



**The Ohio State University  
Center for Family Research**

**Report on FAST\$05 Outcomes Data**

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## Executive Summary

- The Center for Family Research was contracted by the Ohio Departments of Mental Health, Job and Family Services, Youth Services, and Alcohol and Drug Addiction Services in order to conduct an evaluation of the FAST\$05 Program.
- There are three main focal points in the present report:
  - The measurement of family empowerment and its impact on family satisfaction with services
  - The identification of threats to family stability and the association between these threats and risk of out-of-home placement
  - The assessment of youth well-being indicators at time of enrollment and termination.
- Out of 2,160 youth enrolled in FAST\$05, a total of **517 youth were terminated** in MACSIS at the time (November 23, 2005) that data were collated for this report.
- Regarding the measurement of family empowerment, a total of 210 adult family caregivers completed Family Caregiver Wants and Needs Scale (FCWNS) forms at time of enrollment and termination. Evidence indicated that participation in the FAST\$05 program **significantly increased family empowerment** ( $t = 3.83, p < .001$ ).
- In addition, data from 102 families indicated that **family empowerment gains were significantly associated with increased family satisfaction with services** ( $r = .33, p < .01$ ) as measured by the Ohio Scales at the time of termination from FAST\$05.
- Data from the families of 405 youth indicated that there was a **significant reduction (73%) in out-of-home placement risk** (McNemar's  $\chi^2 = 8.69, p < .01$ ) from time of enrollment to time of termination.
- While these families were facing a pile-up of stressors at the time of enrollment, data from 236 families generated evidence that **participants reported significant reductions in family stressors** ( $t = 9.82, p < .001$ ) following their participation in the FAST\$05 Project.
- Also, there were **significant differences in the amount of stressors** faced by families with youth who were at risk of out-of-home placement and those with youth who were not ( $t = 2.15, p < .05$ ), further highlighting the important association between family stressors and threats to family stability.
- Regarding Ohio Scales scores:
  - Youth reported a **significant decrease in problem severity levels** ( $t = 3.02, p < .01$ ) from time of enrollment to time of termination
  - Parents reported a **significant increase in hopefulness** ( $t = 4.43, p < .001$ ), a **significant increase in functioning levels** ( $t = 3.24, p < .001$ ), a **significant increase in satisfaction with services** ( $t = 2.77, p < .01$ ), and a **significant decrease in problem severity levels** ( $t = 3.62, p < .001$ ) from time of enrollment to time of termination.
  - Workers reported a **significant increase in functioning levels** ( $t = 4.08, p < .001$ ) and a **significant decrease in problem severity levels** ( $t = 5.01, p < .001$ ) from time of enrollment to time of termination.
- Taken together, these results indicate that participation in the FAST\$05 program coincided with **solid gains in family and youth well-being indicators**.



### **The Ohio State University's Center for Family Research**

The Center for Family Research (CFR) is co-directed by Dr. Stephen Gavazzi of the College of Human Ecology and Dr. Scott Scheer of the College of Food, Agricultural, and Environmental Sciences. The CFR is dedicated to the advancement of scholarship efforts that: a) focus specifically on the context of the family; b) are interdisciplinary in nature; c) are competitive for state and federal funding; d) provide high quality undergraduate and graduate student experiences; and e) serve as a catalyst for outreach and engagement strategies to strengthen individuals and families through research-based educational programming. Ultimately, the goal of the CFR is to create a research program that would take its place at the helm of the land-grant university mission in the 21<sup>st</sup> century – providing practical knowledge about families to citizens in Ohio and beyond— while concurrently increasing the public's access to Ohio State's community of scholars.

In essence, involvement in this evaluation effort represents an important formative step toward a very important public-public partnership between OSU and the state agencies and organizations that participated in the FAST\$05 Program. Among other things, this effort is thought to establish the foundation for more comprehensive alliances to be systematically built among these partners in order to meet both their unique and overlapping empirical needs concerning the well-being of Ohio's families.

