

Empowering public authorities and professionals towards trauma-informed leaving care support

Evaluation report on CarePath

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Introduction to the purpose of the document

This report has been developed as part of the CarePath Project "Empowering public authorities and professionals towards trauma-informed leaving care support". It has been devised and written as a tool and resource developed under this initiative. This report is intended to provide input in relation to the importance of the CarePath provision mechanism and provide recommendations on improvements needed in this mechanism, based on the feedback received during the pilot testing of the service. Furthermore, this report will focus on the characteristics of the mechanism, the way that it has been promoted from the partners in all four countries (Greece, Italy, Hungary and Belgium) and will present the impact of the service in terms of usability, acceptance, sustainability etc.

Within this report one will also encounter a qualitative opinion of the usage and sustainability of the CarePath mechanism from a number of stakeholders (both public and private). These data were gathered via interviews. Both questions and answers are presented in this report.



About the CarePath Project

'CarePath' project is a two-year initiative which aims to improve national and regional child protection systems in providing integrated aftercare support to children ageing out of care.

The project strives to ensure that children ageing in and out of care have access to adequate trauma-informed aftercare support as part of the integrated child protection system. It promotes the effectiveness of care professionals and aims to develop a sustainable mechanism that will enable public authorities and professionals to provide comprehensive psycho-social support services to children leaving care, based on trauma-informed interventions.

The project targets public authorities, municipalities and bodies responsible for child protection in four European countries. It also involves professionals such as psychologists, psychotherapists, art therapists, social and healthcare workers, counsellors working with children ageing out of care, as well as vocational training providers and volunteer workers.

All the above professionals will benefit by the CarePath Provision mechanism. This tool has been deployed and widely disseminated the previous months. Its impact is further analyzed in this deliverable.



CarePath Provision Mechanism

The on-line provision mechanism tool was deployed in order to support the professionals and care leavers involved in CarePath. The CarePath Service Provision Mechanism (https://mechanism.carepath-project.eu/) allows both professionals and care leavers to access a "request for support" service in 4 countries (Greece, Italy, Belgium and Hungary). Via this on-line tool a professional (direct user) or even a care leaver (indirect user) can identify the appropriate organisation that could support him/her depending on their request.

There are 4 different target groups identified in this tool (children, care leavers, adults and families) and one can find a service/ organisation in his/her country offering one or a combination of the following types of services: accommodation, legal aid, psychosocial support, food and personal hygiene, education, immigration and advocacy.

Approximately 289 Organisations/ partners have been identified and registered in the CarePath Service Provision Mechanism until October 2020.

- 77 partners in the Greek version
- 112 partners in the Italian version
- 29 partners in the Hungarian version
- 71 partners in the Belgian version

A professional from one of these four countries that wishes to find nearby organizations that can provide support e.g in legal aid or psychological support, can register to the mechanism and by choosing the correct filters find all the relative organizations in his/her country along with their contact information, relevant link and small description of services.



This tool will not only become a useful service for professionals and care leavers but is also considered an added value in empowering the CarePath community and further engaging them to the TIC approach.

CarePath Provision mechanism dissemination

The mechanism was deployed during 2020 by the partners of the CarePath project. As soon as the mechanism was ready and functional it was widely disseminated in all four countries via press releases and personalized emails to all the stakeholders already engaged in the MOOC or the other CarePath Activities. This stakeholders list is presented in D4.4.1 (page.12, table.2) and consists more than 130 organizations that are not limited only in the four project countries but are considered organizations with a global influence and presence. ²

Until first of October approximately 200 people have registered to use the provision mechanism. However, we do believe that this number has probably increased after the presentation of the mechanism during the projects final conference in 13th of October (an on line event that had 600 registered participants). In table.1 one can see the number of registered users in each country up to first of October 2020.

Country	Number of registered users
Belgium	22
Greece	103
Hungary	3
Italy	55

Table.1 "Provision Mechanism users in each country"

CarePath Provision Mechanism pilot testing and evaluation



The CarePath mechanism was pilot tested by the users that were invited to evaluate the service in terms of usability and effectiveness, make suggestions for improvements and recommend ways to achieve sustainability of the service always in relation to their unique national perspectives.

