.
Figure 1: Theory of Change Logic Model
2.0 Evaluation Background

Evaluation of the Parent Outreach Worker Program is being approached as a multi-phase, ongoing, and evolving practice designed to grow in sophistication as the program itself evolves.

The first phase of the evaluation process involves consolidating basic program tracking data and gathering qualitative data from service users and other program stakeholders at the end of the first year of the program. The objectives of this phase of evaluation are (1) to use the data available or easily acquired to assess program implementation and impact to date, (2) to examine the relevance and accuracy of the theory of change articulated in the program logic model (Figure 1), and (3) to assess current data gathering tools and to identify gaps in the data and other needs for improving evaluation practice over time.

Latter phases of the evaluation plan are designed to bring in additional data that either were not available during the timeline of the first phase, or which are more pertinent to longer-term evaluation than to more immediate needs of program planning and development.

This report is a summary of findings of the first phase of evaluation of the Parent Outreach Worker Program.

2.1 Evaluation Purpose

The purpose of this evaluation is to provide program managers, partners, staff and other stakeholders with the information they need, about the effectiveness and functioning of the Parent Outreach Worker Program, to strengthen the program's efficiency and impact and to make decisions regarding its development, implementation and funding.

2.2 Evaluation Questions

The research questions driving the evaluation reflect a dual focus on process (or "implementation") and outcomes (or "results") evaluation:

*Process evaluation questions:*
  - Is the program being delivered as planned?
    - What services and supports are being provided to families who are struggling?
    - Is the program reaching families that are in need?
    - Are families (clients) satisfied with services provided by POWs? Do they find the services useful?
    - What factors or dynamics facilitate or inhibit the efficient delivery of the program?
Outcome evaluation questions:

- Is the Parent Outreach Worker Program achieving its intended outcomes?
  - What evidence is there of progress toward each of the desired short-term, intermediate and long-term outcomes of the program
  - What factors or dynamics facilitate or inhibit the achievement of outcomes?
  - Are there any unintended outcomes (positive or negative) being achieved?

2.3 Methodology

2.3.1 Evaluation Team

The evaluation was led by Dr. Robert Case, Assistant Professor (Social Development Studies) at Renison University College, Waterloo, in collaboration with Sarah Haanstra, an independent consultant working for Wellington, Dufferin Guelph Public Health, and with the assistance of Cindy Luu and Kathy Kaye. The evaluation was guided and supported by a subcommittee of the Nurturing Neighbourhoods Initiative made up of representatives from the Guelph Community Health Centre (GCHC), Public Health of Wellington, Dufferin, and Guelph (Public Health), and Family & Children's Services of Guelph and Wellington County (F&CS). Financial support for the evaluation was provided by F&CS, GCHC and Renison University College. Personnel support for the evaluation was provided by Renison University College, Public Health, and GCHC.

2.3.2 Data Gathering

Data used in this first phase of the Parent Outreach Worker Program Evaluation are derived (1) from program tracking data inputted by the POWs into a central database of the Guelph Community Health Centre ("Nightingale on Demand") or recorded and stored separately by the POWs, and (2) from a series of interviews and focus groups conducted with program stakeholders including the POWs themselves, parents who use the POW program, and a variety of associated service providers and community resource people.

Table 1 summarizes the stakeholders involved in the qualitative methods. In total, the research team interviewed 14 parents who use the POW Program (half of them from Brant Avenue Neighbourhood and half from Two Rivers), the two Parent Outreach Workers, three front-line child protection social workers from Family & Children's Services of Guelph and Wellington County (F&CS), and four community resource people or community-based service providers. In addition to these interviews, the research team conducted one focus group each of the two target neighbourhoods, involving a total of 12 community resource people or community-based service providers (5 in Brant and 7 in Two Rivers).
Interviews and focus groups were conducted in a semi-structured and informal style, using a standard protocol as a guide (Appendix A). The protocols varied slightly depending on the stakeholder being interviewed, but were consistently designed to elicit data related to central outcome objectives outlined in the Theory of Change Logic Model (Figure 1).

### 2.3.3 Sampling

The research team selected and recruited parent (client) interview participants from a list of names provided by the Parent Outreach Workers. Equipped with the "Information for Participants" memo (Appendix B) and with an understanding of the research process, POWs spoke with their clients prior to any direct contact from the evaluation team in order to explain the study and ensure informed consent and voluntary participation. While this sampling method relies on the POWs’ discretion in terms of which clients get identified as potential interviewees, the risk of bias introduced is balanced by risks to vulnerable families and the logistical burdens of direct recruitment by unknown researchers.

Community resources and other service providers were recruited from a list of names and/or agencies generated by POWs and members of the evaluation subcommittee. Focus group participants were selected to represent a variety of agency-types and a range of points of contact with the POW program and its clients.

### 2.3.4 Analysis

The interviews and focus groups were recorded (with the consent of the participants) and were transcribed. Robert Case and Sarah Haanstra analyzed the data, using a combination of NVivo (qualitative analysis software) and MSWord. Qualitative data analysis was conducted in a four-step process, beginning with "open coding" (Strauss & Corbin, 1998, 2008), then examining the

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**Table 1: Qualitative Methods**

<table>
<thead>
<tr>
<th>Stakeholder group</th>
<th># of participants</th>
<th>description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent (client)</td>
<td>14</td>
<td>• 7 parents in Brant Avenue&lt;br&gt;• 7 in Two Rivers neighbourhood</td>
</tr>
<tr>
<td>Parent Outreach Workers</td>
<td>2</td>
<td>• 1 POW in Brant Avenue&lt;br&gt;• 1 in Two Rivers</td>
</tr>
<tr>
<td>Community resource people/service providers:</td>
<td>15</td>
<td>• schools/education&lt;br&gt;• community-based services/charity&lt;br&gt;• community policing&lt;br&gt;• child protection social workers (F&amp;CS)&lt;br&gt;• Guelph neighbourhood support coalition&lt;br&gt;• neighbourhood association</td>
</tr>
<tr>
<td>Focus groups (n=12)</td>
<td></td>
<td>Brant Avenue: 5&lt;br&gt;Two Rivers: 7</td>
</tr>
<tr>
<td>Interviews (n=8)</td>
<td></td>
<td>Brant Avenue: 1&lt;br&gt;Two Rivers: 2&lt;br&gt;Undefined/both neighbourhoods: 5</td>
</tr>
</tbody>
</table>

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coded data for emergent themes (Braun & Clarke, 2006; Patton, 2002), then analyzing the themes and the relationships among them and reconciling them with the program's theory of change, toward, ultimately, the generation of insights regarding the implementation processes and outcomes of the POW program.

2.3.5 Ethics

The project was reviewed and received ethics clearance from the University of Waterloo Research Ethics Committee (ORE #19676).

Before starting the interviews or focus groups, the researchers explained the purposes of the research to each potential participant, described how the research findings would be used, and outlined procedures for secure management and storage of data and for protecting privacy and confidentiality. Before each interview, researchers discussed the principles of informed consent and voluntary participation with each potential participant, emphasizing her or his right to decline to participate or withdraw from the study at any time without any penalty or judgment. Each person willing to participate in an interview or focus group completed and signed an informed consent form (Appendix C) and was provided with an "Information for Participants" memo with information for contacting the evaluation team leader and the University of Waterloo Office of Research Ethics (Appendix B).

Use of secondary program data collected by GCHC was similarly governed by a Personal Health Information Protection Act (PHIPA) agreement signed between GCHC and Renison University College. The purpose of this agreement was to further protect the anonymity of research participants by limiting any publication of results or sharing of data to non-personal and non-identifying information. By agreement, all reports, publications, or other kinds of information-sharing related to the data in question are vetted for anonymity by the GCHC Privacy Officer before release.
3.0 Findings

The data gathered for this phase of evaluation indicate very clearly that the Parent Outreach Worker program is achieving results. While the evaluation focused on assessing progress toward select short-term and intermediate outcome objectives, some evidence was also found that suggests, at least tentatively, that progress being made toward some of the longer-term outcome objectives of the program. This evidence of outcomes, moreover, finds additional support in research literature that demonstrates the efficacy and cost-effectiveness of initiatives like the POW program and the broader Nurturing Neighbourhoods Initiative in which it is embedded.

In addition to generating evidence of progress toward outcome objectives, the evaluation data produce some important insights about how the POW program generates positive change for families and communities. These insights, we believe, are not only important for those directly involved in program implementation and development to consider, but also contribute to broader academic and practice-oriented discussions of how these types of programs can maximize impact.

In this section we present a range of findings, broken down into four subsections:

- Subsection 3.1 provides a summary of program implementation data, which describe the level and kinds of services provided and the kinds of families involved in the POW program
- Subsection 3.2 "Impact pathways" describes the main avenues through which the POW program appears to generate outcomes
- Subsection 3.3 summarizes the evidence found of progress toward the intended outcomes
- Subsection 3.4 presents a brief review of some of the literature that indirectly supports the approach being taken by the Parent Outreach Worker program.

3.1 Implementation Data: What Parent Outreach Workers Do

The POW program was launched in November 2012, with the hiring of the two Parent Outreach Workers – one working in the Brant Avenue neighbourhood and the other in Two Rivers. In both neighbourhoods, the POWs have been engaged in a wide variety of activities designed to identify and build relationships with priority families, to build networks of support around them, and to facilitate their access to the supports and services they need.

To this end, POWs hold regular office hours and informal drop-ins, attend and participate in community events and the activities or programs of the neighbourhood group, meet with other agencies and groups in the neighbourhood including schools and local service providers, visit
client families in their homes, and create outreach opportunities by going to where prospective clients might be (such as school bus stops or low-rent apartment buildings).

POWs listen to parents' needs and concerns, tell families about the services and supports that are available, encourage and empower them to use them, and assist parents in navigating the various service systems by accompanying them to appointments, helping them to advocate for themselves, and supporting them in the creation and implementation of service plans. POWs provide parenting strategies and advice, mediate conflicts within the family and in the community, and create new programs that respond to emerging needs. They strategically introduce community members to each other and involve families in community events and activities. The work they do is described in more detailed below in Section 3.2 "Impact Pathways".

3.1.1 Level (Amount) of Service

Number of clients

Table 2 summarizes statistics regarding the reach of the program. In its first full year, from April 1, 2013 to March 31, 2014, the POWs had an ongoing working relationship with 111 registered clients (families) (48 in Brant Avenue; 63 in Two Rivers), and more than 45 anonymous (non-registered) families as well. Because they do not wish to register, service data related to these families are not tracked at an individual level, and ongoing tracking of number of these families was not recorded until the 4th quarter. Parent Outreach Workers estimate that they have worked with a total of 45 new anonymous clients over Q3 and Q4 across the 2 locations. In the 4th quarter, when the POWs began keeping these records, they worked with 41 anonymous clients (22 in Brant Avenue and 19 in Two Rivers) in addition to the 58 registered clients involved in that quarter.

NOD data for July 2013-July 2014 indicate that registered clients in that period included 129 adults and 198 children (53 between 0-6 years of age). While

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<th>Table 2: POW reach</th>
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<td><strong>Total # of registered families from April 1 2013-March 31 2014</strong></td>
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<td><strong># of children</strong></td>
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<td><strong># of adults</strong></td>
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<td><strong>Anonymous families (in 3rd and 4th quarter)</strong></td>
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<td><strong>Current # of registered (and active) families for 4th quarter</strong></td>
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<tr>
<td><strong>Two Rivers Girls’ Groups</strong></td>
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<td><strong>Recorded number of encounters</strong></td>
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<td><strong>Estimated # of anonymous encounters from inception to April 1, 2014</strong></td>
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<tr>
<td><strong>Outreach (# of community members)</strong></td>
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<td><strong>General outreach</strong></td>
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<tr>
<td><strong>Brant coffee hour; Two Rivers drop-in</strong></td>
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<td><strong>Brant Ave.</strong></td>
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<td>129</td>
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<tr>
<td>direct email correspondence with POWs</td>
<td>Nightingale on Demand (NOD)</td>
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<td>quarterly reporting data</td>
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the time period covered by these data does not perfectly match the period for which the total number of registered families has been presented, the NOD numbers nonetheless provide a reasonable estimate of the program’s overall reach.