## Introduction

The FAST\$05 Project was funded by support from the Ohio Departments of Mental Health, Job and Family Services, Youth Services, and Alcohol and Drug Addiction Services. This support was meant to be distributed to local service providers in order to facilitate three main program activities (systems collaboration, service enhancement, and family empowerment) that, in turn, would lead to long term outcomes associated with increased family satisfaction with services, increased likelihood of family preservation, and the increased well-being of youth. The Center for Family Research (CFR) at The Ohio State University was contracted to conduct an evaluation of the FAST\$05 Project in order to generate important information about the effective use of state support in meeting the needs of Ohio families containing children and adolescents with significant behavioral health needs.

Out of 2,160 youth enrolled in the FAST\$05 Project, a total of 517 youth were terminated in MACSIS at the time (November 23, 2005) that data were collated for this report.

There are three major focal points contained in the present report:

1. The measurement of family empowerment at time of enrollment and termination from the FAST\$05 Program, and the relationship between family empowerment and family satisfaction with services
2. The identification of threats to family stability and the association between these threats and risk of out-of-home placement
3. The assessment of youth well-being indicators at time of enrollment (Time 1) in the FAST\$05 project and re-assessment at time of termination (Time 2).

## The Measurement of Family Empowerment and its Impact on Family Satisfaction with Services

Family Caregiver Wants/Needs: This variable is concerned with the wants and needs of adult family caregivers. Research regarding the impact of providing care for a child or adolescent with significant behavioral health needs indicates that a number of variables are of particular importance regarding caregiver wants and needs, including information about behavioral health issues and their treatment, coping skills, social support, and attitude/advocacy issues.

A set of items were adapted from the psychoeducational work of Fristad and Gavazzi<sup>1</sup> in order to measure this baseline variable. The resulting Family Caregiver Wants and Needs Scale (FCWNS) for Time 1 and Time 2 can be found in Appendix 1. The items assessed the caregiver's access to services and professionals that were supportive, non-blaming, and otherwise contributed to the belief that family members were given a "voice" in the planning and treatment process.

### Sample

A sample of  $n = 210$  family caregivers completed Time 1 and Time 2 FCWNS forms. The average age of the focal child was 12.1 years ( $SD = 3.6$ ). There were 137 male (65%) and 73 (35%) female focal children. The sample was 80% Caucasian, 16% African American, and 14% other.

### Reliability

Cronbach's alpha for the 13 items was .92 at Time 1 and .93 at Time 2, displaying evidence of solid inter-item reliability.

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<sup>1</sup> Goldberg-Arnold, J. S., Fristad, Mary A., & Gavazzi, S. M. (1999). Family psychoeducation: Giving caregivers what they want and need. **Family Relations**, 48, 411-417.

### Program Impact on Family Empowerment

A paired samples t-test was conducted with the FCWNS scores. There was a significant increase ( $t = 3.83$ ,  $p < .001$ ) in family empowerment from time of enrollment ( $\bar{x} = 43.8$ ) to time of termination ( $\bar{x} = 47.9$ ), generating evidence that the FAST\$05 program was in fact able to facilitate family empowerment.

### Further Analyses

A sub-sample ( $n = 102$ ) of these caregivers also filled out the Family Satisfaction subscale of the Ohio Scales (OH-FS) at the time of termination from the FAST\$05 program. Correlational analyses revealed a significant association ( $r = .33$ ,  $p < .01$ ) between FCWNS and OH-FS scores, further underscoring the relationship between family empowerment efforts and consumer satisfaction with service provision.

### **The Identification of Threats to Family Stability and the Association Between These Threats and Risk of Out-of-Home Placement**

It was reported previously<sup>2</sup> that **74% of the youth were at-risk of placement** at the time of enrollment in the FAST\$05 Program. Of these youth, the percentages of risk of placement by category were described as follows:

- 30% were at risk due to abuse/dependency/neglect issues.
- 24% were at risk due to inpatient mental health treatment needs.
- 22% were at risk due to juvenile detention/crisis stabilization needs.
- 20% were at risk due to criminal activity.
- 11% were at risk due to the relinquishment of custody in order to receive behavioral help.
- 6% were at risk due to Residential School needs.
- 2% were at risk due to inpatient AOD treatment needs.