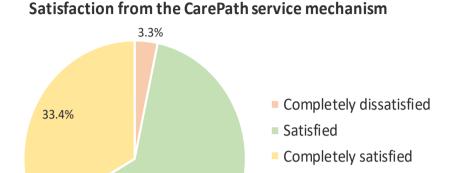
The mechanisms evaluation was conducted in two ways. Over an on-line questionnaire that one can find on the mechanisms site and via some mini interviews conducted with a number of professionals that belong in organizations that have been an active member of the CarePath community from the beginning of the project.

In order to estimate the impact that this service could have not only to the professionals but to care leavers as well, the former were asked to give an estimation on how many children could benefit in their work via this mechanism

Results from the on-line questionnaire

The online questionnaire aimed to collect users' experience while visiting and using the CarePath online mechanism and it received thirty answers in total. According to the results provided by the online evaluation, the online tool received positive evaluation and feedback. A high percentage of the respondents were satisfied and completely satisfied, (63.3 per cent) and (33.4 per cent) respectively, from the online mechanism. However, one responder (out of 30) claimed to be completely dissatisfied by the mechanism, though further explanation for this opinion is not available (Figure 1). Likewise, the responders provided positive feedback in regard to their experience while visiting the online mechanism. Especially, more than half of the responders (17/30) characterized their experience as "good", while the rest (13/30) said it was "great".





63.3%

Figure 1 Respondents' answers to the question "How satisfied are you with the CarePath service provision mechanism?".

The technical aspects and user-friendly character of the online tool was well reflected on the answers given by all respondents (Figure 2). In the questions about the convenience users felt while navigating the CarePath online tool, respondents declared that it was easy (53.30 per cent) and very easy (46.70 per cent) to use the online mechanism. The technical aspects of the online platform received positive feedback too, with all respondents remaining satisfied with the technical characteristics of the mechanism; all respondents (30 in total) answered "Yes" to the question "Are you satisfied from the technical aspects of the mechanism?".



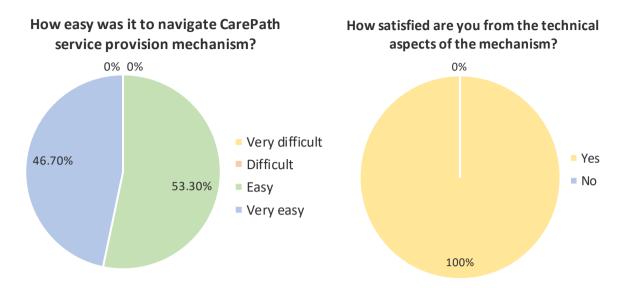


Figure 2 Graphs demonstrating the satisfaction of responders in regard to the a) user-friendly character and the b) technical aspects of the CarePath online mechanism.

The CarePath online mechanism was considered as a useful tool by almost all respondents (29 out of 30) and almost all of them replied that the online tool was relevant to their needs (29 out of 30). One of the respondents, however, was more skeptical when it comes to the utility of the integrated mechanism for lawyers' needs. Another responder found the online mechanism to be mostly social support oriented, however, without attributing a positive or a negative explanation for his/her assessment.

Further to that, the reasons and purposes that respondents used the CarePath online mechanism vary. The majority of respondents claimed that they visited the online platform to search for information (33.30%), while some others reported that they used the online tool for a work-related activity (33.30%). The CarePath online tool was also employed for consultation purposes for some respondents, 16.70% of them replying that they used it for consultation. A small minority of users visited the online mechanism for research (13.30%). Also, one respondent visited the online platform to become more familiar with it and explore its features, which would help him/her to



evaluate later on the mechanism. Figure 3 below demonstrates the reponders'

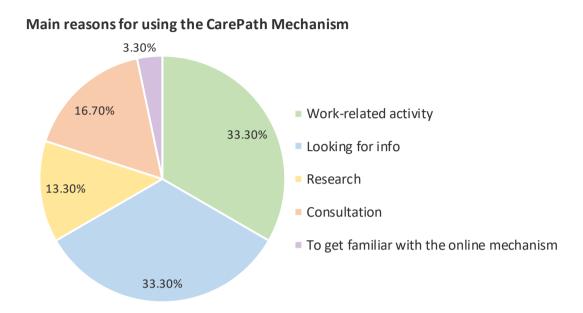


Figure 3 Main reasons respondents used the CarePath Mechanism

In regard to the answer about how responders learned about the online CarePath mechanism, most of the users said they found it "via email". Greek partner e-Trikala sent out invitation emails, informed and asked from individuals to visit and explore the online mechanism. The dissemination of the online tool has been also achieved from the press release uploaded on the CarePath webpage once the online mechanism was launched (https://carepathproject.eu/site/en/news/view.html?id=10). Users read the press release and were redirected to the online mechanism. In addition, some users found the online mechanism by visiting the project website and searching on the internet.