Families involved in the POW program vary in size from a single parent with one child to eight or more family members. 70% of POW client families were single-parent headed, in the period between July 2013 and July 2014; two-thirds of the families comprised of six or more individuals were single-parent headed. Figure 2 shows the breakdown of POW clients by family size.

While the POWs remain available to the families they have worked with over the long term, some registered families do become inactive, at least temporarily. By July 2014, 19 registered client families had participated and then become inactive in the program, presumably (and according to the POWs) because their needs had been met. At the same time, new families have been registering as clients and the overall number of families registered as clients has been growing since the start of the program. Quarterly reporting numbers do not provide any indication of the number of new registrants or families who phased out of the program and are thus unhelpful in understanding the cumulative number of families coming into and leaving the program.

Quarterly reporting numbers do, though, show the growth of the program. The number of registered clients in Brant Avenue grew from 7 in the 2nd quarter of 2013/14 to 21 in the 4th quarter. In Two Rivers, the number of registered families grew from 26 in the 2nd quarter of 2013/14 to 37 in the 4th quarter, in spite of the 13 families who phased out of the program over the year. This growth suggests the program is meeting a need in the community.

NOD data, moreover, indicate that the total number of families who had at some point been registered clients of the program had reached 97 families, by July 2014 (40 in Brant Avenue and 57 in Two Rivers). In direct correspondence with the evaluation team, the POW in Brant Avenue reported in April and May of 2014 alone, 11 new families had registered for the program.

At the end of the 4th quarter of 2013-2014, there were 58 active, registered clients of the POW program (36 in Two Rivers; 22 in Brant Avenue), and 41 anonymous clients for a total of 99 client families. By the end of the 2nd quarter of 2014/2015, the number of registered clients had grown to 92.
Number of encounters

"Encounters" are individual contacts between POWs and registered clients. Between July 2013 and July 2014, the period for which data are available through NOD, the two parent outreach workers logged some 1,264 encounters with clients and an estimated 201 encounters with anonymous clients. Most of the encounter data do not include a description of the medium of encounter, but from those that do, it is clear that while some of these encounters do occur by telephone and occasionally using social media, the vast majority occur face-to-face (at a ratio of 1 social media encounter for every 17 telephone and 55 face-to-face encounters).

Outreach statistics

POWs promote their services and disseminate information to clients, potential clients and other community members through participation in a variety of community activities and events. While the "outreach" numbers presented in Table 2 are the cumulative total audience size at a number of different events and activities and not unique individuals, these numbers nonetheless give some sense of the reach of the POWs' efforts to make themselves and their services known to families in their neighbourhoods. Between outreach at general community events and informal drop-in sessions with POWs, the cumulative number of community members who attended these events reached 3,393 in the period from July 2013 to July 2014.

3.1.2 Incoming Referrals: How Clients Connect with the POW Program

The interview data from POW clients and the POWs suggest that most people learn about the POW program through direct contact with the POW at events and activities in the neighbourhood (at the neighbourhood group, at neighbourhood groups activities or events, or at POW outreach initiatives) or through word-of-mouth from friends and neighbours. NOD data (July 2013-2014), summarized in Figure 3: Incoming Referral Sources, confirms this perception.

According to the POW interview data, friends, neighbours and peers are a key means through which they connect with some of the families who most need their services. Many of the struggling and/or socially-isolated parents the POWs wish to reach may not themselves attend neighbourhood group activities or POW outreach events, but sometimes a friend or a friendly neighbour does and will pass information to priority families and encourage them to connect with the POW. In this way, peers and the word-of-mouth promotion of the POW program appears to be an important source of referrals, especially for the most socially isolated families.

Figure 3: Incoming Referral Sources

- POW Referral Type GCHC--Self Referral
- POW Referral Type GCHC-- Peer
- POW Referral Type GCHC-- School
- POW Referral Type GCHC-- FCSGW
- POW Referral Type GCHC-- Neighborhood
- POW Referral Type GCHC-- Group Outreach
Similarly, both the NOD data and the interview data indicate that schools are an important source of referrals to the POW program (16% of referrals), and the POWs in both neighbourhoods have built strong relationships with the schools for that reason. Both the POWs and school personnel report enjoying a very strong and collaborative relationship. Given their mandate, the schools have relationships even with the most socially-isolated families (with school-aged children) in the neighbourhood. The POW program, the educators we interviewed said, gives schools a vital and non-threatening resource in the neighbourhood through which to extend support to children and families who they know (or believe to be) struggling.

Another important source of referrals are the social workers for Child & Family Services of Guelph and Wellington County ("FCSGW" in Figure 2). These referrals suggest that the POW program is seen by child protection social workers as a credible support for priority families.

3.1.3 Presenting Issues or Challenges

By far the most common reason recorded on NOD for encounters with POWs was for "advice on community services." This rationale accounts for about 36% of all POW encounters, and is more than twice as common than the second most frequently cited reason ("poverty/financial issues").

The main challenges or issues with which parents came to the POWs for support in the period between July 2013 and July 2014, not including advice on community services, are summarized in Figure 4: "Main Presenting Issues or Challenges."

By far the most common challenges confronting POW clients are poverty and, relatedly, food security issues. Parenting and child issues could also be taken together as a major factor...
confronting POW clients. In addition to "relationship problem with child," "child behaviour symptom/complaint," "education problem", as listed in Figure 4, NOD data include several cases where "relationship problem: parent/family" and "illness problem with child" are listed as "acute" issues.

Another important cluster of presenting challenges or issues has to do with parental mental health. Figure 4 shows that "feeling depressed", "acute stress reaction", and "feeling anxious/nervous/tense" are all among the most common challenges confronting POW client families, and additional issues listed as "acute" in the NOD data, though less commonly, include "psychological symptom/complaint" and "feeling/behaving irritable/angry."

Other "acute" issues recorded in the NOD that apply to 5 or more POW clients include (in order of frequency cited) "health care system problems," "unemployment problem," "relationship problem, partners", "feeling ill," "loss or death in the family," "specific learning issues," and several other challenges.

3.1.4 Issues Recorded as "Resolving" with POW Intervention

Figure 5 lists the main categories of need for which POWs were able to assist families in finding some degree of improvement. By far the largest category is around access to food, where the POW program linked parents to direct supports in over 300 encounters. As Figure 5 depicts, the other main areas where POW activities led to direct, observable improvements, according to program tracking data, were around poverty and financial problems (72 encounters), relationship problems with a child (33 encounters), a housing or neighbourhood problem (32 encounters), a social or cultural problem of some kind (17 encounters), or a problem at school (16 encounters). Less frequently cited issues recorded as resolving include health care system problems, child behaviour issues, legal problems, and general disease.

What is recorded as "resolving" in Nightingale on Demand requires some qualification. A "food problem" in a family, for example, is recorded as "resolving" when the POW provides or connects a family to emergency food services, even if the underlying ongoing issue of poverty and food insecurity are not really being resolved. Nonetheless, these data show some impact, at least in the short term, in resolving some of the immediate family concerns that the program was intended to address. Other data (outlined below), moreover, indicate that these interventions have a more long-
lasting impact on families as POWs not only respond directly to emerging needs, but also connect parents and families to ongoing services and other sources of supports.

3.2 Impact Pathways: How the POW Program Produces Outcomes

Broadly defined, "impact pathways" are the “how” and the “what” of Parent Outreach Workers’ work with parents and children. Impact pathways describe the major strategies that the POWs use in their work with families that appear to be central to achieving the intended outcomes of the program and reinforcing the program’s impacts. The evaluation data revealed three primary, inter-related themes in what POWs do that generate and reinforce their impact: build relationships, provide support, and connect parents and families to others (see Figure 6 below).

The three impact pathways are mutually reinforcing, and positive outcomes for parents and children appear to come from movement along all three together. Building relationships is at the centre of this process, as depicted in Figure 6, as it both reinforces and is reinforced by the other two pathways. Strong relationships are needed to support and effectively connect people, and supporting and connecting people, conversely, strengthens relationships.

Parents and families are moved along each impact pathway by the specific tasks carried out by the POWs, as summarized in Figure 6. Some tasks seem to move parents and/or children along one impact pathway, whereas other tasks move parents along more than one and up to three impact pathways.

Section 3.3 below summarizes data that show the program's effectiveness so far in achieving its intended outcomes. Those data suggest, for example, that the POW program is proving effective in increasing the social capital resources available to priority families, in engaging them with the services and supports they need, and in helping families to meet their basic needs. In this section, we present a framework derived from the data for understanding what appear to be the critical pathways to achieving those intended outcomes.
Figure 6: POW Impact Pathways
3.2.1 Impact Pathway: Build Relationships

The interview data are clear that the relationships POWs build with the parents and children in the communities they work are foundational to the work they do. The data suggest very strongly that where the POWs have been successful at reaching out to and engaging with priority families, it has been in no small measure due to their effectiveness in nurturing strong, positive relationships and a reputation in the community as not only available and responsive, but as caring, trustworthy helpers who really understand children and families within their social context.

The strongest and most recurring themes about "relationship building" are summarized below.

**Trust, safety and comfort**

Community resource people and parents alike point out that trust is not something that comes automatically or easily among neighbours or between community members and service providers in the target communities. Very common in the parent interviews were statements that reinforce how important trust, safety, and comfort are to their engagement with the POW program.

**In parents' words:** Trust, safety and comfort

"I've dealt with quite a few service providers that I just didn't trust, but I trust her."

"But with her, you can trust her, that she's always there to listen and there to help out, and that she genuinely cares about all of the families that she works with."

"I feel safe."

**Non-judgmental attitude**

Part of this relationship of trust, comfort and safety is not feeling judged. The statements of parents and community resource people who work with the POWs demonstrate quite clearly that the POWs are effective in establishing a non-judgmental environment, and that this environment is key to effective engagement with parents.

**In parents' words:** Non-judgmental attitude

"The way that she deals with it is—she's open, she listens, she gives constructive feedback, and she never makes a judgment and she'll never tell you what to do. The way that she deals with you is perfect."

"You can tell I'm low income when I'm going in somewhere. I've had people right out just tell me that I'm crap because I'm not as high standard. The [POW has] never, ever made anyone feel like that."

**Gentle encouragement**

Within the trusting and non-judgmental relationship, gentle encouragement is possible. Gentle encouragement is about not pushing people to do things before they are ready; it is about understanding that people will do things on their own time. At the same time, gentle encouragement often includes patiently and persistently working to support someone to identify opportunities for strengthening family functioning and family well-being by, for example,

- providing information so people can make informed choices,
- making suggestions for action and providing support for taking action,
identifying or naming the person's potential, and/or
giving positive feedback or praise.

Interviews with parents and with POWs indicate clearly not only that parents appreciate the approach, but that gentle encouragement has helped people to decide to take part in a community event, access basic needs and mental health services, volunteer in the community, go to school and feel better about themselves.

Making people feel noticed

Parent Outreach Workers proactively reach out to parents and families in their respective neighbourhoods and respond to their needs in many different ways. While the ultimate purpose is to identify and address the needs of families who are struggling, the data suggest that the impact of these gestures in terms of making people feel noticed is itself a powerful part of establishing the kind of relationship that makes the POWs successful in these efforts.

Some parents we interviewed, for example, expressed gratitude for how POWs check in with them when they have been absent from activities they normally attend or are otherwise out of touch. While this level of follow-up is a means of keeping up-to-date with changing family needs and for expressing gentle encouragement, at least some parents and community resource people we interviewed also identify this as a sign of caring and belonging.

