

2018-19 Evaluation of Youth and Family Centers Program

Department of Evaluation and Assessment

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Superintendent of Schools*



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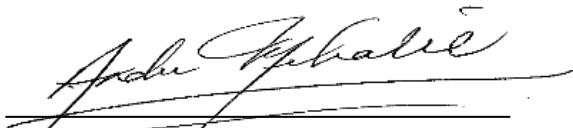
2018-19 Evaluation of Youth and Family Centers Program

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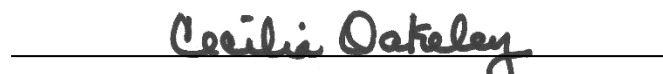
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2018-19 EVALUATION OF YOUTH AND FAMILY CENTERS PROGRAM

Project Evaluator: Jin H. Zhang, Ph.D.

ABSTRACT

The evaluation of the Dallas Independent School District's (Dallas ISD) Youth and Family Centers (YFC) Program includes budget sources, demographic characteristics of staff and student clients, types and number of services provided, and parent survey results.

The total budget for the YFC program in 2018-19 was \$6,221,623 and increased from 6,114,857 in 2017-18. A total of 73 administrators, clinicians, and support staff operated out of 11 YFC service sites and one central administration office in 2018-19. Professional development opportunities provided to YFC staff during the 2018-19 school year focused on school safety and crisis situations, self-care, and other clinically-relevant themes.

There were 5,745 students that received clinical services from the YFC in 2018-19 (4,855 in 2017-18 and 5,154 in 2016-17). Of the 5,745 students served by YFCs in 2018-19, there was a higher percentage of male students (60.2%) than female students (39.8%) compared to the district (51.0% vs. 49.0%, respectively). The 11 YFCs provided mental and behavioral health services to the unique student clients. There was a total of 33,797 contacts that YFC clinicians made with Dallas ISD students and their families in 2018-19, bringing the average number of visits per client to 6.0. Woodrow YFC received the highest number of visits at 4,487 total visits. The average number of recorded visits made to Wilmer-Hutchins YFC was the highest among all YFCs at 8.8 visits per client. The YFC program provided 22 types of clinical service to Dallas ISD students and families in 2018-19. The three most common visit types were 60-minute or more individual therapy sessions, 45-minute individual psychotherapy sessions, and 15-minute follow-up appointments. These three types of services together accounted for 58.8 percent of all clinical services in 2018-19. The three most common primary mental health diagnoses were Attention Deficit Hyperactivity Disorders (ADHD, 48%), Adjustment Disorders (25%), and Depressive Disorders (10%). The average attendance rate for YFC students was 93.5 percent in 2018-19, compared with 92.7 percent in 2017-18 and 93.1 percent in 2016-17. There were 1,873 discipline referrals recorded among 887 of YFC's student clients. The average number of discipline referrals for students in this subgroup was 2.1. Fighting, classroom disruption, and profanity or use of an obscene gesture towards school personnel were the three most common discipline referrals. Redbird YFC had the highest number of YFC student client discipline referrals. The spring 2019 Parent Survey indicated an overall "Satisfaction" score of 95.1 percent. Recommendations for the program included: 1) Create waitlists of clients who cannot be seen in a timely fashion at each YFC clinic, and 2) Administer the YFC Parent Survey to each parent client at the last counseling session.

PROGRAM DESCRIPTION

Background Information

History of the Youth and Family Centers Program

The Dallas Independent School District's (Dallas ISD) Youth and Family Centers program began in 1993. Under an agreement between the Texas Department of Mental Health and Mental Retardation (MHMR) and two campus principals, psychiatrists from the University of Texas Southwestern Medical Center teamed with district personnel to deliver psychiatric services each week at one Dallas ISD campus.

The program provided centrally-coordinated services to students districtwide from 11 campus-based locations by 2016-17. Currently, Parkland Health & Hospital System's Community Oriented Primary Care (COPC) division provides acute physical illness care as well as management of chronic illnesses such as asthma. Parkland COPC also provides physicals, immunizations, specialty care referrals, sexually transmitted disease (STD) and human immunodeficiency virus (HIV) testing, health education, pharmacy services, Texas Department of Public Safety (DPS) programs, family therapy, family planning, and MHMR and social work services to Dallas ISD students and their families.

Present Day Operations, Outreach, and Best Practices

Present Day Operations

The Youth and Family Centers program has developed into an integral part of a multi-tiered support system within Dallas ISD serving students and their families. This system is administered through the district's Student Services Division, which coordinates the services of several departments including counseling services, health services, psychological and social services and Youth and Family Centers. Most referrals to Youth and Family Centers come through other programs within the Student Services Division. Students or parents seeking services are directed to a YFC site depending on the student's feeder pattern and services.

Within the context of this larger framework, the YFC is charged with providing non-emergency mental health care on an ongoing basis to troubled youths and their families. Services include psychological evaluation and assessment, psychiatric consultation and psychiatric medication management, as well as group, individual, and family counseling. Physical crisis services are managed by an appropriate hospital emergency room. Mental health crises, that are not appropriate for an outpatient clinic, are referred to an appropriate Psychological Emergency Room at an area hospital. Students and families seeking services from the YFC program are directed to the clinic location most convenient for them.

Outreach

The YFC staff communicated to Dallas ISD students, families, teachers and other stakeholders about services available from the YFC program through a variety of mechanisms and events. These include: health fairs, parent teacher association meetings, school fairs, community events, presentations at other parent meetings at schools, presentations through Prep U, "Coffee with the Principal," staff development sessions for teachers, and pamphlets and flyers in school registration packets.

Presentations were made on topics ranging from an overview of YFC services to more focused presentations on drug use prevention, self-harming behaviors/suicidal ideation, anxiety and coping skills, violence prevention, identification of various mental health issues, as well as general training on helpful parenting practices. YFC clinicians also run various support groups throughout the year, including those for parents with a child with autism, behavior modification groups for parents, girls' groups, substance abuse groups, and groups for parents of a child with attention deficit symptoms. Seagoville YFC provided an extensive array of trainings to school staff and to parents during 2018-19.

Best Practices for School-Based Mental Health Services

The best practices for school-based mental health services include three tiers: universal (and typically less-intensive) interventions that target the entire school or classroom, selective interventions that target subgroups of students who are high risk for developing a mental disorder, and indicated interventions that target students already showing clinical symptoms (e.g., displaying indicators of a mental health problem).

The YFC program in 2018-19 increased efforts to determine directly from classroom teachers (using a program-designed survey) the types of services that would be most helpful for the YFC to provide at the school level. The purpose was to provide relevant "universal" and "selective" tier services. In addition to offering various topical presentations and support groups for students and parents throughout the year, the YFC program has offered professional development to teachers in recent years focusing on identification, teaching strategies and other interventions for students showing signs of ADHD, efforts which offer "selective" tier level support. The YFC's provision of ongoing individual and family counseling services to any student or parent seeking such support, aligns with both "selective" and "indicated" tier levels of service.

PURPOSE AND SCOPE OF THE EVALUATION

The purpose of this evaluation is to provide district leadership, program administrators and other stakeholders information regarding the Dallas ISD Youth and Family Centers program in 2018-19. This evaluation examines characteristics of YFC personnel using demographic and professional qualifications data, demographic characteristics of clients, the nature and quantity of services provided, and client perceptions of services rendered.

MAJOR EVALUATION QUESTIONS AND RESULTS

What were the sources and amounts of funding provided for the Youth and Family Centers program in 2018-19?

Methodology

The Youth and Family Centers program budget data were obtained from the YFC program staff and Title I worksopes.

Results

The total budget for the YFC program in 2018-19 was \$6,221,623. General Operating funds provided \$3,295,750, Title 1 funds provided \$1,579,918, and Medicaid revenue provided \$1,345,955. Table 1 details all three funding sources over the past three years to show program budgetary changes over time. Overall, the total amount of funding for YFC services has increased by \$615,968 from 2016-17 through 2018-19.

