“I never felt like [my children] were being treated like victims. I felt like they were being protected, for sure, but they were treated like people and kids, and not numbers … I actually left here and I remember telling several people that I was amazed at how well the system had worked for us.”

– Caregiver
Acknowledgements

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Work on this evaluation was guided by a Steering Committee that includes representatives from a number of different agencies and organizations that work with children. A list of Steering Committee members is included in Appendix A. We thank all Steering Committee members for their time and feedback.

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Executive Summary

Introduction

A Child and Youth Advocacy Centre (CYAC) provides an integrated, multi-disciplinary, and child/youth-friendly approach to service delivery for children and youth who have been victims of maltreatment, and acts as a single point of access for related services. The CYAC model aligns closely with priorities identified in Nova Scotia around greater coordination and collaboration between departments and agencies offering services and supports to children and youth, and the need to address issues related to sexual violence.

In 2010 in Nova Scotia, a multi-departmental Steering Committee, led by the IWK Health Centre (Child Protection Team), was convened to lead the development of a CYAC in the province (please see the list of committee members, Appendix A), and received development funding in 2011 from the federal government to create the SeaStar CYAC. As a first step, the Steering Committee created the CYAC Demonstration Program, which was launched in December 2012.

The Demonstration Program includes the following elements: a child- and youth-friendly CYAC location (created at the IWK using a re-allocation of existing space) equipped with appropriate technology to support forensic interviewing; conducting joint forensic interviews, medical exams, and other client meetings at the Demonstration Program location; the creation of a new part-time Child and Youth Advocate (CY Advocate) to offer additional support to families; and the development of a consent form to facilitate information sharing among partner organizations working with the CYAC.

The CYAC Demonstration Program has now been in operation for over 8 months, and the Steering Committee engaged Research Power Inc. (RPI), an independent health research and evaluation firm, to conduct an evaluation of the Demonstration Program. Data was collected through five interviews with non-offending caregivers whose children had received services through the CYAC Demonstration Program; three focus groups with the CYAC Steering Committee, the Project Management Team, and frontline staff with DCS and law enforcement who have used the Demonstration Program; and a review of quantitative data on program usage and outcomes.

Findings

Program Usage and Outcomes

From December 3, 2012 to August 6, 2013, a total of 113 cases participated in the Demonstration Program. Clients were spread fairly evenly across age categories (under 7, 7-12, and 13 or older), and the majority were female. The types of cases most commonly seen through the Demonstration Program were physical assault and historical sexual assault. Almost all cases involved a joint investigation between law enforcement and the Department of Community Services (DCS). Other services received included support from the Child and Youth Advocate, interviews of siblings and/or the non-offending caregiver, and medical exams.

The majority of clients received all initial services (forensic interview, medical exam, and/or advocate support as applicable) within 3 days of the date of referral. A little over one-third of the 113 cases seen in the Demonstration Program (42%) continue to receive ongoing Advocate support; the remainder have concluded their involvement with the CYAC.
The data on investigation outcomes for cases participating in the Demonstration Program is incomplete, but in cases where the outcome is known, allegations were substantiated, charges were laid, and arrests made for the majority of cases of acute sexual assault and ‘other’ types of abuse. Substantiation also occurred in about half of historical sexual assault cases (52%).

Implementation

The implementation of the Demonstration Program was generally felt to have gone well. Factors that supported initial implementation included the way the Demonstration Program was structured to not involve a significant change in practice; the information and open house sessions held at the outset of the Program; and the funding support that was available through the Federal Government.

Successes

Successes of the Demonstration Program include the following:

• **A positive experience for families**: The Demonstration Program offered as positive an experience for families as was possible given the circumstances, and was a more positive experience than expected for some caregivers.

• **A supportive and child-friendly environment**: The location of the Demonstration Program provided a comfortable environment for families, including child-friendly surroundings such as age-appropriate books and toys.

• **The new Child and Youth Advocate role**: The CY Advocate was able to offer families valuable support during and after their forensic interview(s), as well as information about the process and follow up support.

• **Strengthening partnerships and relationships between organizations**: The work to develop and implement the Demonstration Program has helped to strengthen partnerships and relationships between the different organizations and staff involved, including at both frontline staff and management levels.

• **Services were timely and well-coordinated**: Clients received services that were well-coordinated and timely, especially for those who required a medical exam, which was available on-site.

• **The Demonstration Program location was convenient and private**: The CYAC Demonstration Program location was described to be generally easy to find and conveniently located for both clients and staff. Caregivers felt the location offered them privacy.

• **The Demonstration Program helped to support the development of the full SeaStar CYAC**: The Demonstration Program has helped all stakeholders better understand how the full CYAC will operate from a practical perspective, and has helped to identify a number of challenges and/or decisions that have to be addressed in order to move forward.
Facilitating Factors

The following factors were identified as supporting the successes achieved by the Demonstration Program:

- **Co-location of medical and forensic interview services**: The co-location of services at the CYAC Demonstration Program location facilitated the coordination and more timely receipt of services for families, particularly for those who required a medical exam.