Local outreach: Being visible, accessible, and available

The POWs take initiative to meet and respond to people where they are – physically and emotionally. The POWs involve themselves in community activities and spend time in places where they are visible and available to the families who might need them.

The POWs participate in neighbourhood group activities and help with food distribution and other neighbourhood-based services. The POWs have created casual drop-in opportunities where neighbours can socialize, their children can play, and everyone can get comfortable with them. They spend time in
apartment buildings where there are high concentrations of priority families with children, and they organize activities around school bus stops and other places where parents and children regularly congregate. They earn the trust of those who need their services by being present and visible in the neighbourhood.

The POWs maintain regular office hours, make appointments, create regular casual drop-in opportunities, and meet with people at schools, at health and social service agencies and in their homes. For people who are battling anxiety or who do not feel comfortable at a neighbourhood group location, this is a particularly important way for them to receive the supports they need.

From the interview data it is clear that another reason parents are willing to engage with the Parent Outreach Workers is because the POWs respond quickly when parents need them. This seems to reinforce an idea that the POWs really care about the people they work with because people know they can count on the POW to be there when they need them.

**Holistic scope**

Working in the community context, POWs often build relationships not just with individual parents, but often with that person's children, partner and neighbours as well. Building positive, trusting relationships with a parent, her or his partner and their children provides POWs with the ability to help address challenges within families and across generations and households.

Getting to know and often also working with neighbours, friends, people who live in the same building or whose children go to the same school makes the POWs stand out as different from other service providers and community resource people that parents may access. In some cases, the holistic approach uniquely positions the POW to not only better understand a family’s needs, but also provide meaningful and relevant support or mediation within and across families.

**In parents' words:** Responsiveness

"Sometimes it’s just a simple phone call – ‘look, I need to vent!’ And she’ll usually take your phone call. I've had her pull over on the side of the road as she’s driving to take my dramatic phone call."

"...because any time I need her – boom – she’s right there, and she’s there for everyone else as well."

**In parents' words:** Whole families

"I have a lot of family stuff where I find a lot of supports are just for yourself, right, and then if it comes to my daughter or my son needs to talk to somebody – well, 'we don't do kids, we don't work with kids'."

"The POW has kind of been helpful with... like, mediating - because I still am in contact with my daughter’s father. She’s been able to help him out, and she’s been able to kind of help us out with co-parenting because we’re trying to be civil."

**In parents' words:** Social context

"She knows all the players. She knew the other girl’s mom and then obviously the dad. She knew all of them, so who could our two kids go to for that kind of support?"
3.2.2 Impact Pathway: Provide Support

The data reveal very clearly that one of the main ways in which the POW program achieves outcomes for children, families and the community is through the support that POWs provide directly to priority families. Not only do Parent Outreach Workers work to build connections to services and supports in the community (see "3.2.3 Impact Pathways – Connecting" below), but the interview data indicate strongly that the support that POWs themselves provide to parents is also a core pathway to achieving outcomes. Some of the main dimensions and dynamics of this impact pathway are summarized here.

**Ongoing emotional support**

Aside from other concrete and material supports they provide, POWs are themselves an important source of emotional support for many parents. Every parent we interviewed spoke in some way about the ongoing emotional support they receive from the POW.

POWs also provide more programmed and directed support (described below), but for many parents, the POW is someone who genuinely listens to them when they need someone to talk to, someone they can “vent” to, or the person they go to on a difficult day. For those with little family support or who are not connected to their neighbours and others in their community, the POW, in fact, may be one of the only people they feel they can go to for this kind of day-to-day support.

We heard stories in the interviews of how POWs provided emotional support through a transition or a difficult time in a parent’s life (e.g., leaving an abusive relationship). In some cases, the POW provided emotional support alongside a more formalized service or clinical support that the parents were also accessing.

**Directed support**

The interviews revealed a number of ways in which POWs also provide parents and families with more planned and "directed support" to overcome specific barriers to well-being or to help parents address specific issue or needs in the life of her family. Parents talked about POWs helping them or their children to manage depression or anxiety, through a grieving process, with safety planning for vulnerable children, or in identifying anger management strategies.
Directed support also includes assistance in overcoming the social and emotional barriers that interfere with parents and families accessing the services and supports they need. When necessary and helpful, the POWs not only help parents and families get to appointments, but will accompany them to a first appointment, introduce them to service providers to whom they have been referred and/or arrange to meet them at community programs or events the parents are interested in attending for the first time. Beyond helping to manage the logistics of following up on referrals or participating in community, the POWs provide a level of social support that helps parents to overcome the stress and social anxiety of, for example, attending a difficult or intimidating appointment or walking into a room full of unfamiliar people for an assessment or meeting.

Directed support POWs provide can also appear more practical or logistical in nature. Parents told us, for example, of times when POWs responded to calls not only for emotional support in times of crisis but logistical help as well, like coordinating school pick up for their children, providing transportation to appointments, or helping to find an appropriate babysitter. For priority families, some with few other reliable social supports in the community, this level of support helps considerably to relieve stress and keep children safe.

**Parenting support**

A specific way in which the POW program was designed to generate positive change is through directly providing or connecting parents to supports for healthy and effective parenting. Providing parents with feedback, tips, strategies and information on child development and parenting is a central way in which POWs build protective factors around vulnerable children.

Some of the parents we interviewed said they were already accessing parenting supports and services without any input or support from the POWs. In these cases, the POWs may reinforce and support the implementation of positive parenting approaches the parents are already trying. Several of the parents we interviewed, nonetheless, identified the POW as their first point of contact when they are struggling as parents.

Evaluation interviews indicate that POWs support parents in at least these four ways:

- sharing tips and strategies,
• supporting parents to develop skills,
• providing a listening ear on tough parenting days, and
• acting as an entry point to parenting supports and services.

**Supporting parents to develop skills**

Parent Outreach Workers support parents to develop skills. The research revealed early evidence that POWs are supporting parents to develop concrete skills or take concrete steps to be able to meet their families’ needs or to make some positive changes in their life.

For some parents who are ready, Parent Outreach Workers have supported them to further their education, effectively job search, take on volunteer positions (including leadership positions in the community), and to develop their children’s life skills.

**Support for children’s healthy development**

Parent Outreach Workers work with parents and directly with children to support their healthy child development. Evaluation data point to many ways in which the POW program supports healthy child development, including connecting parents to supplemental and nutritious food and other services (as described above); supporting children’s access to recreational activities (e.g., through assistance in accessing subsidies and by encouraging parents and children to participate); identifying needs among children and addressing program and service gaps (e.g., through the creation of new programs, such as the Girls' Group, or by sharing ideas for new programs with neighbourhood group leadership); providing emotional support to children in need; and supporting or reinforcing positive messages parents are trying to pass on to their children.

**In POWs’ words: Supporting healthy child development**

“So as a result I ran my own girls group this summer with that group of kids, and we talked about strategies. We talked about body clues, we talked about how you would communicate with someone who is starting to irritate you. Anything they brought up really, we talked about – internet safety, all of those things, and I realized this is a huge gap because, again, if you’re over 14 there’s services, if you’re under 6 there’s services, but there’s not a lot for that in-between group.”

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3.2.3 **Impact Pathway: Connect**

**Connect parents with services**

When the support that a parent needs moves beyond that which the Parent Outreach Worker can provide, the POW assists the parent in navigating the service system so she/he can access the services and programs that best meet her/his needs.

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2 "Healthy child development" here refers to physical health and well-being, social competence, emotional maturity, language and cognitive development, communication skills and general knowledge (Offord Centre for Child Studies, 2012)
The evaluation data include a considerable amount of evidence that the POW program connects parents to services they need in numerous ways such as by providing information about available and appropriate programs and services, assisting with form completion, acting as a liaison between parents and service providers, providing or assisting parents to find transportation, and accompanying parents to services, programs and appointments.

For some, the POW is one of the first people they go to when they need to access a service or program, fill out a form or create a plan to address an issue in their lives.

A few interviews revealed examples of how the POW's endorsement of a service, service provider or intervention dramatically improved a parent or family's engagement with emergency, school, child protection and mental health services, by mitigating distrust, facilitating two-way communication, and providing emotional support to the parent. This effect is evidence of and made possible by the trusting relationship parents have with the POWs – including the belief that the POW cares about the people she works with. This relationship also enhances the POW’s ability to make suggestions and to use gentle encouragement effectively to connect parents with services.

This "POW endorsement effect" appears to strengthen services in at least these two ways:

- Parents are better able to hear and possibly follow through on suggestions or ideas shared by the POW because of the trust they have that the POW has their best interests in mind.
- A service providers’ positive message is supported or amplified when the POW repeats the same or a similar message. Again the trusting relationship between the POW and parent increases the likelihood that the positive message will be well received.

In Parent’s Words: Connecting Parents with Services

“They let me know there’s a program after school.... They helped me to fill the form. Anything comes that I don’t know – especially for me, because you when you are new, people don’t know you exactly. It’s not easy to have friends. But I get everything I need from this office.”

“Then I went to see my doctor because things were just going downhill for me, and my doctor phoned [the POW] and asked [the POW] to call me again.”

“Yeah, and the [the POW] always has – I know she’s a – how do you say it, liaison”.

In Parents’ Words: POW Endorsement

“People are like, 'oh, you’re going to meet somebody new?', and I'm like 'yeah', because the [POW] recommended it and introduced it... She wouldn’t send me somewhere that’s going to set me back. She just finally got me leaving the house and having a life a little bit. She’s not going to do anything that’s going to make me peddle backwards to ruin what she’s helped do.”

In a Community Resource Person’s Words

"We’ve been doing it for a while but we still don’t necessarily reach those that we want to or the most vulnerable. That only helps with the relationship building that happens at the level of the POWs because they’ve gotten to know these families and say, ‘no, no, they’re okay. [This service provider] is okay, that [service provider] is great, you should come check out this program, come see’.”
Connect parents with other parents

In interviews with parents and with POWs, evaluation participants described numerous examples of how Parent Outreach Workers are intentional about connecting parents with other parents and community members. POWs connect parents with other parents by

- encouraging parents/families to participate in community events or use programs and services of the neighbourhood group and introducing them to others when they do participate;
- hosting regularly-held, informal drop-in sessions where parents meet each other and introducing parents to others when they do participate in an event, a program or a drop-in session.

POWs use their knowledge of the neighbourhood and the families who live there to connect people by introducing them to each other and sometimes making suggestions about opportunities for informal support and mutual aid, or sharing stories or ideas across families as opportunities for peer learning. The POWs report that they look for opportunities to connect parents and families with complementary needs and resources and provide the emotional support and direction to help get mutually supportive peer relationships started. Evidence summarized in Section 3.3: "Evidence of Outcomes", attests to their effectiveness in this regard.

Connect parents with their community

More generally, we learned through the interviews that POWs have also been busy connecting parents and children to the neighbourhood at large. The POWs inform parents and families of community services, events and activities and encourage them to use or participate in them. Based in the neighbourhood groups, the POW facilitate the connection to the neighbourhood group and facilitate whatever level of involvement a parent is interested in. In addition to creating opportunities for parents to meet others in their neighbourhood, attending community events and participation in the neighbourhood group has also provided parents involved in the POW program new opportunities to feel like they are part of their community.

In Parents’ Words: Connecting Parents

“So she’s helped me with some contacts. I was looking for a sitter, so she set me up with a woman and her son who is going to take my son tonight.”

“She kind of looks out for all of us and all our different personalities, because really we all definitely mesh in our own ways, and then we all have our ways.”

“Connecting with other parents. Or she will sometimes—you know, ‘I had a family who tried this’, without mentioning their name.”

In Parents’ Words: Involvement in community

“Yes, I volunteer here Wednesdays and whenever they need help.”