Table 1: YFC 2016-17 through 2018-19 Funding

School Year	Title I	General Funds	Medicaid Revenue	Total
2016-17	1,148,885	3,296,770	1,160,000	5,605,655
2017-18	1,478,885	3,290,339	1,345,633	6,114,857
2018-19	1,579,918	3,295,750	1,345,955	6,221,623

Source: Title I workscope and information from program staff dated November 2016 (2016-17), November 2017 (2017-18), and November 2018 (2018-19).

Note: YFC= Youth and Family Centers.

What were the demographic characteristics and professional qualifications of Youth and Family Centers staff in 2018-19?

Methodology

Data on YFC staff demographics and professional qualifications were obtained from YFC program records and the Dallas ISD 2018-19 personnel data file (11/18/2018). The evaluator interviewed the program director in October 2018 to obtain supplemental information about the YFC program.

Results

YFC Staff Type, Counts and Levels of Employment

There was a total of 11 Youth and Family Centers clinic sites across Dallas area. Table 2 shows the locations of the 11 clinics.

Table 2: 2018-19 Youth and Family Center Locations

Youth and Family Centers	Location
Adamson YFC	Adamson HS
Amelia Flores YFC	Bryan Adams HS
Balch Springs YFC	Balch Springs MS
Eddie Bernice Johnson YFC	Billy E. Dade MS
Fair Oaks YFC	Conrad HS
Kiosco YFC	Thomas Jefferson HS
Redbird YFC	T.W. Browne MS
Seagoville YFC	Seagoville MS
West Dallas YFC	Pinkston HS
Wilmer-Hutchins YFC	Wilmer-Hutchins HS
Woodrow YFC	Woodrow Wilson HS

Source: YFC data file dated May 29, 2019.

Note: YFC= Youth and Family Centers. HS=high school. MS=middle school.

A total of 73 administrators, clinicians, and support staff operated out of 11 YFC service sites and one central administration office in 2018-19. Staff demographic data were examined by role type (clinical or administrative). The number of YFC clinical positions totaled 48 (65.8%) in 2018-19 and was comprised of counselors, psychiatrists, psychologists, psychotherapists, specialists, and a technician. The number of YFC administrative and support roles totaled 25 (34.2%) in 2018-19 and included all other positions. Like last year,

psychotherapists ($N=36$) comprised the largest subgroup of YFC staff at almost half (49.3%). Table 3 displays YFC staff information.

Table 3: 2018-19 Youth and Family Centers Staff ($N=73$)

Job Title	<i>n</i>	%
Director	1	1.4
Coordinator	1	1.4
Administrative Assistant	12	16.4
Counselor	5	6.8
Psychiatrist	4	5.5
Psychotherapist	36	49.3
Specialist	2	2.7
Supervisor	11	15.1
Technician	1	1.4
Total	73	100.0

Source: Dallas ISD 2018-19 personnel data file 11/18/2018.

Of the 48 clinical staff members, approximately 40 percent were Hispanic, 31 percent were African American, and most were female (77%). Eighty-eight percent held a master's-level degree or higher. Sixty-three percent of clinical staff possessed between one to ten years of professional experience within the district and 27 percent had more than 11 years of experience (Table 4).

Table 4: 2018-19 Youth and Family Centers Clinician Demographics ($N=48$)

	<i>n</i>	%
Gender		
Female	37	77.1
Male	11	22.9
Ethnicity		
African American	15	31.3
Hispanic	19	39.6
White	13	27.1
Asian	1	2.1
Education Level		
Bachelor's	2	4.2
Master's	37	77.1
Doctorate	5	10.4
Other	4	8.3
Local Experience		
< 1 year	5	10.4
1-5 years	18	37.5
6-10 years	12	25.0
11-15 years	5	10.4
16-20 years	5	10.4
21+ years	3	6.3

Source: Dallas ISD 2018-19 personnel data file 11/18/2018.

Note: Clinical staff members included psychotherapists ($n=36$), psychiatrists ($n=4$), counselors ($n=5$), specialists ($n=2$), and a technician ($n=1$). Percentages may not add up to 100 due to rounding.

What professional development opportunities were provided to Youth and Family Centers staff in 2018-19?

Methodology

Information about professional development opportunities provided to Youth and Family Centers staff in 2018-19 was obtained through correspondence with the YFC program director, as well as documentation provided by YFC program clinical staff.

Results

There were 21 formal professional development opportunities provided to YFC staff during the 2018-19 school year. These training sessions focused on a variety of topics, including school safety and crisis situations, self-care, as well as other clinically-relevant themes. Selected Training session topics for 2018-19 are displayed in Table 5. For a full list of professional development opportunities, see Appendix A.

Table 5: 2018-19 Selected YFC Professional Development Sessions by Topic

Professional Development Topics
• Depression in Young Children and Adolescents • Keeping Children Safe in the Real and Virtual World • Children and Adolescents Current Drug Abuse • Commercial Sexual Exploitation of Children and Sex Trafficking 101 • Experiential Group Therapy • Creating a YFC Brand – Empowering Our Stakeholders • Personal Vision - Embracing Vulnerability • Handling Crisis Situations • Managing Conflict • Workplace Safety/Office Safety • Mindfulness Meditation Training for Attention-Deficit/Hyperactivity Disorder • Oppositional Defiant Disorder (ODD), Differential Diagnoses of ODD • Jumping the Rope: Acculturation and the Hispanic Family (2 sessions) • Self-Injury Among Teenagers • How Teen Pregnancy Impacts Education • Violence Risk Assessment for Students • Therapist Self-Care • Working with LGBTQ Youth in Therapy • Substance Abuse Treatment Resources • Updates on Various Innovations in Therapy • Adolescent Substance Abuse Screening and Assessment

Source: YFC professional development data 7/18/2019.

Note: YFC=Youth and Family Centers. ODD=Oppositional Defiant Disorder. LGBTQ= lesbian, gay, bisexual, transgender, and queer.

What were the demographic characteristics of the students served by the Youth and Family Centers program in 2018-19?

Methodology

YFC program staff provided 2018-19 data for students served between July 2018 and April 2019, which was a shorter time frame than in 2016-17 (August 2016 through June 2017) or 2017-18 (August 2017 through June 2018). As a result, year to year comparisons should be viewed with caution. The evaluator merged the data with the district 2018-19 demographic data (10/26/2018). Frequencies and cross-tabulation analyses were used to determine student demographics.

Results

A total of 5,745 students received clinical services from the YFC in 2018-19 (4,855 in 2017-18 and 5,154 in 2016-17). Of the 5,745 students served by YFCs in 2018-19, the percentage of male students (60.2%) was higher than female students (39.8%) compared to the district (51.0% vs. 49.0%, respectively). Hispanic students constituted the largest ethnic group served by YFC clinics at 69.5 percent, which was similar to the

district (69.8%). African American students constituted 24.2 percent of YFC student clients, and white students comprised 4.5 percent of all student clients (Table 6).

Table 6: 2018-19 YFC Served Students and District Students Demographic Characteristics

	YFC Served Students (n=5,745)		District Students (n=155,237)	
	n	%	n	%
Gender				
Female	2,286	39.8	76,028	49.0
Male	3,459	60.2	79,209	51.0
Ethnicity				
African American	1,392	24.2	33,663	21.7
Hispanic	3,993	69.5	108,385	69.8
White	257	4.5	7,969	5.1
Other	103	1.8	5,220	3.4
Grade Level				
EC	0	0.0	180	0.1
PK	4	<0.1	12,737	8.2
KN	90	1.6	10,992	7.1
1	231	4.0	11,234	7.2
2	389	6.8	11,314	7.3
3	470	8.2	11,518	7.4
4	588	10.2	12,197	7.9
5	623	10.8	12,248	7.9
6	591	10.3	11,144	7.2
7	577	10.0	10,554	6.8
8	514	8.9	10,424	6.7
9	599	10.4	12,192	7.9
10	448	7.8	10,603	6.8
11	335	5.8	9,398	6.1
12	286	5.0	8,502	5.5
English Learner				
	2,518	43.8	69,456	44.7
Special Education				
	1,276	22.2	13,877	8.9
At Risk				
	3,226	56.2	69,324	44.7
Economically Disadvantaged				
	5,086	88.5	133,950	86.3

Source: YFC 2018-19 student data file dated May 29, 2019 and district Public Education Information Management System data file dated October 26, 2018.