#### Threat of Placement at Enrollment and Termination

Information on threat of out-of-home placement at time of enrollment (Time 1) and termination (Time 2) was available on 405 youth. The data indicated that a total of 302 youth (75%) were at risk of out-of-home placement at the time of enrollment in the FAST\$05 Project, almost exactly the same percentage as in the overall sample of youth enrolled in this program.

**Table 1: Risk for out-of-home placement at enrollment and termination**

Out-of-home placement risk		At risk at termination		Total
		NO	YES	
At risk at enrollment	NO	90	13	103
	YES	221	81	302
Total		311	94	405

<sup>2</sup> Center for Family Research *Final Report on FAST\$05 Activities* (July 8, 2005)

As Table 1 indicates, a total of 221 youth were no longer at risk of placement outside of the home at the time of termination from the FAST\$05 Project, a 73% reduction in risk status that was statistically significant (McNemar's  $\chi^2 = 147.85$   $p < .001$ ).

While 90 youth who were not at risk of placement at enrollment remained not at risk, there were 13 youth (13%) who moved into the risk of out-of-home placement category. Interestingly, the families of 11 out of those 13 youth did not have a parent advocate available to them during their program involvement, a difference in risk status that was statistically significant ( $\chi^2 = 10.71$ ,  $p < .001$ ).

Threats to Family Stability: Measurement of potential threats to family stability focused on cataloguing the various changes in family circumstances that lead to the pile-up of stresses and strains experienced by family members. Research indicates that changes in family circumstances – such as job loss, reductions in income, elimination of health care benefits, separation and divorce, and lost contact with family members due to incarceration, hospitalization, and death – each can have a significant negative effect on the well-being of children and adolescents.

A set of items were adapted from the work on transitional risks conducted by Patterson and colleagues<sup>3</sup> (Patterson, Bank, & Stoolmiller, 1990) in order to measure this variable in the FAST\$05 Project Evaluation. The Family Stability Scale (FSS) can be found in Appendix 2. For purposes of the present analyses, the first eight items were used to calculate an overall threat to family stability.

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<sup>3</sup> Patterson, G. R., Bank, L., & Stoolmiller, M. (1990). The Preadolescent's Contributions to Disrupted Family Process. In R. Montemayor, G. R. Adams, & T. P. Gullotta (Eds.), **From Childhood to Adolescence: A Transitional Period?** Sage: Thousand Oaks, CA.

### Sample

A sample of  $n = 236$  family caregivers completed Time 1 and Time 2 FSS forms. The average age of the focal child was 12.3 years ( $SD = 3.6$ ). There were 159 male (67%) and 77 (33%) female focal children. The sample was 83% Caucasian, 14% African American, and 13% other.

### Frequency of Occurrence: Pile-Up of Family Stressors

Table 2 contains the percentages of family stressors at time of enrollment (Time 1) and time of termination (Time 2). It is instructive to note that the data at time of enrollment strongly suggests a “pile up” of family stressors. In fact, families on average were experiencing between two and three major stressors at time of enrollment.

**Table 2: Percentages of stressors**

Type of stressor	Time 1	Time 2
Major change in family routine	56%	33%
Unemployment/significant income loss	41%	19%
School change	40%	26%
Residential move	39%	22%
Lost access to parent	23%	12%
Insurance problems	22%	9%
Separation/divorce	20%	7%
Death of close family member	15%	6%

### Program Impact on Family Stressors

A paired samples  $t$ -test was conducted with the FSS scores. There was a significant decrease ( $t = -9.82$ ,  $p < .001$ ) in family stressors from time of enrollment ( $\bar{x} = 2.58$ ) to time of termination ( $\bar{x} = 1.34$ ), generating evidence that participation in the

FAST\$05 program coincided with reduced stress reported by the families involved in this project.