The online evaluation form also provided the opportunity for users to comment and suggest improvements about the CarePath service provision mechanism. Among the main recommendations was to make the online mechanism available in other



languages, too (i.e. Arabic). The responders evoked the high number of vulnerable groups (particularly refugees) who will not be able to access the online mechanism due to language barriers. To this end, they suggested to enrich the CarePath mechanism with more languages so as to increase its accessibility among vulnerable groups, in other words highly potential end-users. Responders also suggested to extend further the mechanism for other countries and embed international organizations in the online mechanism.

Furthermore, the sustainability of the CarePath mechanism was brought into surface. An interesting view was expressed in regard to the sustainability and the fate of the CarePath mechanism after the project. Especially, the suggestion included to make the online mechanism available and to be able to keep it constantly updated after the finalization of the project. A responder argued that the mechanism should be linked with all public organizations in the field of mental health and well-being. Finally, another recommendation was to link the online mechanism with the consortium organizations and enhance the dissemination and promotion of the CarePath online service mechanism.

Results from the interviews

A further evaluation of the mechanism was conducted. 11 Professionals from different organizations were contacted and gave a small interview in relation to the mechanism, provided specific examples of usage, estimated the number of care leavers than could benefit from this service and made suggestions in terms of sustainability. Their input is summarized on table.2

Summary of
your job/
organization

How useful was this mechanism in your line of work/ give an example of usage?

Do you wish to keep using this mechanism after the CarePath Project ends? How do

		How many care leavers	you imagine this
		do you think could	happening?
		benefit from this	
		service	
User 1	Social worker in	I use the mechanism almost on	The mechanism should
	an ESTIA project	a daily base. It has proven to	remain as a useful tool in our
	that supports	be very useful, since it connects	effort to support refugee
	refugees	us with other supporting	population, families and
		organizations. From a	children
		population of 430 refugees, at	
		least 60-70 of them are in the	
		age to become adults or even	
		exit the ESTIA project. I believe	
		that all of them could seek for	
		additional support via this	
		service	
User 2	Public	The majority of the staff has	Yes. An excellent work has
	Organization/	also registered in the Mooc	been done and we wish to
	Welfare	and are active members of the	be able to use this tool in the
		CarePath society. This	future. If this is not feasible
		mechanism is one more useful	due to lack of funding,
		tool. Depending on the case we	perhaps some public
		are working we consult the	organization should support
		mechanism for additional	its continuation.
		supporting organizations. So	
		far I have used this tool at least	
	D 1 1 1 1	5 times	N
User 3	Psychologist	A very useful tool. I use this in	Yes. This tool should remain
	(supporting	informing SGBV victims in	and be enriched with
	SGBV victims)	relation to other supporting	additional fields
		organizations in the area at	
User 4	Social worker/	least 3 times	It will be very useful for this
USEI 4	SGBV focal point	The mechanism is very useful not only for the protection staff	It will be very useful for this tool to remain active. It
	in n ESTIA	but for the young adults that	makes our search for
	project for	we support as well. We often	multiple organizations very
	refugees	consult the mechanism for	easy. All the young people
	Totagees	legal and psychosocial	and professionals should be
		supporting organizations. More	able to access this
		than 30-40 young adults could	able to decess tills
	<u> </u>	and 30 40 young dudits could	