Note: EC=Early Childhood. PK=Prekindergarten. KN=Kindergarten. YFC=Youth and Family Centers. Percentages may not add up to 100 due to rounding.

There were lower percentages of served students from prekindergarten through grade two and higher percentages from grade three through grade 10, and there were lower percentages of served students from grade 11 to grade 12 as compared to districtwide enrollment.

Students of YFCs identified as English Learners (EL) constituted 43.8 percent of those served by YFC clinics. This percentage was slightly lower than the percentage of students districtwide identified as EL (44.7%). There were notably more special education students (22.2%) served in comparison to the district (8.9%).

YFC student demographics were also examined within each gender as a percentage across all grade levels. The highest percentage (11.7%) of female students was for grade nine, whereas the highest percentage for male students was for grade five (11.6%). Table 7 displays these findings.

Table 7: YFC Students Across All Grade Levels by Gender (N=5,745)

Grade	Gender			
	Male		Female	
	<i>n</i>	%	<i>n</i>	%
PK	2	<0.1	2	0.1
KN	58	1.7	32	1.4
1	146	4.2	85	3.7
2	266	7.7	123	5.4
3	305	8.8	165	7.2
4	372	10.8	216	9.4
5	402	11.6	221	9.7
6	367	10.6	224	9.8
7	364	10.5	213	9.3
8	313	9.0	201	8.8
9	331	9.6	268	11.7
10	233	6.7	215	9.4
11	165	4.8	170	7.4
12	135	3.9	151	6.6
Total	3,459	100.0	2,286	99.9

Source: YFC 2018-19 student data file dated May 29, 2019 and district Public Education Information Management System data file dated October 26, 2018.

Note: PK=Prekindergarten. KN=Kindergarten. YFC=Youth and Family Centers. Some percentages do not add up to 100 due to rounding.

What were the nature and number of clinical services provided by the Youth and Family Centers to Dallas ISD students and families in 2018-19?

Methodology

Data on types and number of clinical mental health services provided to Dallas ISD students and families in 2018-19 were obtained from the Youth and Family Centers data manager, who extracted information from the program's medical record system. As mentioned previously, the time frame for 2018-19 students served was shorter than in 2016-17 or 2017-18. As a result, year to year comparisons should be viewed with caution. The evaluator merged these data with the district's 2018-19 Public Education Information Management System data file (10/26/2018) and conducted frequencies and cross tabulation analyses.

Results

Client Contacts by YFC Clinic Site

As noted earlier in this report, the 11 YFCs provided mental and behavioral health services to 5,745 unique student clients in 2018-19 (4,855 in 2017-18 and 5,154 in 2016-17, respectively). There was a total of 33,797 contacts that YFC clinicians made with Dallas ISD students and their families in 2018-19 (38,247 in 2017-18 and 39,027 in 2016-17), bringing the average number of visits per client to approximately 6.0. (7.9 in 2017-18 and 7.6 in 2016-17). Table 8 details the total number of recorded visits (which includes all substantive clinical client contacts), number of unique visitors, and average number of visits per client for each YFC clinic during 2018-19. Woodrow YFC received the highest number of visits overall (including repeat visitors) in 2018-19 at 4,487 total visits. Adamson YFC, Flores YFC, and West Dallas YFC each followed close behind with 4,134, 3,916, and 3,890 total visits, respectively. Flores YFC had the highest number of unique visitors (N=814), and Eddie Bernice Johnson YFC had the fewest unique visitors (N=225) in 2018-19. The average

number of recorded visits each client made to Wilmer-Hutchins YFC was the highest among all YFCs, at 8.8 visits. Redbird YFC had the lowest average number of visits per client (3.4 per client).

Table 8: 2018-19 YFC Number of Visitors and Visits by Clinic Site

Clinic Site	Unique Visitors <i>n</i>	Total Visits <i>n</i>	Average Visits
Adamson YFC	688	4,134	6.0
Amelia Flores YFC	814	3,916	4.8
Balch Springs YFC	685	2,373	3.5
Eddie Bernice Johnson YFC	225	1,713	7.6
Fair Oaks YFC	447	3,027	6.8
Kiosco YFC	555	2,899	5.2
Redbird YFC	763	2,600	3.4
Seagoville YFC	328	2,654	8.1
West Dallas YFC	467	3,890	8.3
Wilmer-Hutchins YFC	240	2,104	8.8
Woodrow YFC	533	4,487	8.4
Total*	5,745	33,797	5.9

Source: YFC 2018-19 student data file dated May 29, 2019 and district Public Education Information Management System data file dated October 26, 2018.

Note: Data included students and their visits from July 2018 through April 2019. *Four student records were missing in the data file. YFC=Youth and Family Centers.

Types and Frequency of Clinical Services Provided

Program records indicated that the Youth and Family Centers program provided 22 distinct types of clinical service to Dallas ISD students and families in 2018-19 (13 types in 2017-18 and 12 in 2016-17). The three most common types were 60-minute or more individual therapy sessions ($N=7,936$ visits, accounted for 23.5 percent of all recorded services), 45-minute individual psychotherapy sessions ($N=7,114$, comprised 21 percent), and 15-minute follow-up appointments ($N=4,824$, accounted for 14.3 percent). By volume, these three types of services together accounted for 19,874 (58.8%) of all clinical services provided to YFC clients in 2018-19 (Table 9).

In comparison, during the 2017-18 school year, the three most common types were 45-minute individual therapy sessions ($N=9,824$ visits, accounted for 25.7 percent), 60-minute individual psychotherapy sessions ($N=7,441$, comprised 19.5 percent), and psychiatric follow-up appointments ($N=7,241$ visits, comprised 18.9 percent). These three types of services together accounted for 64.1 percent of all clinical services provided to YFC clients in 2017-18. During the 2016-17 school year, the three most common types were 45-minute individual therapy sessions ($N=12,852$ visits, accounted for 32.9 percent), psychiatric follow-up appointments ($N=9,176$ visits, comprised 23.5 percent), and family therapy with client present ($N=7,443$, comprised 19.1 percent). These three types of services together accounted for 75.5 percent of all clinical services provided to YFC clients in 2016-17.

Table 9: 2018-19 YFC Types of Clinical Services Provided

Type of Clinical Service	<i>n</i>	%
Individual therapy, 60 or more minutes	7,936	23.5
Individual therapy, 45 or more minutes	7,114	21.0
Established patient doctor visits, 15 minutes	4,824	14.3
Family therapy with client present	2,571	7.6
Established patient doctor visits, 25 minutes	2,182	6.5
Individual therapy, 30 or more minutes	2,108	6.2
Psychiatric evaluation	1,639	4.8
Mental health visits (including ADHD, PTSD and others)	1,317	3.9
Significant, clinical collaboration by phone	1,023	3.0
Significant clinical collaboration in person	886	2.6
Psychiatric examination	842	2.5
Group therapy	538	1.6
Family therapy without client present	400	1.2
Established patient doctor visits, 40 minutes	198	0.6
Established patient doctor visits, 10 minutes	124	0.4
Psychotherapy with patient and/or family member, 45 minutes	44	0.1
Multi-family group therapy	19	0.1
Crisis Intervention	11	<0.1
Interactive complexity	9	<0.1
Established patient doctor visits, 5 minutes	8	<0.1
Psychological testing	7	<0.1
New patient face-to-face doctor visits, 45 minutes	1	<0.1
Total	33,801	99.9

Source: YFC 2018-19 student data file dated May 29, 2019.

Note: ADHD=Attention Deficit Hyperactivity Disorder. PTSD=Post Traumatic Stress Disorder. YFC=Youth and Family Centers. Data includes students and their visits from July 2018 through April 2019. Percentages do not add up to 100 due to rounding.

What were the most common mental health issues that Youth and Family Centers students presented in 2018-19?