The FSS scores at time of termination were used to compare stressors faced between families of youth who were at-risk of out-of-home placement and those who were not. T-test analyses revealed significant differences ( $t = 2.15$ ,  $p < .05$ ) between the number of stressors faced by families with youth who were at-risk of out-of-home placement at time of enrollment ( $\bar{x} = 1.23$ ) and those youth who were not facing possible placement ( $\bar{x} = 1.75$ ), further highlighting the association between family stressors and threats to family stability.

## Outcomes Indicators at Enrollment and Termination: A Comparison of Ohio Scales Scores

### The Ohio Scales

The Ohio Department of Mental Health maintains a statewide data system in order to measure outcomes related to the provision of behavioral health care. Contained within this Ohio Mental Health Consumer Outcomes System<sup>4</sup> is a set of measures known collectively as the Ohio Scales, which include sub-scales that specifically assess domains associated with “Problem Severity,” “Functioning,” “Hopefulness,” and “Satisfaction.” Three parallel forms of the Ohio Scales have been constructed that are designed to be completed by the youth, the youth's primary caretaker, and primary agency worker.

### Sample

The overall compliance rate regarding use of at least one Ohio Scales form at time of enrollment was 63% across counties for the FAST\$05 Project period. As will be seen below, even smaller rates of compliance regarding use of these forms occurred at time of termination; further, even when an attempt was made to complete one form, not all sub-scales of the form were completed. These inconsistent compliance efforts resulted in fluctuating numbers of responses as follows:

Youth paired responses:

Hopefulness	$\underline{n} = 82$	(Time 1 mean: 9.62; Time 2 mean: 9.37)
Functioning	$\underline{n} = 95$	(Time 1 mean: 56.69; Time 2 mean: 58.57)
Satisfaction	$\underline{n} = 75$	(Time 1 mean: 9.07; Time 2 mean: 9.01)
Problem severity	$\underline{n} = 98$	(Time 1 mean: 22.21; Time 2 mean: 17.47)

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<sup>4</sup> Please go to <http://www.mh.state.oh.us/oper/outcomes/outcomes.index.html> for more information about the Ohio Mental Health Consumer Outcomes System.

## Parent paired responses:

Hopefulness	$n = 126$	(Time 1 mean: 13.25; Time 2 mean: 11.13)
Functioning	$n = 134$	(Time 1 mean: 41.75; Time 2 mean: 46.30)
Satisfaction	$n = 113$	(Time 1 mean: 7.83; Time 2 mean: 6.76)
Problem severity	$n = 135$	(Time 1 mean: 29.94; Time 2 mean: 24.37)

## Worker paired responses:

Functioning	$n = 108$	(Time 1 mean: 40.28; Time 2 mean: 45.65)
Problem severity	$n = 111$	(Time 1 mean: 29.38; Time 2 mean: 21.97)
Roles	$n = 92$	(Time 1 mean: 2.71; Time 2 mean: 2.66)

When examining these mean scores, the reader should keep in mind the directionality of the sub-scales. In commonsense fashion, improvement in problem severity is indicated by lower scores, and improvement in functioning levels is indicated by higher scores. Counter-intuitively, however, improvements in hopefulness and satisfaction are indicated by lower scores. Finally, as the Roles sub-scale concerns “restrictiveness of living environment,” improvement is indicated by lower scores (i.e., less restrictive environment).

### Program Impact on Youth Well-Being

Paired samples  $t$ -tests were conducted with the Ohio Scales scores. For youth reports, there was a significant decrease in problem severity levels ( $t = 3.02$ ,  $p < .01$ ) from time of enrollment to time of termination. For parent reports, there was a significant increase in hopefulness ( $t = 4.43$ ,  $p < .001$ ), a significant increase in functioning levels ( $t = 3.24$ ,  $p < .001$ ), a significant increase in satisfaction with services ( $t = 2.77$ ,  $p < .01$ ), and a significant decrease in problem severity levels ( $t = 3.62$ ,  $p < .001$ ) from time of enrollment to time of termination. For worker reports, there was a significant increase in

functioning levels ( $t = 4.08$ ,  $p < .001$ ) and a significant decrease in problem severity levels ( $t = 5.01$ ,  $p < .001$ ) from time of enrollment to time of termination.