	<u> </u>		
		benefit from this service	
User 5	Social worker,	The mechanism has been	Yes. The mechanism should
	Integration focal	proven useful every time we	remain
	point in a	need to address to other	
	refugee program	supporting organizations. I	
		have used this service 6-7	
		times up to now.	
User 6	Social worker in	The mechanism helped us in	Yes. This mechanism is
	a refugee project	supporting the children and	important in our job and
		find useful supporting	needs to be updated
		organizations all around	·
		Greece. There are more than	
		100 children currently	
		supported by our site. At lease	
		50 of them will become adults	
		soon and will need additional	
		support.	
User 7	Psychotherapist	The material presented at the	The continuation of the
OSCI 7	in the Local	mechanism was very useful in	mechanism can only have
	mobile Mental	my everyday work. Personally, I	positive results. It should be
	Unit	have used this mechanism in	'
	Offic		endorsed by other
		supporting patients that had	organizations as well and
		experienced a traumatic event	presented in dedicated
		and needed further support at	workshops and conferences
		least 4 times.	
User 8	Policy officer	I find the website in itself a	No.
	'youth care'	good idea, and there are super	In itself it is a great initiative,
	Flemish Agency	ideas (with all the life domains)	I only do not see how this
	'Opgroeien'	but I imagine in every country	will help organisations and
		there are so many initiatives to	young people in Belgium.
		reach out to young (vulnerable)	
		people (eg in Flanders the	
		website www.watwat.be,).	
		Why not strengthen existing	
		initiatives that are already	
		known and that are confronted	
		with all the same challenges:	
		how to have the right and	
		updated information? I can be	
		wrong, but I do not see the	
	1	J,	



	T		•
		sense to add a new source of information, that you have to make known, that has to be updated on the long term,	
User 9	Consultancy in accessibility-communication – child rights	Care leavers I am in contact with often have literacy problems but their assistants can help. It is a good overview for them to be reassured they have a complete list of organizations. It is flexible per topic so they won't lose time searching.	It is a comprehensive reference to add to our info / research papers on alternative care. For Belgium there are 71 partners in the index. I mention it to my contacts. It would be great if the research could be done all over Europe. When you are from the field, you know those addresses but not if you are an outsider. The more we communicate, the more it becomes the right reflex or 'mechanism' when facing a discrimination, when looking for mental health support or inclusive organizations.
User 10	International consultant child protection and safeguarding	This mechanism is useful for my work supporting organizations in Belgium and Europe to develop Safeguarding Policies.	Yes. I hope the resource directory stays available.
User 11	Coördinator in a Children's Rights think tank	I think the fact that the platform is in English is a challenge for young people at local level. They would maybe use different tools and rely on the help of social worker/care provider. I like the buttons where you	 I already saw the info on the merging of Kind en Gezin and Youth care is dated. I would only use email addresses that are info@ or similar because sometimes you have a specific contact person



can choose the expertise that you are looking for. I think the second row is much more tailored to young people. It is easier to define your needs then to say which kind of expert you need. So I would put these first.

- but they can change over time.
- You have some regional services but you do not see it on the map. It would be easy to also be able to click on part of the map and see which care services are in your province for example.

Table.2 "Summarized answer from the interviews"

CarePath Provision Mechanism impact and sustainability

Although the on-line pilot testing and evaluation of the mechanism provided us with a clear understanding of the mechanism in terms of effectiveness and usability, we proceeded in conducting a number of mini interviews with professionals and organizations that have used the mechanism in order to evaluate the impact of this tool not only towards the former but also towards care leavers. Via those interviews we attempt to investigate the number of traumatized children that already have or will benefit from the mechanism indirectly (by the usage of the mechanism from the professionals working with them).

According to the answers provided to us (see table. 2) all the professionals have answered that during the pilot testing period they have used the mechanism to support and provide useful information approximately to 3-7 care leavers each. What is more, taking into consideration that they all represent organizations that support a large number of children (in some cases more than 100 children) and that 50% of them is on the process of becoming adults and exiting from the supporting network, the estimation of the care leavers to benefit from this, can increase significantly.



In terms of sustainability, once more the professionals provided to us with some interesting suggestions in maintaining the mechanism after the program ends and even increase its impact and effectiveness.

To be more precise, many of them suggested that the mechanism should remain after the project ends and be updated with additional references/organisations, countries or even languages. Some of them suggested that it is important for the mechanism to be endorsed by public organizations in order to secure its future sustainability. One of them emphasized on the importance of making sure that all the information provided are updated and valid and that navigation to the suggested organizations should be done by clicking on the map and not just via a list.

The overall estimation that derives from both the on line and the face to face evaluation of the mechanism, suggests that this tool can play a supportive role to both the professionals working with traumatized chidden and the care leavers and therefore should be maintained after the project ends. Furthermore, the mechanism is considered an added value to the project and an effective tool in empowering the CarePath TIC.



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