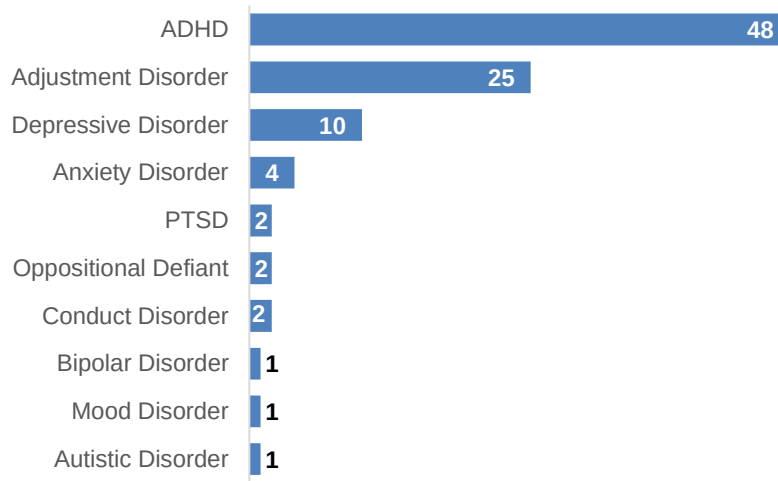
Methodology

Data on mental health diagnoses were provided by the YFC program's data manager, who extracted data from the program's electronic record system. As mentioned previously, the time frame for 2018-19 students served was shorter than in 2016-17 or 2017-18. As a result, year to year comparisons should be viewed with caution. Primary mental health diagnoses were identified following the evaluator's consultation with the YFC program data manager regarding clinicians' diagnosis data entry practices. Diagnosis data were merged with the district's student demographic data file dated October 26, 2018 and analyzed using frequencies and crosstabulations.

Results

The three most common primary mental health diagnoses made for Dallas ISD students visiting a Youth and Family Center for clinical services in 2018-19 were Attention Deficit Hyperactivity Disorders (ADHD, 48% of all primary diagnoses), Adjustment Disorders (25%), and Depressive Disorders (10%). Figure 1 displays a full breakdown by overall percentage of top 10 most common primary diagnoses made for student clients of YFCs which accounted for 96 percent of all primary diagnoses in 2018-19, the same as in 2017-18. In 2016-17, the top 10 diagnoses accounted for 88 percent of all commonly diagnoses. Additional primary diagnoses data are provided in Appendices B and C.

Figure 1: 2018-19 Percentages of Most Common Mental Health Issues Among YFC Student Clients (N=5,745)

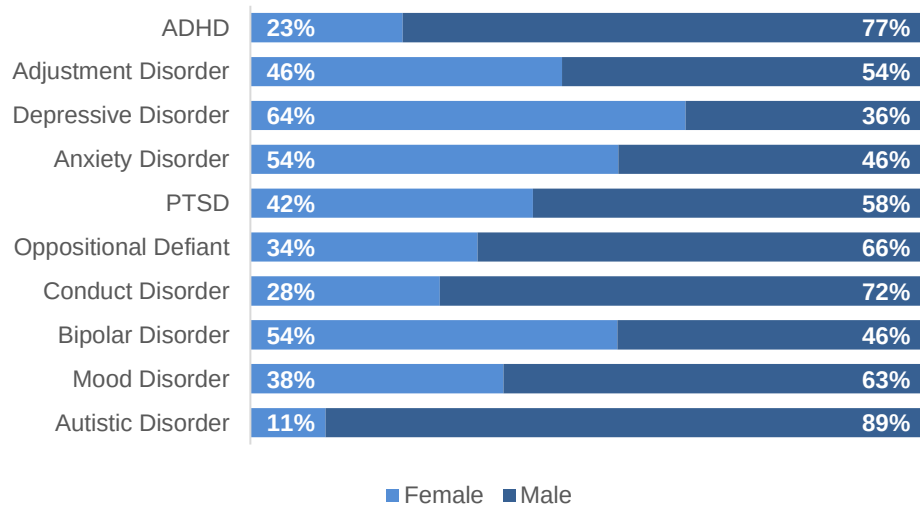


Source: YFC 2018-19 data file from YFC data manager, May 29, 2019.

Note: ADHD=Attention Deficit Hyperactivity Disorder. PTSD=Post Traumatic Stress Disorder. YFC=Youth and Family Centers. Data include students and their visits from July 2018 through April 2019. The most common primary diagnoses accounted for 96% of all primary diagnoses.

Primary diagnosis patterns were also examined by gender. There were notably more male than female students that received primary diagnoses of Autistic Disorder (89%), ADHD (77%), Conduct Disorder (72%), Oppositional Defiant (66%), Mood Disorder (63%), PTSD (58%), and Adjustment Disorder (54%). There were more female than male students for Depressive Disorder (64%), Anxiety Disorder (54%), as well as Bipolar Disorder (54%) (Figure 2). This was similar to the 2017-18 and 2016-17 school years.

Figure 2: 2018-19 Primary Diagnoses by Gender (10 Most Common) (N=5,745)



Source: YFC 2018-19 data file dated May 29, 2019 and 2018-19 Public Education Information Management System student data file dated October 26, 2018.

Note: ADHD=Attention Deficit Hyperactivity Disorder. PTSD=Post Traumatic Stress Disorder. YFC=Youth and Family Centers. Data include students and their visits from July 2018 through April 2019.

On average, students made 6 clinic visits each to a YFC during the 2018-19 school year. Students with a primary diagnosis of Obsessive Compulsive Disorder (12.5 visits per client) averaged more than twice as many visits as ADHD and Autistic Disorder clients (6.2 visits per client). Other primary diagnoses associated with more frequent YFC clinic visits included Bipolar Disorder (10.2 visits per client), PTSD and Depressive Disorder (9.1 visits per client, respectively), and Anxiety Disorder (8.0 visits per client). Table 10 displays average visits for the 15 primary diagnoses associated with the most visits on average per student.

Table 10: 2018-19 Average Visits for Top 15 Primary Mental Health Diagnoses (N=5,745)

Primary Diagnosis	Primary Diagnosis N	Total Visits N	Average Visits N
Obsessive-Compulsive Disorder	6	75	12.5
Bipolar Disorder	50	508	10.2
PTSD	93	846	9.1
Depressive Disorder	509	4,611	9.1
Anxiety Disorder	207	1,659	8.0
Selective Mutism	11	84	7.6
Social Phobia	17	127	7.5
Oppositional Defiant	106	766	7.2
Conduct Disorder	86	608	7.1
Adjustment Disorder	1,219	8,519	7.0
Mood Disorder	70	473	6.8
Dysthymic Disorder	13	82	6.3
Autistic Disorder	36	224	6.2
ADHD	2,314	14,324	6.2
Impulse Disorder	11	49	4.5

Source: YFC 2018-19 data file dated May 29, 2019 and 2018-19 district Public Education Information Management System student data file dated October 26, 2018.

Note: Data includes students and their visits from July 2018 through April 2019. PTSD=Post Traumatic Stress Disorder. ADHD=Attention Deficit Hyperactivity Disorders. YFC=Youth and Family Centers.

Additional findings showing the distribution of the top ten most common primary diagnoses by ethnicity and grade level can be found respectively in Appendices B and C of this report.

What were the attendance and discipline referral rates of the students served by the Youth and Family Centers program in 2018-19?

Methodology

To examine attendance and discipline referral on YFC student clients, the evaluator merged student identification numbers of YFC clients with the October 26, 2018 student demographic file, the district's attendance data file (6/4/2019) and discipline referral data file (7/18/2019). The evaluator then conducted frequency and crosstabulation analyses to determine attendance and discipline referral rates.

Results

Attendance

The average attendance rate for the Youth and Family Center students was 93.5 percent in 2018-19, compared with 92.7 percent in 2017-18 and 93.1 percent in 2016-17. The average attendance rate districtwide in 2018-19 was 95.3 percent.