### Summary

Taken together, these results indicate that participation in the FAST\$05 program coincided with solid gains in both family and youth well-being indicators. At the same time, it is important to note that only 24% of the youth enrolled in the FAST\$05 Program were terminated at the time that data were compiled for purposes of this report. Further limitations on the generalizability of these findings comes from the smaller and fluctuating numbers of cases that contained Time 1 and Time 2 data on variables of interest to this evaluation.

## Appendix 1

### Family Caregiver Wants and Needs Scale (FCWNS)

Youth MACSIS # \_\_\_\_\_

**In the last six months, have you had access to any or all of the following?**

	<b>A great deal</b>	<b>Moderately</b>	<b>Quite a bit</b>	<b>Somewhat</b>	<b>A little</b>	<b>Not at all</b>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>0</b>
1. A physician or other health care professional who seemed to believe there is something medically wrong with your child?	5	4	3	2	1	0
2. Someone who was responsive to your questions and concerns about medications for your child?	5	4	3	2	1	0
3. A mental health professional who did not blame you for causing your child's problems?	5	4	3	2	1	0
4. Someone who seemed to "understand your point of view" in dealing with problems and concerns arising from services or treatment for your child?	5	4	3	2	1	0
5. Resources that have provided you with helpful information on how to deal with your child's problems?	5	4	3	2	1	0
6. Someone who gave you "tips" about getting your child the help they need?	5	4	3	2	1	0
7. Services that could assist you in helping your child?	5	4	3	2	1	0
8. Someone who helped you deal with the stigma of having a child with difficulties?	5	4	3	2	1	0
9. Support that meets my family's needs?	5	4	3	2	1	0
10. Someone who made you feel you are not alone?	5	4	3	2	1	0

**In the last six months, to what extent:**

11. Were your family's values and culture taken into account when planning for your child?	5	4	3	2	1	0
12. Were the needs/circumstances of your family considered in this planning?	5	4	3	2	1	0
13. Were you able to influence planning for your child's treatment or services?	5	4	3	2	1	0

**POST- Family Caregiver Wants and Needs Scale (FCWNS)**

Youth MACSIS # \_\_\_\_\_

**During the time the youth/family was enrolled in FAST\$05, have you had access to any or all of the following?**

	<b>A great deal</b>	<b>Moderately</b>	<b>Quite a bit</b>	<b>Somewhat</b>	<b>A little</b>	<b>Not at all</b>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>0</b>
1. A physician or other health care professional who seemed to believe there is something medically wrong with your child?	5	4	3	2	1	0
2. Someone who was responsive to your questions and concerns about medications for your child?	5	4	3	2	1	0
3. A mental health professional who did not blame you for causing your child's problems?	5	4	3	2	1	0
4. Someone who seemed to "understand your point of view" in dealing with problems and concerns arising from services or treatment for your child?	5	4	3	2	1	0
5. Resources that have provided you with helpful information on how to deal with your child's problems?	5	4	3	2	1	0
6. Someone who gave you "tips" about getting your child the help they need?	5	4	3	2	1	0
7. Services that could assist you in helping your child?	5	4	3	2	1	0
8. Someone who helped you deal with the stigma of having a child with difficulties?	5	4	3	2	1	0
9. Support that meets my family's needs?	5	4	3	2	1	0
10. Someone who made you feel you are not alone?	5	4	3	2	1	0