- **Role of the CYAC Coordinator**: The full-time CYAC Coordinator provided important supports in developing and conducting the Demonstration Program (e.g. process development, organizing meetings, developing documentation, background research, etc.).

- **The skills and expertise of the CY Advocate**: The specific skills and experience of the current CY Advocate (e.g. experience working with the IWK Child Protection Team and DCS) were important facilitators to the success of that role.

- **Supports provided to both clients and partner agencies**: Supports for partner agencies included well-functioning technical equipment, appropriate space for interviews, and support for those accessing the space after-hours. Supports for families included arranging food, covering the costs of parking, and accessing services available through the IWK Health Centre’s Child Life Program.

- **Demonstration Program adaptability and flexibility in implementation**: Being flexible and adaptable as the Demonstration Program progressed was important in order to make changes as new needs were identified.
Challenges

Challenges identified include:

- **Lack of access to mental health services:** Although the provision of mental health services was not part of the Demonstration Program, it is important to note that access to mental health services continues to be a challenge in terms of the overall system and supports that are in place to address child maltreatment.

- **The location and available space of the Demonstration Program location:** The current Demonstration Program location, developed using existing space, had limited room available for clients. This led to occasional crowding or clients arriving/leaving at the same time. The location at the IWK Health Centre was felt to be difficult to access for some.

- **Information sharing between providers/partners:** Although information sharing on CYAC cases has improved as a result of the Demonstration Program, some challenges with information sharing were still experienced by clients and frontline workers.

- **Unclear or lack of information provided to clients:** A few caregivers noted that information they received about the forensic interview process and/or follow up information on their case was at times unclear or not provided.

- **The participation and engagement of stakeholders:** Although improved collaboration was noted as a success of the Demonstration Program, a few stakeholders also noted challenges with the participation and engagement of partner agencies, mostly connected to the complex nature of the work and the fact that so many different partners are involved.

- **Data Collection:** The Demonstration Program experienced challenges in collection of data for cases that did and did not participate in the Demonstration Program. The referral form was not well-used and case outcome information was not always available.

- **The lack of a full-time CY Advocate:** The Child and Youth Advocate position for the Demonstration Program is only a 0.3 FTE position, and this was not sufficient to meet the caseload and needs of Demonstration Program clients.
Suggested Changes for the Demonstration Program and/or the SeaStar CYAC

The following recommendations were made for changes to both the Demonstration Program and the full SeaStar CYAC once it is implemented:

• **CYAC space and location:** Suggested changes to the space and location of the CYAC such as having a larger space with more waiting rooms, more interview rooms, and more bathrooms; having a stand-alone space (e.g. a house); and choosing a more central location that is easily accessible by transit and vehicle (i.e. with sufficient parking) should be considered in the development of the full CYAC.

• **Follow up support for families:** Some additional supports for families that could be provided include connecting families with Victim Services more proactively; ongoing check-ins with the family; updating the family with progress or information about the case; supporting families while they are waiting to access other services after their initial forensic interview; and providing support to families in understanding and accepting the outcome of the case.

• **Co-location of services:** CYAC services and staff (e.g. DCS staff, law enforcement, Victim Services staff, prosecutors, CYAC staff) would ideally be physically located in the same CYAC space in the future.

• **Staff and services required:** Additional staff were identified to help support a future CYAC, including greater mental health supports, a full-time CY Advocate, CYAC administrative staff, dedicated law enforcement, DCS staff, and prosecutors, and staff to provide support to families (e.g. clown, baby-sitters for children not being interviewed).

• **The Child and Youth Advocate role:** This role needs further definition and clarity, particularly in relation to how the CY Advocate receives information about ongoing cases and how they act on that information.

• **Financial sustainability:** The need for ongoing financial sustainability for the CYAC was noted.

• **Case tracking:** The tracking of data related to the Demonstration Program (e.g. case outcomes, cases not seen through the Demonstration Program) could be improved.

• **Case review:** Formal review of cases by all partners involved in the investigation has not yet occurred, but will be an important part of the process for both the Demonstration Program and the full CYAC.
Recommendations

The following recommendations flow from the evaluation findings:

• Continue to develop and expand the CYAC services, with the goal of eventually making services available to all clients across the province.

• Ensure the CYAC is adequately resourced and supported by identifying and securing new sources of funding to support continued operation going forward.

• Continue to define and expand CYAC services and supports, such as mapping out ongoing follow up processes for families and enhancing access to mental health supports.

• Maintain and expand the Child and Youth Advocate role, ideally to a full-time position.

• Move towards full co-location of services, i.e. some or all staff working on CYAC cases will be physically co-located in the same space on a full-time or part-time basis.

• Continue to develop processes and mechanisms that will enhance information sharing between all partners in the CYAC work (e.g. implementing case meetings, where all partners involved in a case discuss and receive updates on the case’s progress).

• Improve the data that is collected on services provided through the Demonstration Program/CYAC, as well as cases seen outside the CYAC in order to support evaluation and planning.

• Conduct ongoing monitoring and evaluation of the CYAC Demonstration Program and future SeaStar CYAC, and ensure evaluation is considered and incorporated from the outset in the operations of the SeaStar CYAC.