Discipline Referrals

Of the 5,745 student clients of Youth and Family Centers in 2018-19, there were 1,873 discipline referrals recorded among 887 of YFC's student clients (these 887 constituted 15.4% in 2018-19, 19.9% in 2017-18, and 24.5% in 2016-17). Three hundred and ninety-two of the 887 students (44.2%) were referred for more than one offense during the school year, the average number of discipline referrals for students in this subgroup was 2.1 (range: 1 to 14) (2.6 average in 2017-18, range: 1 to 21, and 2.8 average in 2016-17, range: 1 to 22). Table 11 provides a list of the top 10 offenses leading to discipline referrals in this group.

Fighting, classroom disruption, and profanity or use of an obscene gesture towards school personnel were the three most common causes for a discipline referral among this group. Fighting was the top cause in 2018-19, and accounted for the largest share (30.8%, $N=576$) of discipline referrals among YFC student clients, with 526 (21.1%) in 2017-18 and 774 (22.0%) in 2016-17. There were 32 bullying incidents recorded among this group leading to a discipline referral in 2018-19, compared with 54 in 2017-18.

Table 11: 2018-19 Discipline Referrals (Top 10) Among YFC Student Client Group

Offense Description	<i>n</i>	%
Fighting	576	30.8
Classroom disruption	317	16.9
Profanity/obscene gesture towards personnel	272	14.5
Assault Class C (student on student)	172	9.2
Drugs (non-felony)	119	6.4
Assault Class C (student on personnel or volunteer)	57	3.0
Threats (student on personnel/facility)	45	2.4
Stealing/theft	42	2.2
Suspicious drug activity	39	2.1
Bullying	32	1.7

Source: District Public Education Information Management System data file dated October 26, 2018. YFC student data file dated May 29, 2019. Dallas ISD discipline data file dated July 18, 2019.

Note: The top 10 offenses shown here account for 89% of all discipline referrals for this group in 2018-19. YFC=Youth and Family Centers.

The distribution of discipline referrals by YFC clinic site was also examined. Redbird YFC, located in southwest Dallas, was associated with the highest number of YFC student client discipline referrals in 2018-19 ($N=512$, or 27.3 percent of all referrals among YFC student clients), followed by Flores YFC ($N=284$, or 15.2 percent), and Balch Springs YFC ($N=217$, or 11.6 percent). Wilmer-Hutchins YFC ($N=79$, or 4.2 percent) and Eddie Bernice Johnson YFC ($N=78$, or 4.2 percent) had the lowest numbers of student client discipline referrals in 2018-19 (Table 12).

Table 12: 2018-19 Discipline Referrals by Youth and Family Center Site

YFC Site	<i>n</i>	%
Redbird	512	27.3
Amelia Flores	284	15.2
Balch Springs	217	11.6
West Dallas	177	9.5
Woodrow	128	6.8
Seagoville	113	6.0
Adamson	112	6.0
Fair Oaks	87	4.6
Kiosco	86	4.6
Wilmer-Hutchins	79	4.2
Eddie Bernice Johnson	78	4.2
Total	1,873	100.0

Source: Public Education Information Management System district data file dated October 26, 2018. YFC 2018-19 student data file dated May 29, 2019. Dallas ISD 2018-19 discipline data file dated July 18, 2019.

Note: YFC=Youth and Family Centers.

How satisfied were the families served by the Youth and Family Centers program in 2018-19?

Youth and Family Centers provided mental and health services to both Dallas ISD students and their parents. To solicit parents' experience and feedback about the services they received, YFC developed a client survey to be given to parents each school year.

Methodology

The YFC-designed Parent Survey was administered spring 2019. The Parent Survey included 10 items and was in English and Spanish. Eight sites returned completed surveys to the YFC central administration office. Findings from the parent survey represented feedback from parent clients during spring 2019 at Adamson YFC, Balch Springs YFC, Kiosco YFC, Redbird YFC, Seagoville YFC, West Dallas YFC, Wilmer-Hutchins YFC, and Woodrow YFC. No surveys were received from the other three sites. All completed surveys were collected by YFC site managers who returned surveys to the YFC program director. The evaluator converted the hard copies into a digital data file for analyses.

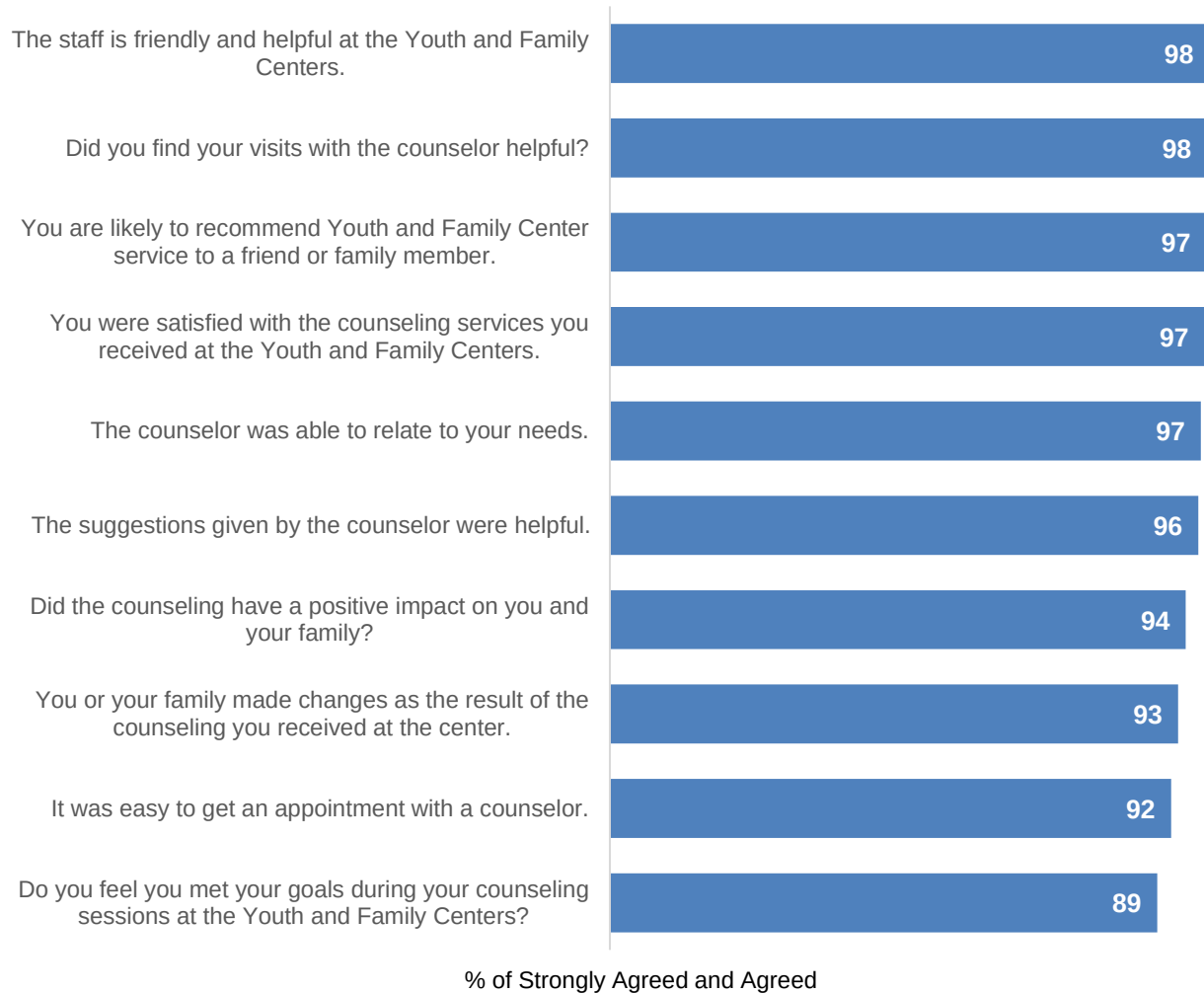
Results

The YFC Parent Survey solicited information of various aspects of clients' experience with the YFC using the five-point Likert-type scale ranging from "Strongly Agree" to "Strongly Disagree". A total of 290 completed the survey (Figure 3).