“There was a lot of different activities, they let us know, so I participate whenever I can.”

“Because [the POW] has encouraged me to come here to get food, or I’ve joined some programs here. I took a cooking class here and I’ve done yoga here a couple times, and we did a craft class too...”
3.3 Evidence of Outcomes: What Parent Outreach Workers are Achieving

The data leave no doubt that the POW program is delivering results on key short and intermediate outcomes, and show evidence of progress as well toward some longer-term outcomes. Feedback about the POW program (and the POWs themselves) was overwhelmingly positive from all perspectives, and descriptions of the kinds of changes triggered or facilitated by POW involvement indicate an extraordinary level of impact given how new the program is and given that it is being carried out by only two workers.

In this section we provide an overview of the evidence and an assessment of progress toward the short-term, intermediate and long-term outcome objectives outlined in the Theory of Change Logic Model (Fig. 1, p. 5).

3.3.1 Short-term Outcome: Priority Families are Accessing the POW Program

Although the program data retrieved from the GCHC data base (Nightingale on Demand) does not include family-level data such as the proportion of client families that are affected by specific risks such as poverty or parental mental health or that include children 6 and under, the data presented above (Section 3.1.4, p. 15) nonetheless suggest that the POW program is reaching the intended families. 70% of the POW client families are single-parent headed, for instance, and the qualitative data would suggest that nearly all of those single parents are mothers. More than one third of the individual encounters that POWs have with their clients include poverty and/or food insecurity issues, nearly 1 in 5 are related to child behaviour or well-being concerns, and slightly more than 1 in 10 reflect parental mental health struggles.

The interview and focus group data, similarly, include some clear examples from both community resource people and parents themselves of very isolated parents and families with whom the POWs have been effective in building supportive relationships. In our interviews we heard stories of POWs assisting parents with no family and few social supports in the community, as well as parents with severe anxiety issues, intellectual disabilities and other challenges that have contributed to social isolation, to connect to services and supports and in some cases to become actively engaged in community. In one case, for example, outreach by the POW assisted a mother who reported not leaving the house for several years to gradually make social contacts in the neighbourhood, eventually leading to active involvement as a volunteer at neighbourhood group activities.

In parents' words:

"I'm a single parent... and when I came here everything was new to me. When you are new, you don't have friends, then everything comes harder for you. Then I was told about this neighbourhood, and... I don't know how I can imagine how helpful they have been [POW and Neighbourhood Support Worker]. Without them, for me, I don't know...".

"So she helps me majorly, and I probably wouldn't have any other supports or anything if it wasn't for [the POW]."
The anecdotal qualitative data in combination with the program tracking data provide strong evidence that the POWs are reaching and achieving positive outcomes with the priority population.

3.3.2 Short-term Outcome: Increased Social Capital and Positive Informal Supports

For the purposes of this evaluation, we are making a distinction between "informal social supports" and “formalized social services and supports.” Informal social supports include family, friends, supportive neighbours and other informal social ties between parents and families using the POW program and other individuals in the community. Formalized services and supports include formal health and social services as well as programs or activities organized by neighbourhood groups or grassroots volunteer groups.

Analysis of interviews with parents who use the POW program and with community resource people who observe changes in the neighbourhood revealed very strong and clear evidence that POWs are assisting parents and families to build informal support networks by connecting parents and families to their neighbours and their community. That the POW is effective in establishing new social ties and building informal supports around its clients is one of the strongest and clearest findings of this evaluation.

With example after example, evaluation participants described how POWs have directly created opportunities or connected parents and families to programs or activities in the neighbourhood that have led to neighbours getting to know each other. Typical of this process is an example shared by one of the POWs of how a weekly, informal drop-in session for parents to meet with her without an appointment also generated social ties among neighbours. At first, she said, her clients would quietly wait their turn to talk to her, but gradually over several months of bumping into each other at the drop-in, they started talking to and connecting with each other, eventually transforming the drop-in into an important, weekly social event:

"So now on [drop-in time], including kids because their kids come in after the bus and they all hang out, it’s between 20 to 30 people." [POW interview]

Very similar stories abound in the qualitative data in relation to POW activities and to neighbourhood events and programs that POWs help parents and their children to participate in, from emergency or supplemental food programs, such as the Garden Fresh Box or the Snack Program at Brant Avenue, to parenting education sessions and community suppers. The data indicate that the POWs have been very successful in strategically using these opportunities not
just to connect their clients to much needed services, but in so-doing to stimulate the creation of new social ties and expanded networks of social support.

One anecdote illustrates how the POW program connects priority families to existing networks of informal support. The POW learned that a girl in a family she was working with was not going to her graduation because the family could not find a suitable dress that they could afford to buy. With the mother and daughter's consent, the POW posted a notice on the neighbourhood group's Facebook page, and this is what happened:

...within three hours I had eight dresses in the building... The first one who called me (also a mom who lives in poverty, also a single mom) said "I have four... I could lend them to her." Then I had another mom come and do the same. By the next morning, I had access to 25 dresses... So I called the family – I think maybe there were 14 in this room at that time. So they came in and [the daughter] was trying them all on... And then people kept knocking on the door, and it’s more people from the community bringing more dresses! And they were saying, 'well, do you mind if we come in?' So we ended up with a group of moms on the couches over there, and the daughter would come out and show them the dress and everyone would vote. These were people who didn't even know each other! And then by the end, she left with two dresses and went to her graduation. [Parent Outreach Worker interview]

With a POW as intermediary, in other words, a family with financial limitations not only had a specific material need addressed by the community, but in so-doing was drawn into existing networks of support that they previously had no access to. The qualitative data include many similar anecdotes, which taken, together are strong evidence of considerable impact in terms of building networks of informal support around priority families.

3.3.3 Intermediate Outcome:
Increased Mutual Aid Among Neighbours

Beyond simply stimulating new social contacts and relationships of emotional support, the evaluation evidence shows that the POW program is also having some success in establishing relationships of mutual support and mutual aid among neighbours. Several participants shared anecdotes of how casual relationships established through the POW program evolved into helping relationships where neighbours cook for each other, give each other rides to the grocery store, care for each other's children, share outgrown children's clothes, help each other with home repairs, et cetera. The anecdote in the text box (right) illustrates a recurring theme in the data.

In a POW's words: Building informal support and mutual aid

"I started a drop-in time ... to help have a consistent time where I would be in the office so that parents could access me and so parents could also connect to each other. When this first started, Moms would come and sit around the table, but would not talk to each other (they were waiting to talk to me one-on-one)... The majority of these moms lived in the same building but did not know one another. By coming to talk to me, they slowly started to engage with each other (this took time) and now these Moms are each other’s peer support network – they take turns picking each other’s kids up from the bus stop, drive each other to the grocery store in exchange for child care, pick up each other’s garden fresh boxes or food from the emergency food cupboard when needed. It’s amazing that 18 months ago many of these women and families did not interact and now they are the biggest supports to one another."
In some cases, the relationship of mutual aid appear to be the direct result of the POWs strategically introducing a parent with a child who babysits with a parent in need of babysitting, for example, or a parent with a car with another who needs transportation. In other cases, these relationships develop with only the indirect or incidental support of the POW or with none at all, reflecting the resourcefulness and resilience of many of the families accessing the POW program. Mutual aid among neighbours is familiar practice for many families in the two target neighbourhoods, and as the anecdote of the graduation dress above illustrates, the POWs appear to be having some success in extending this form of support to families without access to it.

Overall, while the POW program cannot take credit for all the mutual aid that exists in the community, sufficient evidence exists to support the claim that the program is contributing to the building of mutual aid in the target communities, and assisting priority families in accessing the support of their neighbours.

3.3.4 Short-term Outcomes: Improved Awareness and Use of Formal Supports

The Theory of Change Logic Model (Fig. 1, p. 5) includes a cluster of short-term outcomes related to awareness of, access to, use of and navigation of formal supports and services. For the purposes of evaluation, we define "formalized" services and supports as any organized or programmed service, event or activity, including professional health and social services as well as programs and events organized by neighbourhood associations and volunteer groups.

While some evidence of an increased awareness among POW clients did emerge during the evaluation, of more interest was the question of whether the POW program leads to increased or improved access to and use of the available services and supports among the families the POWs work with. Overall in this regard, the evidence from the interviews is very convincing that the POW program is having a considerable impact, as presented above in Section 3.2.3 "Impact Pathways: Connect" (p. 21). As Section 3.2.3 indicates quite clearly, the POW program has been instrumental for many families in finding the supports and services they need, in overcoming logistical and emotional barriers to accessing and using those supports and services, and in navigating through services systems and making their specific needs known to service providers.
Additional nuances related to service access, use and effectiveness are outlined below in relation to specific outcome objectives.

3.3.5 Short-term Outcome: Early Assessment and Support for Children

While the evaluation uncovered only a very few examples of the POW program specifically expediting access to "early assessment," as specified in the Theory of Change Logic Model, considerable evidence exists that the POW program, in many different ways, directly provides or connects families to "early support" or to needed support in a timely manner.

Protective factors and safety planning

Another indication that POWs are effective in linking vulnerable children to early, preventative support comes from interviews with child protection social workers and from program tracking data. POW quarterly reporting data indicate that the POWs worked with as many as 16 families who had some level of involvement with child protective services (F&CS), and that the child protection files of 6 of these families were closed since the POWs became involved. POWs estimate, further, that their intervention made F&CS services unnecessary for at least 4 families.

While the exact numbers cannot be verified, that POW involvement in some families relieves more invasive and costly service systems from the need to intervene is corroborated by other community service providers and by child protection social workers. Some educators and other service providers in the neighbourhoods told us that the POW program provides them with a resource person in the neighbourhood who can and will respond to concerns about a child or family before they escalate to the point where F&CS or other service systems are needed. For the child protection social workers we spoke to, the POWs are a direct support to families, an important conduit to other supports, and an important ally in identifying risk and building safety plans around vulnerable children. Child protection social workers confirmed that the involvement of a POW has, in some cases at least, shortened F&CS involvement, made more frequent or intrusive interventions unnecessary, or made F&CS involvement unnecessary altogether.

In the words of a child protection social worker: Early support/building safety

"I think there is a very big role in building safety... like, I’m thinking of a mom who spends most of her time in her apartment. Her child goes to school, comes home, but her child is very isolated and struggles socially just the same as mom does. The parent outreach worker gets her engaged in the community and pulls her out of that and connects them with positive supports, positive people, positive things to do. For this mom’s mental health concerns, that is very important. It makes them more visible in the community, so you’ve got more eyes on them to see how everything is going."

"For closing files, it provides the ability to know that clients will be ok. We can rely on each other when the need arises and it really helps for early intervention to avoid crises. It’s an extra level of protection."
Links to early assessment

The evaluation data suggest that when POW support does lead to early assessment and support, it happens as a result of families and POWs working together to access the formalized early assessments sooner than the family would without the assistance of the POW. The POW program, in such cases, expedites access to services for priority families and their children, including those that may include screening and assessment.

In one case, for example, the POW helped a client who was struggling as a single mother with a newborn and some special needs of her own to negotiate an education and assessment plan for an older child who was having social and academic problems at school. The child was already on the wait list for psycho-social assessment through the school, but then was withdrawn from school due to emotional and behavioural issues that were interfering with his schooling and social relationships, thereby putting his position on the wait list in jeopardy. By supporting the family in working with the principal, the POW facilitated the child's return to school with additional supports while awaiting assessment.

In other cases we heard about, the POWs were instrumental in connecting families to Community Care Access Centre (CCAC) services, for parent needs, in helping a parent overcome a sense of intimidation and pursue mental health services, and in registering a family that relied exclusively on walk-in clinics and emergency services with a family doctor.