**During the time the youth/family was enrolled in FAST\$05, to what extent:**

11. Were your family's values and culture taken into account when planning for your child?	5	4	3	2	1	0
12. Were the needs/circumstances of your family considered in this planning?	5	4	3	2	1	0
13. Were you able to influence planning for your child's treatment or services?	5	4	3	2	1	0

## Appendix 2

### Family Stability Scale (FSS)

Youth MACSIS # \_\_\_\_\_

1. Has the family experienced a parental separation or divorce in the household in the last year?
  - a. No
  - b. Yes
2. Has the child lost access to a parent in the last year because the parent was incarcerated, hospitalized, or moved away?
  - a. No
  - b. Yes
3. In the last year, has the child experienced the death of any close family member?
  - a. No
  - b. Yes
4. Has the child changed schools (buildings/districts) in the last year?
  - a. No
  - b. Yes
5. Has the child moved to a new home or neighborhood in the last year?
  - a. No
  - b. Yes
6. Has a parent lost their job, was unemployed, or lost significant amount of income for more than 3 months during the past year?
  - a. No
  - b. Yes
7. Have any problems with health or mental health insurance coverage developed over the past year?
  - a. No
  - b. Yes
8. Have you experienced a major change in family routine or schedule in the past year?
  - a. No
  - b. Yes
9. Has this child been involved in any type of out-of-home placement in the past year?
  - a. No
  - b. Yes
10. If Yes on #9, check all issues that apply:
  - Abuse/dependency/neglect
  - Criminal activity
  - Juvenile detention/crisis stabilization
  - In-patient treatment/mental health
  - In-patient treatment/AOD
  - Residential school
  - Relinquishment of custody in order to receive behavioral health care
11. If services are not received through the FAST project, is this child currently at risk for out-of-home placement?
  - a. No
  - b. Yes
12. If Yes on #11, check all issues that apply:
  - Abuse/dependency/neglect
  - Criminal activity
  - Juvenile detention/crisis stabilization
  - In-patient treatment/mental health
  - In-patient treatment/AOD
  - Residential school
  - Relinquishment of custody in order to receive behavioral health care

**POST- Family Stability Scale (FSS)**  
Youth MACSIS # \_\_\_\_\_

1. Has the family experienced a parental separation or divorce since the time they were enrolled in FAST?
  - a. No
  - b. Yes
2. Has the child lost access to a parent since the time they were enrolled in FAST because the parent was incarcerated, hospitalized, or moved away?
  - a. No
  - b. Yes
3. Since the time the youth was enrolled in FAST, has the child experienced the death of any close family member?
  - a. No
  - b. Yes
4. Has the child changed schools (buildings/districts) since the time they were enrolled in FAST?
  - a. No
  - b. Yes
5. Has the child moved to a new home or neighborhood since the time they were enrolled in FAST?
  - a. No
  - b. Yes
6. Has a parent lost their job, was unemployed, or lost significant amount of income for more than 3 months since the child has been enrolled in FAST?
  - a. No
  - b. Yes
7. Have any problems with health or mental health insurance coverage developed since the time the child was enrolled in FAST?
  - a. No
  - b. Yes
8. Have you experienced a major change in family routine or schedule since the child was enrolled in FAST?
  - a. No
  - b. Yes
9. Has this child been terminated from FAST because of a need for an out-of-home placement?
  - a. No
  - b. Yes
10. If Yes on #9, check all issues that apply:
  - Abuse/dependency/neglect
  - Criminal activity
  - Juvenile detention/crisis stabilization
  - In-patient treatment/mental health
  - In-patient treatment/AOD
  - Residential school
  - Relinquishment of custody in order to receive behavioral health care
11. With the end of services received through enrollment in the FAST project, is this child currently at risk for out-of-home placement?
  - a. No
  - b. Yes
12. If Yes on #11, check all issues that apply:
  - Abuse/dependency/neglect
  - Criminal activity
  - Juvenile detention/crisis stabilization
  - In-patient treatment/mental health
  - In-patient treatment/AOD
  - Residential school
  - Relinquishment of custody in order to receive behavioral health care