Analyses of the Parent Survey indicated an overall "Satisfaction" score of 95.1 percent from the spring 2019 survey. Responses were positive with between 89 and 98 percent marking "agree" or "strongly agree". In 2017-18 YFC received an overall "Satisfaction" score of 95.9 percent from the fall 2017 survey from seven of 11 YFCs. In 2016-17, YFCs received an overall satisfaction score of 92.3 from all 11 sites.

Survey items receiving the highest scores included those inquiring about the friendliness and helpfulness of YFC staff and the helpfulness of the counselors, followed by whether these clients would recommend YFC services to a friend or family member, whether they were satisfied with the counseling services, and whether the counselor was able to relate to their needs. Although positive overall, the least positive responses were for meeting the goals for the counseling sessions (89%). Full parent survey responses from spring 2019 can be found in Appendix D.

Figure 3: YFC Spring 2019 Parent Survey Results (N=290)



Source: YFC 2018-19 parent survey data file dated June 19, 2019.

Note: YFC=Youth and Family Centers. Surveys were received from 8 of the 11 YFC sites.

SUMMARY AND RECOMMENDATIONS

Summary

YFC Staff Characteristics and Professional Development

A total of 73 administrators, clinicians, and support staff operated out of 11 YFC service sites and one central administration office in 2018-19. The number of YFC clinical positions totaled 48 (65.8%) in 2018-19 and was comprised of counselors, psychiatrists, psychologists, and psychotherapists. Of the 48 clinical staff members, approximately 40 percent were Hispanic, 31 percent were African American, and most were female (77%). Eighty-eight percent held a master's-level degree or higher. Sixty-three percent of clinical staff possessed between one to ten years of professional experience within the district and 27 percent had more than 11 years of experience. There was a total of 21 formal professional development opportunities for YFC

staff focused on a variety of topics during 2018-19 school year, covering school safety and crisis situations, self-care, and other clinically-relevant themes.

Students and Services

The 11 Dallas ISD YFCs provided mental and behavioral health services to 5,745 unique student clients in 2018-19. There were lower percentages of served students from prekindergarten through grade two and higher percentages from grade three through grade 10, and there were lower percentages of served students from grade 11 to grade 12 as compared to districtwide enrollment.

Female students of YFCs were more commonly seen beginning in middle school (grade 6); the highest percentage (11.7%) of female students was for grade nine students. Male students of YFCs were more commonly seen during the elementary school grades (grades 4 and 5) with percentages lower in middle school and continuing in a downward trend through high school grades. There was a total of 33,797 contacts that YFC clinicians made with Dallas ISD students and their families in 2018-19, bringing the average number of visits per client to 6.0. Woodrow YFC received the highest number of visits overall in 2018-19 at 4,487 total visits. Adamson YFC, Flores YFC, and West Dallas YFC each followed close behind with 4,134, 3,916, and 3,890 total visits, respectively. Flores YFC had the highest number of unique visitors ($N=814$), and Eddie Bernice Johnson YFC had the fewest unique visitors ($N=225$) in 2018-19. The average number of recorded visits each client made to Wilmer-Hutchins YFC was the highest among all YFCs, at 8.8 visits. Redbird YFC had the lowest average number of visits per client (3.4 per client).

The Youth and Family Centers program provided 22 distinct types of clinical service to Dallas ISD students and families in 2018-19. The three most common visit types were 60-minute or more individual therapy sessions ($N=7,936$ visits), 45-minute individual psychotherapy sessions ($N=7,114$), and 15-minute follow-up appointments ($N=4,824$). These three types of services together accounted for 58.8 percent of all clinical services provided to YFC clients in 2018-19.

Diagnostic Trends

The three most common primary mental health diagnoses made for Dallas ISD students visiting a Youth and Family Center for clinical services in 2018-19 were Attention Deficit Hyperactivity Disorders (ADHD, 48% of all primary diagnoses), Adjustment Disorders (25%), and Depressive Disorders (10%). These top 10 diagnoses accounted for 96 percent of all primary diagnoses ($N=5,745$) in 2018-19, the same as in the 2017-18 school year. There were notably more male than female students with primary diagnoses of Autistic Disorder (89%), ADHD (77%), Conduct Disorder (72%), Oppositional Defiant (66%), Mood Disorder (63%), PTSD (58%), and Adjustment Disorder (54%). There were more female than male students with primary diagnoses of Depressive Disorder (64%), Anxiety Disorder (54%), as well as Bipolar Disorder (54%).

Attendance and Discipline Referrals

The average attendance rate for YFC students was 93.5 percent in 2018-19, compared with 92.7 percent in 2017-18 and 93.1 percent in 2016-17. The average attendance rate districtwide in 2018-19 was 95.3 percent. There were 1,873 discipline referrals recorded among 887 of YFC's student clients (constituted 15.4% of YFC student clients in 2018-19). The average number of discipline referrals for students in this

subgroup was 2.1 (range: 1 to 14). Fighting, classroom disruption, and profanity or use of an obscene gesture towards school personnel were the three most common causes for a discipline referral among this group. Redbird YFC had the highest number of YFC student client discipline referrals in 2018-19 ($N=512$, or 27.3 percent). Wilmer-Hutchins YFC ($N=79$, or 4.2 percent) and Eddie Bernice Johnson YFC ($N=78$, or 4.2 percent) had the lowest numbers of student client discipline referrals in 2018-19.

Parent Survey Results

The YFC-designed Parent Surveys administered spring 2019 included 10 items in both English and Spanish. Eight of the 11 sites returned completed surveys to the YFC central administration office. Responses were positive with between 89 and 98 percent marking “agree” or “strongly agree” to all 10 items.

Analyses of the Parent Survey indicated an overall “Satisfaction” score of 95.1 percent. In 2017-18 YFC received an overall “Satisfaction” score of 95.9 percent in the fall of 2017, and 92.5 percent in 2016-17. Survey items receiving the highest scores included those inquiring about the friendliness and helpfulness of YFC staff and the helpfulness of the counselors, followed by whether these clients would recommend YFC services to a friend or family member, whether they were satisfied with the counseling services, and whether the counselor was able to relate to their needs. Although positive, the least positive item was meeting their goals of the counseling sessions (89%).

Recommendations

- **Create waitlists of clients who cannot be seen in a timely fashion at each YFC clinic.** This will help document the magnitude of the need for expanded YFC clinical services in the Dallas ISD community.
- **Administer the Parent Survey at end of counseling sessions.** This would provide clients with more experience on which they can reflect and provide more thoughtful responses. This may particularly affect survey items that received fewer positive responses in 2018-19, such as item 9: “Do you feel you met your goals during your counseling sessions at the Youth and Family Centers?”

REFERENCES

- Mejan, M. (2017). 2016-17 Evaluation of the Youth and Family Centers Program (EA17-143-2). Dallas, TX: Dallas Independent School District, Department of Evaluation and Accountability.
- Mejan, M. (2018). 2017-18 Evaluation of the Youth and Family Centers Program (EA18-143-2). Dallas, TX: Dallas Independent School District, Department of Evaluation and Accountability.