While none of these cases reflect a specific or direct link to "early assessment," they nonetheless affirm that the POW program is, at least in some cases, getting families engaged with services where identification and assessment can be done sooner than would otherwise be the case.

Parenting skills and early child development activities

POWs also provide a kind of proactive, early support to some families with young children by providing parenting information and training, by mediating conflicts within the home, by connecting children to programs and activities that promote healthy development, and by creating new programs that respond to emerging needs. Section 3.2.2 "Impact Pathways: Provide Support" describes these forms of support in greater detail. While additional data are needed to measure the impact of these interventions on child development over the long term, the evaluation found some evidence at least of POW activities leading to reduced conflict and stronger relationships within families.

In Parents' Words: Healthier family dynamics

"She's really helped me connect with my daughter."

"So basically if it weren't for [the POW], I'd probably still be at my house... it's better because I can do more with my son, and I'm not as scared to leave the house and worried about things."
3.3.6 Intermediate Outcome: Access to Basic Needs

The data are unequivocal that the POW program is helping struggling families to meet basic needs. Every parent we interviewed shared examples of ways in which the POWs helped them to learn about and access services and supports for food and other basic needs. The POWs described countless ways in which they assist families who are struggling to meet their basic needs by connecting them to community supports, through advocacy with Ontario Works or the housing authority, for example, and by engaging families in community activities and networks. Food insecurity and poverty are the most common challenges facing POW clients (Figure 4, p. 14), but they are also the challenges for which the POW program most frequently provides some degree of resolution at least in the immediate term (Figure 5, p. 15).

The interviews reveal that POWs connect priority families with supplemental and emergency food directly by informing them of the food programs of the neighbourhood groups, local service providers, and other agencies and, when helpful, by accompanying parents to those food programs and introducing parents to food program volunteers or staff. When mobility is an issue or when conflict in the neighbourhood is a barrier to access, the POWs deliver or arrange for the delivery of these same services to their clients' homes. In some cases, the POWs mobilize local foundations and service providers to provide for the special needs of individual client families.

The interview data also suggests that the POW program gives priority families increased access to basic needs indirectly by building social support around them, stimulating mutual aid among neighbours, and encouraging their involvement in community.

In addition to connecting priority families to supplemental and emergency food sources, parents shared examples of how the POWs helped them to resolve heat and hydro issues, maintain housing and Ontario Works benefits, access affordable clothing and household items, enrol their children to recreation activities, keep children in school, and get affordable Christmas gifts for their children.

3.3.7 Long-Term Outcome: Families are Empowered to Meet Their Needs

The theory of change underlying the POW program (and the broader Nurturing Neighbourhoods Initiative) anticipates that a family’s ability to meet its own needs will be enhanced over the long term as their protective factors and access to the social determinants of health are also enhanced. Such outcomes, however, can only be realized over the long term with
continual investments in programming in the target neighbourhoods and are thus not expected to be detectable after one year of a program of the scale of the POW program.

Although this evaluation was not designed to assess progress toward realization of such long-term objectives, some of the evidence gathered nonetheless suggests that POW support is already having some impact in terms of empowering families to meet their own needs. As noted, the POW program is helping priority families to make permanent connections to both formal and informal supports, is stimulating and reinforcing mutual aid among neighbours, and is helping parents to break through personal, economic and social barriers and become involved in community life.

For many parents, the POW program has proven to be a source of and conduit to the emotional and material supports needed to build or re-build a sense of independence and agency.

3.3.8 Long-Term Outcome: Increased Accessibility, Responsiveness and Effectiveness of Formalized Services and Supports

In the long term, the hope is that the POW program will help to instigate permanent changes to social and health services systems that will make supports and services more accessible to, responsive to, and effective for priority families in the target neighbourhoods. The evaluation was not designed to seek evidence of change at this level and nor did evidence emerge to support the claim that this kind of change is already being affected by the program.

The evaluation evidence does, nonetheless, suggest quite clearly that the POW program is itself a valuable addition to the service systems that is enabling priority families to access services sooner, more often and more effectively, and in some cases also helping them to more effectively navigate the services systems and advocate for more responsive services.

Additionally, while data were not specifically gathered on this dimension of the program's functioning, the creativity and commitment with which the partner agencies leading this program seem to be collaborating bodes well for improved service access and navigation across service systems in the future. Program stakeholders may wish to examine the processes and impacts of the collaboration practices being used in the development and implementation of the POW program in future evaluations.

In Parents' Words: Empowered to meet needs

"And now I’m in school and I’m feeling proud and I’m getting on my own two feet again…So I mean, without [the POW], I don’t think I could have done it. I mean, somehow maybe, but—"

"I find with their support, because I do have family I can call for help at any time; but I haven’t had to as much, so it feels good. I’m [in my 30s]. I should not need to call my father for groceries."
3.3.9 Long-Term Outcome: Stronger, Safer, More Resilient Neighbourhoods

While, again, the POW program alone cannot be expected to have had a neighbourhood-level impact on its own at this early stage in its implementation, some evaluation participants nonetheless feel that it has.

The POW program, we have already seen, has had a discernible impact on its client families' connectedness and participation in community, building networks of support around priority families, stimulating and reinforcing mutual aid among neighbours, and supporting the direct involvement of client families in community-based programs, events and activities. For some parents in the target communities these activities have translated into a sense that their neighbourhood is changing for the better.

While none of this is evidence that POW program is changing the whole community, these findings nonetheless indicate that the POW program is contributing to the building of stronger, healthier community at the micro level at least.

3.4 Support from the Literature

In addition to the evaluation data summarized above, the evaluation team also looked to the research literature for analyses of similar programs or approaches. Overall, the literature we reviewed provides additional confidence in design and approaches of the POW program, adding weight to findings summarized above.

3.4.1 Literature on outreach

The vision for the POW program and the strategies employed by the POWs, for one thing, appear to have considerable precedent in the literature on outreach to marginalized populations.

Targeted outreach works

Research literature indicates quite strongly that targeted, intentional outreach programs, like the POW program, work for a broad range of marginalized communities. A 1998 study in the US, for instance, found that outreach workers throughout that country had benefited "thousands of people by improving health care access in underserved communities." The study concluded, moreover, that outreach workers not only identify and link people to health or support services, but "also coordinate their relationship with multiple systems (Rosenthal, 1998,
cited in Castañeda, Clayson, Rundall, Dong, & Sercaz, 2003). The goals of the POW program are consistent with these findings.

More recently, in a systematic review of literature on outreach to "hard-to-reach families," which included a total of 54 articles from the education, health, crime and social services literatures published in 2000 or later, Boag-Munroe & Evangelou (2012) found evidence of outreach programs that are effective in engaging all kinds of isolated populations in services and community activities, including families living in poverty, single parent families, parents and other adults with a range of mental health issues, and people with physical illnesses or disabilities (p. 220). Other literature demonstrates success in improving service delivery and the engagement of street involved youth (Connolly & Joly, 2012) and immigrant families (in the US; Castañeda et al., 2003). Indeed Rots-de Vries et al. (2001) found that even with people with complex needs, including serious mental health issues and addictions, targeted outreach programs enabled service providers to "reach the target group and to achieve the final intervention goal" – i.e., linking to follow-up help – "in the majority of cases" (p. 217).

In short, evidence in the literature support the assumption of the POW program and the evidence found in this evaluation that strategic, targeted outreach can be effective in connecting otherwise marginalized families to services and community supports. In at least some contexts, in fact, "outreach workers are the key to building vital community support" (Castañeda et al., 2003, p. 432, emphasis added) and "the most crucial step for engaging" hard-to-reach populations in community-based interventions (Connolly & Joly, 2012, p. 525).

Elements of effective service and outreach design

In their systematic literature review, Boag-Munroe & Evangelou (2012) highlight a number of principles and practices that are common to effective outreach efforts, many of which are reflected in what we heard about the POW program.

Most generally, Boag-Munroe & Evangelou (2012) report that "all writers" emphasize the development of "relationships of trust" and the creation of "networks of supports" for families as central pillars in all effective outreach programs (p. 223). In their meta-review of 54 youth outreach programs, Connolly & Joly (2012) similarly found that the formation of a "caring and trusting relationship" was one of three "critical features" of effective outreach (p. 529).

As discussed above under "Impact Pathways", both the building of relationships of trust and the creation of networks of support are approaches at the very core of the POW program as it has unfolded since its inception. Moreover, as Boag-Munroe & Evangelou (2012) also point out, these two pillars of effective outreach practice are achieved "either by creating a holistic, multiservice service or through programmes which foster local networks of support" (p. 223). The POW program, we found, uses both of these strategies.
The idea of providing a holistic, multiservice approach to family support, which recurs in Boag-Munroe & Evangelou’s (2012) literature review and in ours, is embedded in the origins and governing structure of the POW program. A common finding in the literature regarding services for families who are struggling and marginalized populations is that outreach and promotion is too often oriented to focused services of single agencies that families do not see as relevant, comprehensive enough or attuned closely enough to their complex needs. What is needed, according to Boag-Munroe & Evangelou (2012), are multi-agency strategies that take time to "listen to families to discover their needs" and which are flexible in how they "provide or signpost available help" (p. 218). The POW program appears well designed to address such challenges, and the available evidence suggests considerable effectiveness in this regard as well.

A third key element of program design found in the research on effective approaches that is also reflected in the POW approach is its location and delivery within the neighbourhoods where the kinds of families it aims to support live. Boag-Munroe & Evangelou (2012) cite several studies in their review of literature on "hard-to-reach families" that advocate for the locating of service provision in the community as a means of both increasing the visibility of the service and facilitating access (see, for example, Doherty, Hall, & Kinder, 2003). Consistent with this literature, the location of the POWs in the two target neighbourhoods was identified in the evaluation data as an important factor in the program’s effectiveness.

In a POW’s words: Neighbourhood based

“What, in my opinion, makes this role especially effective, is that it’s neighbourhood based. That allows for more quality relationships that make “bridging” much easier and more likely to be successful. By working with families one-on-one and building rapport with them I have been able, over time, to help them feel safe joining the neighbourhood and then feeling a sense of belonging there.”

Effective outreach methods and approach

A number of specific approaches and methods are highlighted in the literature as particularly effective practices, many of which are being implemented by Guelph’s POWs.

A common recommendation in the literature is that information and outreach communications should be taken to those places where the parents and families targeted for support naturally congregate (Boag-Munroe & Evangelou, 2012, p. 215). Connolly & Joly’s (2012) meta-analysis found that two-thirds of the articles they reviewed highlighted this same point in the context of youth outreach as well (p. 529). Some studies highlight the importance of outreach workers being well integrated into the neighbourhood and present at a variety of community events. Other researchers emphasize that face-to-face contact works best for building relationships, disseminating service information, and connecting families to needed supports, including home visits and going to places the target populations frequent such as "picking up kids after school" (Castañeda et al., 2003, p. 433). Castañeda et al. (2003), in fact, found that multiple person-to-person contact is "crucial" to overcoming stigma, clarifying purpose and building the relationships needed to successfully enroll children and families in a new health program (p. 433).
In terms of reaching those families who are truly isolated and/or who resist contact with service providers, several researchers have found that using a "snowball" approach – systematically using and fostering word-of-mouth networks to reach isolated families – is an effective approach (Boag-Munroe & Evangelou, 2012, p. 223; Coe, Gibson, Spencer, & Stuttaford, 2008; Thompson & Phillips, 2007). Building relationships with agencies and institutions in the community (like schools, local churches, and community based organizations) also has some proven efficacy (Castañeda et al., 2003, p. 433).

Related to Boag-Munroe & Evangelou's (2012) conclusions about the importance of listening to families and adapting support provision to their express needs, Glennie, Treseder, Williams & Williams' (2005) analysis of outreach related to local early-child development initiatives in the UK led them to emphasize the need for open lines of communication with parents to find out what needs they have: "perhaps using open days or drop in services to take the opportunity to discuss with families what activities they might use" (cited in Boag-Munroe & Evangelou, 2012, p. 217).