APPENDICES

Appendix A

Appendix A: 2018-19 YFC List of Full Professional Development Topics

Professional Development Topics
• Community Liaison Forum • Campus Emergency Response Team Training • Drug Trends Update • Youth Services Librarian • Daring Greatly • Mindfulness Meditation Training for Attention-Deficit/Hyperactivity Disorder • Oppositional Defiant Disorder, Differential Diagnoses of ODD • Jumping the Rope: Acculturation and the Hispanic Family • Self-Injury Among Teenagers • Planning For, and Responding to An Active Shooter • How Teen Pregnancy Impacts Education • Violence Risk Assessment for Students • Therapist Self-Care • Testifying in Court • Working with LGBTQ Youth in Therapy • Safety: How to Survive Flooding • Substance Abuse Treatment Resources • Updates on Various Innovations in Therapy • Adolescent Substance Abuse Screening and Assessment • Discussed Safety Reminders/Refreshers • Overview of How to Conduct Intakes and Process Documentation On-Site and Off-Site at Schools • Review of Updated Clinical Assessment • Review of Parent Orientation Process and Role of Redbird YFC, Reviewed YFC Services • Helping Military Families with Deployment • Applied Ethics in Social Work Setting • Bullying and Evidence-Based Practice for School Social Workers • Conscience Clauses and Resolving Conflict in Social Work Supervision • Wounds Still Open: Interventions Following a Suicidal Crisis • Curriculum Vita vs. Resume • Ensuring Comprehensive Care • Anxiety Issues • Employee Assistance Programs • Motivational Interviewing • Mental Health & Older Adults • Opioid/Opiates • Spectrum of Emotions • Non-Suicidal Self-Injury Behaviors • Sexual Health Practices • Current Perspectives on Sexual Orientation/Gender Identity & Trauma • Dialectical Behavior Therapy: Two-Day Intensive • An Integrated Addiction Model • Youth Depression and Suicide: Prevention and Intervention Strategies • Unlocking Suicidal Secrets: New Thoughts on Old Problems in Suicide Prevention • Dallas ISD Drug and Alcohol Intervention Program: Training • An Integrated Addiction Model • Critical Cases, MS: Dallas ISD • Dissertation Research Presentation • Social Emotional Learning Overview • In-Service--Ross Greene Collaborative Problem Solving • ADHD Group Webinar and Discussion • "No Drama Discipline" • Sandtray Therapy

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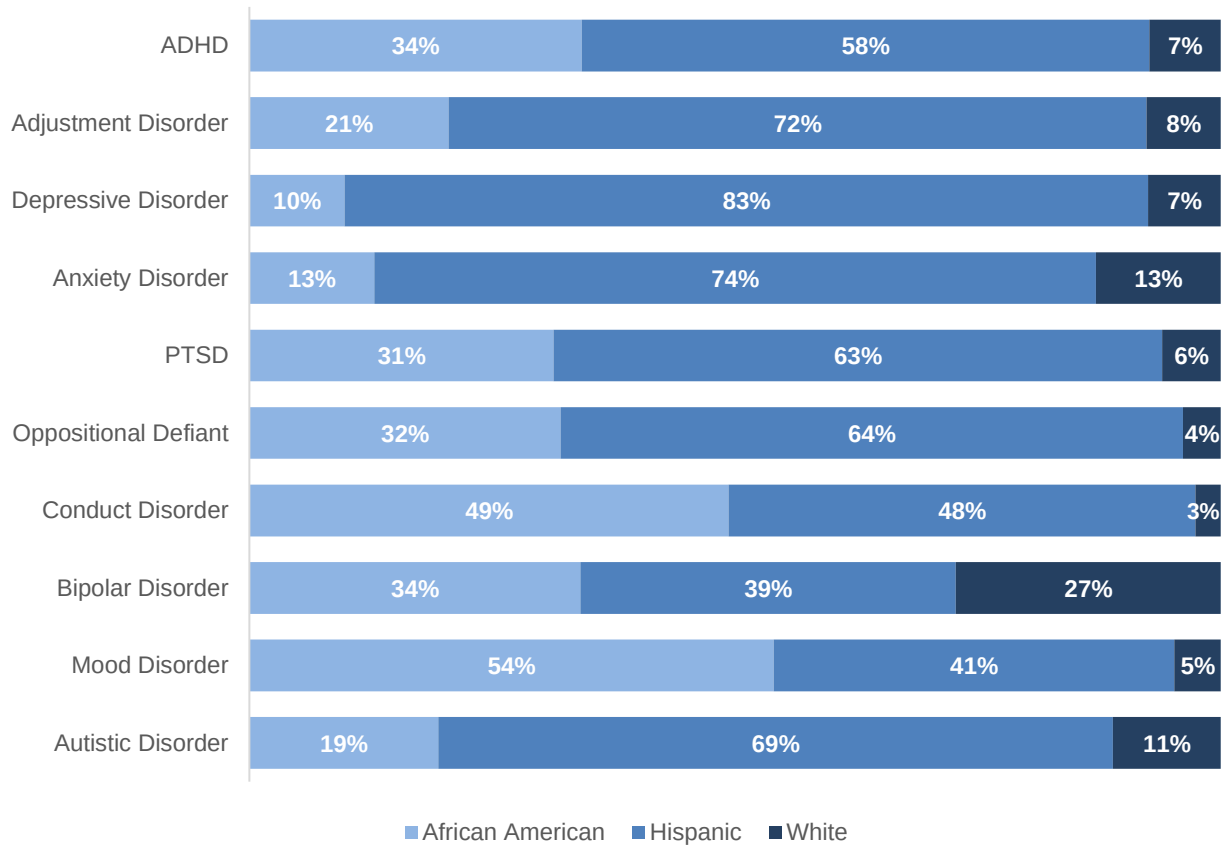
-
- Ethics and Boundary
 - Humanistic Therapy/Therapist Presence
 - Rethinking Culture-the "We" That Matters
 - Beacon Health Options Visit
 - Eagle Scholars Visit (Vickery Meadow Youth Development Foundation)
 - Experiential Group Therapy
 - Meeting with Counselors from West Dallas to Discuss Referral Process and Coordination of Services
 - Presentation from Youth 180 (Drug and Alcohol Agency)
 - Presentation from New Friends/New Life (Agency Providing Services for Trafficked Youth)
-

Source: YFC professional development data file 7/18/2019.

Note: YFC=Youth and Family Centers. ODD=Oppositional Defiant Disorder. LGBTQ=Lesbian, Gay, Bisexual, Transgender, and Queer. MS=Middle School. ADHD=Attention Deficit Hyperactivity Disorder. ISD=Independent School District.

Appendix B

Appendix B: 2018-19 Primary Diagnoses by Ethnicity (10 Most Common)



Source: YFC 2018-19 data file from YFC data manager dated May 29, 2019 and 2018-19 Public Education Information Management System student data file dated October 26, 2018.

Note: ADHD=Attention Deficit Hyperactivity Disorder. PTSD=Post Traumatic Stress Disorder. Top 10 diagnoses accounts for 96% of primary diagnoses by ethnicity in 2018-19. Data includes students and their visits from July 2018 through April 2019. Percentages do not add up to 100 due to rounding.

Appendix C

Appendix C: 2018-19 YFC Student Client Primary Diagnoses by Grade Level

	Grade Level															Total
	EC	PK	KN	1	2	3	4	5	6	7	8	9	10	11	12	
ADHD	1	45	114	194	236	270	294	298	228	167	112	124	76	29	27	2,215
Adjustment Disorder	0	65	80	82	97	100	117	121	127	115	59	65	68	48	33	1,177
Depressive Disorder	0	0	2	6	2	10	18	20	40	59	55	57	83	60	66	478
Anxiety Disorder	0	1	6	5	11	19	21	17	15	15	16	16	18	15	13	188
Oppositional Defiant	0	3	7	3	4	13	17	7	13	8	9	11	5	3	1	104
PTSD	0	1	2	5	3	8	16	7	11	5	7	9	5	6	1	86
Conduct Disorder	0	3	8	8	10	7	7	9	8	1	6	7	3	2	3	82
Mood Disorder	0	1	1	3	4	9	3	10	6	5	5	6	6	3	2	64
Bipolar Disorder	0	0	0	0	1	0	3	5	1	9	2	9	4	7	5	46
Autistic Disorder	0	2	4	6	3	4	4	4	4	2	1	0	0	1	1	36
Total	1	121	224	312	371	440	500	498	453	386	272	304	268	174	152	4,476

Source: YFC data file dated May 29, 2019 and Public Education Information Management System student demographic data file dated October 26, 2018.

Note: ADHD=Attention Deficit Hyperactivity Disorder. PTSD=Post Traumatic Stress Disorder. EC=Early Childhood. PK=Pre-Kindergarten. KN=Kindergarten. YFC=Youth and Family Centers. Top 10 diagnoses accounts for 96% of primary diagnoses by grade in 2018-19. Data includes students and their visits from July 2018 through April 2019.

Appendix D

Appendix D: 2018-19 YFC Parent Survey Results by Site

Adamson YFC Parent Survey (N=39)	Strongly Agree %	Agree %	Neutral %	Disagree %	Strongly Disagree %
1. The staff is friendly and helpful at the Youth and Family Centers.	87	10	3	0	0
2. It was easy to get an appointment with a counselor.	68	30	0	3	0
3. Did you find your visits with the counselor helpful?	85	10	5	0	0
4. The counselor was able to relate to your needs.	83	15	3	0	0
5. The suggestions given by the counselor were helpful?	81	14	3	3	0
6. You were satisfied with the counseling services you received at the Youth and Family Centers.	85	10	5	0	0
7. Did the counseling have a positive impact on you and your family?	85	10	5	0	0
8. You or your family made changes as the result of the counseling you received at the Center?	69	21	8	0	3
9. Do you feel you met your goals during your counseling sessions at the Youth and Family Centers?	54	27	11	8	0
10. You are likely to recommend Youth and Family Center service to a friend or family member?	86	11	0	3	0

Balch Springs YFC Parent Survey (N=33)	Strongly Agree %	Agree %	Neutral %	Disagree %	Strongly Disagree %
1. The staff is friendly and helpful at the Youth and Family Centers.	88	12	0	0	0
2. It was easy to get an appointment with a counselor.	64	21	12	3	0
3. Did you find your visits with the counselor helpful?	79	21	0	0	0
4. The counselor was able to relate to your needs.	79	21	0	0	0
5. The suggestions given by the counselor were helpful?	73	24	3	0	0
6. You were satisfied with the counseling services you received at the Youth and Family Centers.	81	19	0	0	0
7. Did the counseling have a positive impact on you and your family?	70	24	6	0	0
8. You or your family made changes as the result of the counseling you received at the Center?	63	31	6	0	0
9. Do you feel you met your goals during your counseling sessions at the Youth and Family Centers?	57	36	7	0	0
10. You are likely to recommend Youth and Family Center service to a friend or family member?	84	13	3	0	0

Table continues

Table (continued)

Kiosco YFC Parent Survey (N=37)	Strongly Agree %	Agree %	Neutral %	Disagree %	Strongly Disagree %
1. The staff is friendly and helpful at the Youth and Family Centers.	89	6	6	0	0
2. It was easy to get an appointment with a counselor.	42	25	22	8	3
3. Did you find your visits with the counselor helpful?	78	16	5	0	0
4. The counselor was able to relate to your needs.	76	14	11	0	0
5. The suggestions given by the counselor were helpful?	84	11	5	0	0
6. You were satisfied with the counseling services you received at the Youth and Family Centers.	81	11	8	0	0
7. Did the counseling have a positive impact on you and your family?	76	19	5	0	0
8. You or your family made changes as the result of the counseling you received at the Center?	67	28	6	0	0
9. Do you feel you met your goals during your counseling sessions at the Youth and Family Centers?	64	31	6	0	0
10. You are likely to recommend Youth and Family Center service to a friend or family member?	86	11	3	0	0

Redbird YFC Parent Survey (N=31)	Strongly Agree %	Agree %	Neutral %	Disagree %	Strongly Disagree %
1. The staff is friendly and helpful at the Youth and Family Centers.	87	10	3	0	0
2. It was easy to get an appointment with a counselor.	68	26	6	0	0
3. Did you find your visits with the counselor helpful?	80	17	3	0	0
4. The counselor was able to relate to your needs.	83	13	3	0	0
5. The suggestions given by the counselor were helpful?	90	7	3	0	0
6. You were satisfied with the counseling services you received at the Youth and Family Centers.	83	13	3	0	0
7. Did the counseling have a positive impact on you and your family?	80	17	3	0	0
8. You or your family made changes as the result of the counseling you received at the Center?	80	17	3	0	0
9. Do you feel you met your goals during your counseling sessions at the Youth and Family Centers?	77	20	3	0	0
10. You are likely to recommend Youth and Family Center service to a friend or family member?	87	10	3	0	0

Table continues

Table (continued)

Seagoville YFC Parent Survey (N=38)	Strongly Agree %	Agree %	Neutral %	Disagree %	Strongly Disagree %
1. The staff is friendly and helpful at the Youth and Family Centers.	84	11	3	0	3
2. It was easy to get an appointment with a counselor.	55	39	3	0	3
3. Did you find your visits with the counselor helpful?	68	26	3	0	3
4. The counselor was able to relate to your needs.	71	24	3	0	3
5. The suggestions given by the counselor were helpful?	63	26	8	0	3
6. You were satisfied with the counseling services you received at the Youth and Family Centers.	68	27	3	0	3
7. Did the counseling have a positive impact on you and your family?	66	24	8	0	3
8. You or your family made changes as the result of the counseling you received at the Center?	62	30	5	0	3
9. Do you feel you met your goals during your counseling sessions at the Youth and Family Centers?	50	28	19	0	3
10. You are likely to recommend Youth and Family Center service to a friend or family member?	78	17	3	0	3

West Dallas YFC Parent Survey (N=31)	Strongly Agree %	Agree %	Neutral %	Disagree %	Strongly Disagree %
1. The staff is friendly and helpful at the Youth and Family Centers.	84	16	0	0	0
2. It was easy to get an appointment with a counselor.	84	16	0	0	0
3. Did you find your visits with the counselor helpful?	84	16	0	0	0
4. The counselor was able to relate to your needs.	84	16	0	0	0
5. The suggestions given by the counselor were helpful?	86	14	0	0	0
6. You were satisfied with the counseling services you received at the Youth and Family Centers.	77	23	0	0	0
7. Did the counseling have a positive impact on you and your family?	79	21	0	0	0
8. You or your family made changes as the result of the counseling you received at the Center?	73	27	0	0	0
9. Do you feel you met your goals during your counseling sessions at the Youth and Family Centers?	57	43	0	0	0
10. You are likely to recommend Youth and Family Center service to a friend or family member?	83	17	0	0	0

Table continues

Table (continued)

Wilmer-Hutchins YFC Parent Survey (N=40)	Strongly Agree %	Agree %	Neutral %	Disagree %	Strongly Disagree %
1. The staff is friendly and helpful at the Youth and Family Centers.	95	5	0	0	0
2. It was easy to get an appointment with a counselor.	93	8	0	0	0
3. Did you find your visits with the counselor helpful?	90	10	0	0	0
4. The counselor was able to relate to your needs.	85	10	5	0	0
5. The suggestions given by the counselor were helpful?	85	13	3	0	0
6. You were satisfied with the counseling services you received at the Youth and Family Centers.	86	14	0	0	0
7. Did the counseling have a positive impact on you and your family?	73	25	3	0	0
8. You or your family made changes as the result of the counseling you received at the Center?	47	39	11	0	3
9. Do you feel you met your goals during your counseling sessions at the Youth and Family Centers?	61	22	17	0	0
10. You are likely to recommend Youth and Family Center service to a friend or family member?	86	14	0	0	0

Woodrow YFC Parent Survey (N=41)	Strongly Agree %	Agree %	Neutral %	Disagree %	Strongly Disagree %
1. The staff is friendly and helpful at the Youth and Family Centers.	85	15	0	0	0
2. It was easy to get an appointment with a counselor.	63	33	2	2	0
3. Did you find your visits with the counselor helpful?	65	35	0	0	0
4. The counselor was able to relate to your needs.	49	51	0	0	0
5. The suggestions given by the counselor were helpful?	56	44	0	0	0
6. You were satisfied with the counseling services you received at the Youth and Family Centers.	63	38	0	0	0
7. Did the counseling have a positive impact on you and your family?	56	32	12	0	0
8. You or your family made changes as the result of the counseling you received at the Center?	40	53	8	0	0
9. Do you feel you met your goals during your counseling sessions at the Youth and Family Centers?	44	49	7	0	0
10. You are likely to recommend Youth and Family Center service to a friend or family member?	65	33	3	0	0

Source: YFC 2018-19 parent survey data file dated June 19, 2019.

Note: YFC=Youth and Family Centers. Some percentages do not add up to 100 due to rounding. No surveys were received from the other three sites.