Two other elements of effective outreach practice are identified in the literature and worth noting in the context of the POW program: the provision of direct, practical support such as assistance with transportation or childcare, and the importance of "using the parents' resilience and social capital as resources" (Snell-Johns, Mendez, & Smith, 2004, cited in Boag-Munroe & Evangelou, 2012, p. 221). A number of studies have found the provision of direct support to be a potent tool in both building rapport and facilitating participation in services and supports (e.g., Connolly & Joly, 2012; Snell-Johns, Mendez, & Smith, 2004; Rots-de Vries et al, 2011). Similarly, research shows that outreach strategies that build and mobilize parents' resilience and social capital not only generate increased informal social support and mutual aid among peers, but in so-doing also generate more effective engagement with formalized supports and services (e.g., Snell-Johns, Mendez, & Smith, 2004; Stratham, 2004).

Evaluation interviews show that Guelph's POWs are using all of these approaches and techniques to engage with struggling families in their neighbourhoods.

**Skills and characteristics of effective outreach**

Boag-Munroe & Evangelou's (2012) literature review identified the following skills that the research indicates are needed within services for hard-to-reach and struggling families: communication, flexibility, adaptability, contextualized and community-based work, careful design of appropriate setting, and relationship building (p. 235). In their evaluation of outreach efforts to get families who are struggling enrolled in a new health program, Castañeda et al. (2003, p. 433), also found that the ability to communicate effectively with all kinds of people and flexibility were among the personal abilities and characteristics that outreach workers needed to be successful. Other necessary characteristics they found included an ability to work
independently, an understanding of confidentiality, and a demonstrated commitment to serving the community.

The evaluation data demonstrate that the Parent Outreach Worker Program, and the POWs themselves possess all of these attributes. From what we have learned about it during this evaluation, in fact, the POW program appears to have integrated all of the best practices identified in the research literature on outreach to marginalized communities.

3.4.2 Cost-Effectiveness
Calculating the cost-benefit of investments in the POW program in concrete dollars is beyond the scope of this current evaluation, and may be research worth investing in at a later stage of the program's development. Cost-benefit calculations related to social determinants of health and to similar other initiatives, however, suggest that this program is a sound social investment.

Social determinants of health, community hub concept, and NNI
Project planning documents for the Nurturing Neighbourhoods Initiative (NNI), of which the POW program is part, outline a cost-effectiveness rationale that is well grounded in the research literature on programs that address the social determinants of health and which involve targeted social investments in priority neighbourhoods.

The links between poverty and health care costs are well established, for instance, and research in Ontario suggests that raising the income of the lowest-income quintile would generate cost savings in the health care system alone of some $2.9 billion (Laurie, 2008, p. 4). According to Seskar-Hencic et al. (2013), Ontario's Ministry of Health and Long-Term Care estimates that for every $1 invested in the prevention and treatment of mental illness and addiction, $7 in health care costs are saved and as much as $30 of lost productivity and other social costs are averted (MOHLTC, 2009, cited in Seskar-Hencic et al., 2013, p. 42).

Neighbourhood-level programs that, like NNI, target priority neighbourhoods or populations also have some demonstrated cost effectiveness. According to Laurie (2008), for example, the Pathways to Education project, an early intervention project in Toronto's Regent Park neighbourhood, has generated an estimated social benefit worth $50,000 per student (p. 5). A well-studied comprehensive preschool-based early child development intervention targeting "poor at-risk children" in a US community, similarly, has generated a "7:1 payback in economic benefits" over the 30-year period of study, with savings in education and welfare expenditures and benefits in terms of productivity. At the age of 27, those who participated when they were children were twice as likely as those who did not to have completed high school, were four times more likely to earn $2,000 or more per month, had one fifth of the arrest rate, and were three times more likely to own a home (Schweinhart, 2005).
Results of a recent Edmonton initiative provide further evidence of the cost-effectiveness of the community hub concept that the NNI is predicated upon. The Schools as Community Hubs (SACH) pilot project was a three-year project based in schools in priority neighbourhoods that like NNI aimed to (1) build coordinated partnerships that could improve service delivery systems and processes, (2) establish community hubs (schools, in this case) that would serve as key access points for high needs families and children, and (3) connect with families and children in targeted neighbourhoods to "a multifaceted hub of programs, including connections to services and support, recourse and mentoring, critical hours activities and capacity building."

Evaluation of this pilot project found that the project produced an economic value of $4.60 for every dollar invested – $7.6 million overall – in reduced vandalism and shoplifting, increased parental incomes, and economic benefits related to the increased number of vulnerable youth who completed high school (Leger, 2013).

The overall Nurturing Neighbourhoods Initiative, in other words, appears to have solid justification in terms of cost-effectiveness.

**Child-focused interventions and the POW program**

Cost-effectiveness estimates for programs of the scale and focus of the Parent Outreach Worker program specifically do not exist in the literature, but a number of factors do suggest tremendous potential in terms of social return on investment.

As NNI program documentation points out, neuroscience research since the 1990s has clearly demonstrated the importance of environmental factors, such as poverty, fear and trauma, or neglect, in the early life experiences that influence human development into adulthood (Mustard & McCain, 1999). We know that the social environment in which young children are raised has implications later in life for social adaptation, school success, employment and wealth, and involvement in crime, as well as for numerous health issues including various chronic diseases, heart disease, substance abuse and mental health difficulties (Heisz, 2007).

Relatedly, we know that child development outcomes are significantly affected by the "geography of opportunity" (Galster & Killen, 1995). Child development, in other words, is not just a reflection of private parenting patterns or the resources that individual families have to invest in their children. It also reflects the broader social dynamics and institutions through which the entire citizenry organizes itself economically, culturally, socially, and so on. (Kershaw, Forer, Irwin, Hertzman, & Lapointe, 2007, p. 537)

According to Kershaw et al. (2007), citing numerous studies as evidence, children as young as 3 who reside in affluent, safe neighbourhoods have been shown to be less vulnerable in terms of healthy development than those "children from similar family backgrounds living in poor, unsafe, and/or non-cohesive neighbourhoods" (p. 527).
In addition to these geographic effects, certain parent and family traits can be identified that impact child development either directly (in the case, for example, of abuse, neglect or a lack of parenting skills) or through a close association with poverty. Poverty is more prevalent in families where one or both parents has a disability or experience mental health struggles or addictions, and 51% of lone parent families headed by women are poor (Statistics Canada, 2013). As reported above, 70% of POW client families were single-parent headed, in the period between July 2013 and July 2014; two-thirds of the families comprised of six or more individuals were single-parent headed.

In terms of economic productivity, this "unnecessary early vulnerability" stemming from poverty and other societal factors constitutes a related "unnecessary brain drain" in lost human potential that, by some recent estimates based on child development measures in British Columbia, could amount to as much as 20% of GDP over the next 60 years (Kershaw, Warburton, Anderson, Hertzman, Irwin, & Forer, 2010, p. 58). The value of this loss, Kershaw et al. (2010) calculate, is equivalent to investing $2.2 trillion today at 3.5% interest, "even after paying for the social investments required to reduce such vulnerability" (p. 58).

The economic payoffs of investing in child, family and youth prevention-oriented programs "have been confirmed in many studies around the world (Reimer, 2010, p. 1). Early childhood development programs set within priority neighbourhoods, in fact, can have as much as an 8:1 payback to society over the long term by some estimates (Reimer, 2010). Given the outcomes being generated by the POW program and considering its focus on struggling families within priority neighbourhoods, it is reasonable to conclude that the POW program is mitigating at least some of the "brain drain" of childhood vulnerability and thereby generating significant long-term cost benefit on that basis.

The POW program is proving effective in connecting priority families with vulnerable children to food and nutrition supplements, in building social support around families with vulnerable children, in involving families in community life and linking them to community-based supports, and in facilitating more effective engagement of parents with formal services including schools, health and mental services, child protective services and others. In so-doing, the POW program not only helps to directly build supports around families that facilitate healthy child development or mitigate barriers to it, but also generates the visibility and community relationships around vulnerable children that serve as protective factors and which may facilitate earlier access to needed assessment and support.

During the evaluation, we heard of at least two families where the POW program prevented the withdrawal of children from school, one where the POW program provided the support and encouragement needed for a parent to further her education, two or three where the POW program helped to resolve issues that jeopardized housing or income assistance benefits, and many where the POW program led to children being involved in new after school or summer
activities in the community. The POW program supported the closing of 6 child protection files open to Family & Children's Services (F&CS), and made F&CS involvement unnecessary in at least 4 other cases. In at least one case, the involvement of the POW and the relationships she had built with family members prevented a serious mental health crisis in one family from escalating to a full-blown emergency response.

With the data available, a dollar value cannot be put on the benefits generated by the POW program in terms of social investment and cost-savings to the health and social services systems. Given what has been established in the literature and considering the evidence we have gathered related to the program's focus, methods and outcomes, nonetheless, our assessment is that the POW program is very well positioned to generate considerable social and economic payback over the medium and long term.
4.0 Conclusions and Recommendations

Over the course of this phase of the evaluation of the POW program, we talked to the POWs themselves, as well as to educators, community police personnel, local charity providers, health and social service providers, and neighbourhood group staff members and volunteers from both target neighbourhoods (15 in total). We looked at program documentation and program tracking data. We spoke to neighbourhood development leaders, and child protection social workers who work with families in the target neighbourhoods. And we spoke to parents who have used the program in both neighbourhoods (14 in total).

We asked all of these different stakeholders questions about their observations of and experiences with the Parent Outreach Worker program, and from different perspectives and with different anecdotes, they all told us the same thing: that the POW program is a vital support for priority families in the neighbourhoods that, given its flexible, hands-on approach to helping priority families to access a comprehensive and coordinated array of formal and informal supports, serves a purpose no other agency has the mandate or capacity to fulfill.

Conclusions are drawn from the review of the data summarized above, and are presented in four categories:

- conclusions about relevance have to do with the appropriateness of the program to the context and to demonstrated needs;
- conclusions about effectiveness address the progress made toward the program's intended outcomes;
- efficiency and reach includes comments on the scope of program activities and the number of beneficiaries
- conclusions about sustainability address both the sustainability of the benefits generated and the sustainability of the program itself.

4.1 Relevance

Review of project documentation and interview data demonstrate that the POW program is based on well-established need and is thoroughly grounded in and responsive to an understanding of the target neighbourhoods. The POW program – and the individual POWs themselves – are highly valued by all of the community stakeholders we interviewed for the roles they play in reaching out to priority families, working with them to identify, access, and navigate the services and supports they need, and involving them in community life.
All of the parents we interviewed expressed very high satisfaction with the program, and the growth of the program over its first year is further indication of its relevance. Program tracking data confirm that the program is reaching families struggling with issues like poverty and food insecurity that are characteristic of the "priority families" as defined by the social determinants of health literature. The interview data confirm that at least in some cases, the POW program is definitely reaching the intended "priority families." POW clients include 58 children under the age of 6. Overall, however, the available data does not provide enough detail to enable a definitive assessment of the types of families using the POW program.

Program approaches and methods, moreover, are consistent with the research literature pertaining to outreach to "hard-to-reach" and marginalized populations, reflecting most of the best practices identified in the literature. Situating the POWs in the neighbourhoods is an important element of their success, and the voluntary (vs. mandated), multi-service nature of their position lends itself well to its early intervention and prevention vision.

In combination with research literature describing similar approaches, the body of evidence supporting what we have termed the program’s “Impact Pathways” indicates that the POW has evolved practice approaches that serve the program context and purpose well. The evaluation evidence supports a strong and intentional focus on building relationships over time as a self-reinforcing means of building trust and engagement in the POW program and thereby strengthening impact.

**Recommendations:**

These conclusions affirm the importance given by the POWs to reputation- and relationship-building activities.

- While the direct impact of these kinds of activities is difficult to quantify, the importance of these activities should continue to be recognized in program planning, job descriptions, and resource allocation decision-making.

- Following the course set by the current POWs, recruitment and training for future POW positions should include an intentional focus on interpersonal, relationship-building skills, the ability to communicate effectively across cultural and socioeconomic differences, an understanding of community processes and experience in community-based practice approaches. Clinical assessment and intervention skills are also important, as is familiarity with the available services and supports, but the evaluation data suggest that relationship-building skills are the key to reaching the most marginalized families and maximizing the impact of these other skill sets.

- Making descriptive data on the families using the POW program more available at an aggregate level (for evaluation if not for regular reporting) would strengthen the program’s claim that it is reaching priority families. This might include some qualitative elements recorded by the POWs (e.g., descriptions of individual families) as well as some quantitative data (e.g., % of families falling into the different risk categories). For some stakeholders, for example, it might be important to know how
many children from 0-6 are involved in the program. Program managers and the POWs may need to work with GCHC data management personnel to explore the possibilities in this regard, and with the GCHC privacy officer in regards to the sharing of these data with external stakeholders.

- The characteristics of the POW program's target populations should be reviewed and clearly defined in program documentation for future reference.

4.2 Effectiveness

The evidence shows very clearly that the POW program is producing results, with very strong clear progress being made toward its short-term intended outcomes and considerable progress being achieved in relation to some of its intermediate outcomes.

The evidence leaves no doubt that the POW program is assisting priority families in meeting their basic needs directly, by linking families to support services, and indirectly by building community around priority families and facilitating their encouragement in community. Whether this applies equally to anonymous clients, who we did not get input from, as it does to registered clients, a sample of whom we did hear from, is a matter to be explored as a next step in the evaluation process.

The evidence provides a very strong basis for concluding that the POW program is being particularly effective, also, in building social capital resources and community relationships around priority families. We heard remarkable stories during the interviews, often corroborated by the parents themselves, of isolated single mothers who, with the support and the encouragement of the POWs overcame considerable psychological, social and economic barriers and began making new friends, established new relationships with the neighbourhood groups and other community support workers, connected their children to new social networks through enrolment in recreational activities in the community, or even began volunteering at social events and program activities at the neighbourhood group.

In the words of a social worker:

"The POW is another support in the community that can be another set of eyes and ears to help raise awareness with us about what is going on for families who need support. They are doing a great job. Getting moms out of the house who may be experiencing mental issues or social anxiety issues lowers their isolation and also increases awareness of what's going on with the family at the community level and social services level. The POWs are connecting people with the Ontario Early Years Centres and other programs that get people involved. It can take months of building relationships but it reduces the long-term risks and provides a bridge between families and support services."

As noted in the description of findings, the establishment or strengthening of social ties and community relationships that the POW program has facilitated is, in some cases, also evolving into concretely supportive relationships of mutual aid among neighbours. The POW program is anticipated to contribute to an increase in mutual aid among neighbours over the long term and while a neighbourhood-wide impact may not yet be discernible, the early evidence is that the POW program is helping to stimulate mutual aid in some quarters at least.
While we were unable to quantify the impact, so common and diverse were the accounts of how the POWs helped families to learn about, effectively connect to, and constructively engage with the available service systems and community supports that we have to conclude that the POW program is having a considerable impact in this regard as well. More systematic tracking of referrals and service or support links made by the POWs, including some data on the outcomes of linkages made (e.g., did they result in new or more effective service provision?), would help to determine more precisely how, when and how universally this outcome is being achieved. Further research that tracks individual families and their relationships to the various service systems over the course of their involvement with the POW program could also be helpful in understanding the program's impacts in this regard.

Evidence of POW intervention leading to early assessment is sparse, but the data gathered support the conclusion that the POW program is providing or connecting priority families to early help that, in a significant number of situations, prevents or reduces the need for more intensive, intrusive and costly service interventions. Not only do the POWs themselves serve as a supportive resource that builds safety in families and supports families through crisis, but the POW program gets families (parents and children) more involved in community and connected to a broader range of individuals and agencies who can similarly identify family needs and challenges and provide support.

Recommendations:

- Given the evolution of the program since it was initiated and considering the evaluation data presented here, now might be an opportune time to involve the Parent Outreach Workers, program managers, partners and other key program stakeholders in a review of the program's outcome objectives and overall theory of change. The goals of such a review would be to ensure that the outcome objectives against which effectiveness will be measured remain accurate and relevant, to ensure a shared vision for the program across stakeholders, and to keep program planning, data tracking, and implementation focused on the intended results.

- Following a review of the program's theory of change, consideration should be given to promoting the program across key service agencies, with clear communication on the specific roles and functions of the program. Promotions and clear communications would help to stimulate referrals of priority families to the program and could help to mitigate or avoid redundancy or overlap in service provision.

- Enhanced data tracking and further research would be helpful for strengthening the evidence base for the ongoing and future assessment of effectiveness. Some consideration should be given, for example, to tracking impact using brief, POW-administered intake and follow-up questionnaires on specific risk factors such as parental stress or knowledge of available services.

- The possibility of having POWs administer child development and wellbeing screening tools (e.g., Nipissing District Developmental Screening tool) should be explored as a means of extending early screening and assessment to more vulnerable
children, and as a base of data for measuring program outcomes and population well-being in the target neighbourhoods.

- Relatedly, a more nuanced way of tracking families through their involvement with the POW program in terms of the risks or challenges being identified would considerably strengthen stakeholders’ ability to understand and assess program impact. Such tracking could consist of descriptive (qualitative) case studies of illustrative families (with the consent of those families).

- Conducting a survey of anonymous users of the POW program to understand their experiences with the POW program relative to their needs, and to assess the program's impact on them would be a useful and valuable next step in determining program relevance and impact.

- Another next step in evaluation planning would be to establish the protocols and agreements needed to access and use the relevant data being gathered by the various service systems for long-term tracking of neighbourhood-level outcomes. These data could include specific measures such as the EDI and early child development measures implemented through the Public Health system, as well as service-related data (aggregated at a neighbourhood level) that is routinely gathered by Family & Children's Services, GCHC, the City of Guelph and other local service providers. Such a research agenda would require considerable resources and may require the engagement of an academic research partner.

### 4.3 Reach & Efficiency

Since the program began in November 2012, the two POWs have worked with 111 registered families, including 327 individuals, as well as an estimated 45 additional families who have worked with the POWs as anonymous clients. Program uptake, moreover, has grown consistently in every quarter so far. The POWs have recorded 1,465 encounters with clients and have conducted outreach activities with a cumulative attendance of over 3,000 people (total attendance, including repeat attendees, not unique individuals). Additionally, the POWs have engaged with a broad range of community-based and formal-system service providers as a means of reaching priority families and as a means of facilitating access to services. Through these activities the POW program has contributed to a range of outcomes (improvements) at the family level, and has contributed to some broader changes at the community level as well.

Program stakeholders and partners may draw their own conclusions from these findings, but our assessment is that the POW program has achieved impressive reach in a very short period of time with modest resources.

Program stakeholders and partners can also draw their own conclusions of cost-effectiveness. Again, given the program’s reach, given the many ways in and the effectiveness with which the POW program is building multi-faceted support around priority families (including many with
young children), and in light of the literature regarding the cost-effectiveness of similarly-focused, neighbourhood-based interventions, our assessment is that this program promises significant pay-off in the long term. Based on the evidence we have to date on the program's functioning and impacts, the POW program appears to have considerable potential to generate savings and efficiencies in formalized health and social services systems over time, and to mitigate the costs of vulnerability by supporting healthy development and the realization of human potential in the target neighbourhoods.

4.4 Sustainability

Sustainability of impacts

The evidence we have seen suggests that many of the benefits the POW program is generating for priority families will have a permanent or lasting effect. POWs have, in many instances, facilitated that crucial first connection to support programs and services, helping families to overcome or work through a lack of information, a sense of fear, lack of trust, intimidation, anxiety, confusion, or inertia, logistical challenges and other barriers to service access. For some types of services, POWs may continue to support families with service access or use issues over time, but in many cases (especially in regards to accessing direct supports for basic needs) the initial connection leads to ongoing support without further POW intervention. Similarly, the POW program assists parents in building specific skills (e.g., parenting skills) and bolsters self-esteem and a sense of empowerment among at least some parents.

In short, while it is in itself a direct support for priority families, the greater part of the POWs' impact appears to be in building skills within priority families and in working with the resources that exist in the community to build supports around them that will continue to address their needs over time.

Sustainability of the program

This initial, pilot period of the POW program has been financed by one-off contributions of cash and in-kind by the coordinating partners. To continue, let alone to grow, evolve and expand, the POW program will require new commitments of funding.

Recommendations:

- Secure new commitments of funding to ensure the sustainability of the program.

4.5 Conclusions

The data gathered over the course of this evaluation leave many questions unanswered. The data provide little specificity in regards to the quantitative impact of the program and we cannot say definitively that the program is benefiting all priority families in the neighbourhood
evenly. Nonetheless, even with these data limitations, it is clear to us that the POW program occupies an important space that exists in marginalized communities between the formal service sector, the informal community sector, and the families most in need of support, and that it is generating very significant outcomes for priority families as direct supports and as intermediaries between those families and the community resources they need.

Program stakeholders may wish to critically examine particular elements of this program, to establish clarity and consensus in elements of its theory of change or its methods, and to closely monitor the evolution and impact of this program over the short and medium term. Our overall assessment, however, is not only that the POW program is innovative, but also that it is effective and has considerable additional potential that can only be realized through further investment and further development.

**Recommendations:**

- Even if not definitive in all respects, the evaluation data affirm the POW program as it has evolved with enough confidence to recommend that it be enabled to continue developing toward gradual expansion to other target neighbourhoods in Guelph.

- Continued development of monitoring and evaluation practice, and the engagement of research partnerships for longer-term, neighbourhood-level impact studies, will be helpful in governing the program's development over time, in disseminating best practices and program innovations to other jurisdictions, and in demonstrating impact to prospective partners and funders.


StatsCan (2013). Statistics Canada Table 202-0802 – catalogue no. 75-202-XIE. "Persons in low income before tax, by prevalence in percent," Available online at:
http://www.statscan.ca/english/Pgdb/famil41a.htm


Appendices

Appendix A: Sample Interview Protocol

Key Informant Interview: SERVICE USERS

1. Thank you for taking the time to talk to us about the Parent Outreach Worker Program. We are interested in the experiences of people like you because they will help us to understand the impact of the program and how it might be improved over time. The Parent Outreach Workers are in your neighbourhood to help families like yours get the supports, services, and opportunities you need to have a happy and healthy life.

So I’d like to start by hearing what your experience with the Parent Outreach Worker program has been like.

- Have you found the Parent Outreach Worker Program helpful?
- How long/how much have you been using this program?

Protective Factors: Social Support and Concrete Supports (Informal Supports)

2. We want to start by talking about informal supports – like friends, helpful neighbours, and family members, or other people or groups in the community like churches, clubs, the neighbourhood group, etc.? Supports that are not part of a formal service or program (like the Parent Outreach Worker).

   a. Would you say that you have a lot of informal supports, or not very many at all, or...?
      i. What kinds of people? What kinds of groups?
      ii. Are you connected at all to the Neighbourhood Group, or take part in any of the activities they organize?

   b. Do you think your network of informal supports in your life changed at all since the Parent Outreach Worker program started in your neighbourhood?
      i. Do you have any stories or examples about how the Parent Outreach Worker program has changed the number/kinds of informal supports in your life?
      ii. Have you met new people/made new friends through the Parent Outreach Worker Program or things the Parent Outreach Worker has encouraged you to do? Such as?

Protective Factors: Social Support and Concrete Supports (Formal Supports)

3. Do you feel more connected to useful services and supports, for you and/or your children, since the Parent Outreach Worker Program started in your neighbourhood?

   a. Do you feel like you know any more about the services and supports that are available to you and your children than you did before the Parent Outreach Worker Program started?
   b. Have you noticed any changes in your ability to get those services when you need them (i.e., soon after you identified an issue and/or while your kids are still young)?
      o Are you any more connected to services and supports than you were before the Parent Outreach Worker Program started?
   c. In what ways, if at all, have the Parent Outreach Workers helped you to get services and/or to get services when you need them (i.e., soon after you identified an issue and/or while your kids are still young)?
   d. Can you share some examples of services or supports that you learned about, that you got connected to, and/or that got working for you faster through the help of the Parent Outreach Workers?

Protective Factors: Social Support and Concrete Supports (Mutual Aid)

4. Generally speaking, do you find that people in this neighbourhood know each other and help each other out?

3 Interview and focus group protocols were based around the same core questions, but differed slightly for each stakeholder group.
a. Can you think of a recent time when you benefited from this kind of mutual support among neighbours? Or when you helped someone else out?
   i. Do you have any stories about when you were helped or supported by someone in your community?
   ii. Do you have any stories about when you helped or supported someone in your community?
b. Have you noticed any changes in how you and the people you are connected with in your community help and support one another since the Parent Outreach Worker program started in your neighbourhood?
   i. From what you can see so far, do you think the Parent Outreach Worker Program has helped or inspired neighbours to help each other out in any way? Can you think of any specific examples?

**Protective Factors: Social Support and Concrete Supports (Basic Needs)**

5. One specific area I am interested in is about how you are able to get things like healthy food, housing that meets your needs, transportation to places you need to go, school supplies for your kids. All the things you need for daily life.

   a. Do you feel that your family has all these things?
   b. Has the Parent Outreach Worker been a part of helping you to get these things?
   c. Can you give examples?
   d. If no, what do you think would help you to meet your basic needs? Can you imagine services or supports from community groups that might help?

**Protective Factors: Family functioning/resiliency:**

6. Do you feel that people within your family look out for each other?
   a. Do you have an example or story?
   b. Has how well or the way your family looks out for each other changed since you started using the POW program?

7. Do you feel that your family has what they need to help each other through tough times?
   a. Do you have an example or story?
   b. Has the Parent Outreach Worker been there and been helpful to you and your family during tough times? If so...
      i. How has it helped?
      ii. Has how well or the way your family pulls through hard times changed since you started using the POW program?
         • Have you learned about new things or developed new coping strategies or whatever that help your family pull through hard times?
         • Do you have an example or story about how the POW program has been helpful in that way?

**Protective Factors: Child Development and Knowledge of Parenting**

8. Do you feel like you know where to go or who to talk to if you feel you need help parenting or being a parent?

9. Do you know where to go, or who to talk to, to help your child learn?
   a. Do you feel like you have people you can talk to about these kinds of things?

10. Who/what kinds of people do you go to when you need help with parenting or with helping your children to learn?
    a. What about the POW?
       i. Is this someone you feel you can go to with these kinds of issues?
       ii. Have there been any times when the POW has helped you with any kinds of parenting issues?
          • Can you give examples?

**Protective Factors: Nurturing and Attachment**

11. What kinds of things do you do to connect or spend special time with your kids?
12. When your child is upset, do you feel like you know what to do to help him/her feel better?
   a. Has the Parent Outreach Worker been a part of helping you connect with and soothe/comfort your kids?
   b. Can you give examples?

13. Before we wrap-up, is there anything else you want me to know about the Parent Outreach Worker Program and your experience with the program in your neighbourhood?
   - Feel free to talk about successes, challenges, strengths, weaknesses, good or bad things or anything else you think I should know in order to really understand this program.
Appendix B: Information for Participants Memo

INFORMATION FOR RESEARCH PARTICIPANTS

Project Title: Evaluation of the Parent Outreach Worker Program, Guelph, Ontario
Principal Investigator: Robert Case, PhD, Department of Social Development Studies (519-884-4404 Ext. 28683 racase@uwaterloo.ca)
Program Contact: Kate Vsetula, Community Health Manager, Guelph Community Health Centre

Purpose of the study:
The purpose of the study is to evaluate how well the Parent Outreach Worker Program is working so far, to understand how it might be strengthened and developed over time, and to share insights and best practices with others who might be interested in developing similar programs or approaches.

Specifically, the findings of the interviews will be used in these three ways:
(1) by Parent Outreach Workers and their managers to strengthen the program,
(2) by funders and other potential partners to make informed decisions about the level of support to dedicate to the Parent Outreach Worker Program, and
(3) in academic publications, as a way to share lessons learned from the Parent Outreach Worker Program with academics and other people or organizations trying to implement similar programs.

In all reports and publications of this evaluation project, the anonymity of those who participate in interviews will be protected.

Methods and Procedures
This evaluation process (February-June, 2014) involves "key informant" interviews with about 15 parents or other representatives of families (including you) who have had some experience working with Parent Outreach Workers in the Brant Avenue or Two Rivers Neighbourhoods of Guelph.

These interviews will be fairly informal discussions based around questions we have prepared about different aspects of the Parent Outreach Worker Program. Each interview will take approximately 60-90 minutes, and will be done at the offices of the Neighbourhood Group nearest you.

To get a variety of perspectives, we will also be interviewing or surveying other parents and a variety of other people in the community who might know something about the Parent Outreach Worker program (e.g., Neighbourhood Group leaders and staff, other social services people, community leaders, etc.).

Once we have completed all the interviews, we will put them all together to look for themes in them that give us insight about how well the program is working, where the program is not meeting your needs, and how the program might be changed to better support families who are struggling.
In appreciation of the time you have given to this study, you will be given a $10 gift certificate for Tim Hortons with a value of $10. The amount received is taxable. It is your responsibility to report this amount for income tax purposes.

**Research Reporting**

The findings of this evaluation will be compiled into a report that will be given to the Parent Outreach Workers and their managers, to funders and other potential supporters of the program, and to anyone who is involved in the evaluation process (like you) who would like a copy. Copies may be requested through the Parent Outreach Workers, or by emailing Robert Case at the email noted above. We anticipate that the report will be completed and available by June 2014.

Insights generated by the evaluation and some evaluation findings will also be submitted for publication in academic journals related to community development, public health, or family intervention. The success of these submissions and the timing of publication are difficult to predict. Those interested should contact Robert Case (see contact information above).

**Ethical Considerations**

**Confidentiality:** We will protect the confidentiality of research participants and any individuals named in the interviews by (1) storing the data in a secure, locked location that can be accessed only by the Principal investigator, (2) replacing names with codes for the purposes of data analysis and in any public documentation, (3) storing documents containing names and other identifying information in a secure location separate from data analysis and reporting documents, and (4) only identifying the source of quotations or ideas reported in research documents with the specific consent of the interviewee after vetting the text in question.

Notes and recordings of your interview will be stored for two years, after which they will be shredded or otherwise destroyed. Notes and recordings of your interview will be available to and used only by the research team, and will not be played or made available to the public or anyone outside the research team.

Please note that we will take measure to make sure no one outside of the research team ever gets to know what you say in your interview (not even the Parent Outreach Worker herself), but because we are holding the interviews at the Neighbourhood Group offices, we cannot guarantee that no one will know that you participated in an interview. If that level of confidentiality is important to you, please let the researcher know so we can make alternative arrangements for your interview in a more private setting.

**Voluntary participation.** Participation in this study is voluntary. You have every right to not participate, to refuse to answer specific interview questions, or to withdraw from the study at any time without penalty or consequence. Whether or not you agree to participation in this evaluation will have no impact whatsoever on the services you receive through the Parent Outreach Worker Program or any other service or program in the community.

**Ethics contact**

This project has been reviewed and received ethics clearance from a University of Waterloo Research Ethics Committee. If you feel you have not been treated according to the descriptions above, or that your rights as a participant in research have been violated during the course of this project, you may contact Director Maureen Nummelin, Office of Research Ethics, University of Waterloo at (519) 888-4567 ext. 36005 or by email at maureen.nummelin@uwaterloo.ca.

**Contact**

If you have questions at any time about the study or the procedures, please contact Robert Case (Principal Investigator) at (519-884-4404 Ext. 28683 racase@uwaterloo.ca)
Appendix C: Informed Consent Form

INFORMED CONSENT FOR RESEARCH INTERVIEW

Project Title: Evaluation of the Parent Outreach Worker Program, Guelph, Ontario
Principal Investigator: Robert Case, PhD, Department of Social Development Studies (519-884-4404 Ext. 28683 racase@uwaterloo.ca)
Co-Investigator: Kate Vsetula, Community Health Manager, Guelph Community Health Centre

Thank you for considering participation in this evaluation project. Your participation in this study is completely voluntary, and the purpose of this form is to ensure that all ethical considerations related to your participation have been explained to you. If you have not done so already, please take a moment to read the enclosed “Information For Participants” memo.

The Research Interview
The research activity you are being asked to participate in is an interview in which you will be asked questions about your experiences of the Parent Outreach Worker Program.

The interview itself will take approximately 60-90 minutes to complete and, with your consent (your permission), will be recorded on an audio digital recorder. Only the researchers will ever hear the recordings or see the notes from this interview, and these data will be used only for the purposes of the study outlined in the “Information for Participants” memo. Your confidentiality will be safeguarded as described in the “Information for Participants” memo.

In appreciation of the time you have given to this study, you will be given a gift certificate for Tim Horton’s with a value of $10. The amount received is taxable. It is your responsibility to report this amount for income tax purposes.

Use of Your Comments
In some cases, the researcher may wish to use direct quotations from your interview to illustrate findings in a research report or presentation. In such cases, no information will be included with the quotation that will enable anyone to identify you as the source of the quotation. On the other side of the page you will be asked to indicate whether or not you consent to the use of direct quotations from your interview in this way.

Your Consent
Signing on the back of this form indicates that you have read the “Information For Participants” memo and the information above, and that you freely and willingly agree to participate in an interview for this research project. Even after signing this document, nonetheless, you are still free to refuse to answer specific research questions or to withdraw your participation entirely at any time.
CONSENT FORM

By signing this consent form, you are not waiving your legal rights or releasing the investigator(s) or involved institution(s) from their ethical, legal or professional responsibilities.

I have read and I understand the above information and the information in the “Information For Participants” memo about a study being conducted by Dr. Robert Case of the Department of Social Development Studies at Renison University College (at University of Waterloo). I have had the opportunity to ask questions related to this study and to receive satisfactory answers to my questions.

- I am aware that I have the option of not allowing my interview to be audio recorded.
- I am also aware that excerpts from the interview may be included in the thesis and/or publications to come from this research, with the understanding that the quotations will be anonymous.
- I was informed that I may withdraw my consent at any time without penalty by advising the researcher.

With full knowledge of all foregoing, I agree, of my own free will, to participate in this study.

[ ] YES  [ ] NO

I agree to the use of anonymous quotations in any thesis or publication that comes of this research.

[ ] YES  [ ] NO

I agree to have my interview audio recorded.  [ ] YES  [ ] NO

Participant Name: ____________________________ (Please print)

Signature: ____________________________ Date: ________________

Witness Name: ____________________________ (Please print)

Signature: ____________________________ Date: ________________

This project has been reviewed and received ethics clearance from a University of Waterloo of Research Ethics Committee. If you feel you have not been treated according to the descriptions above, or that your rights as a participant in research have been violated during the course of this project, you may contact Director Maureen Nummelin, Office of Research Ethics, University of Waterloo at (519) 888-4567 ext. 36005 or by email at maureen.nummelin@uwaterloo.ca.