2012-2013 HAMILTON CAPC LOCAL EVALUATION

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1.0 INTRODUCTION AND BACKGROUND

1.1 Project Description

The Community Action Program for Children (CAPC) is a national program aimed at promoting child health and wellbeing through early, preventative interventions with children 6 years of age and under and their families. As part of this national program, Hamilton CAPC has provided services and supports to families with children 6 years of age and under in east Hamilton, focusing particularly on families with lower incomes or who are experiencing social or geographic isolation, since 1993. The CAPC catchment area is east Hamilton and Stoney Creek with the area boundaries of Lake Ontario (north), 50 Road (east), the Hamilton escarpment (south) and Strathearne Road (west).

The Social Planning and Research Council of Hamilton (SPRC) serves as the sponsoring agency for the project. The Hamilton CAPC Council, which consists of residents of the CAPC catchment area, acts as a connecting group between Hamilton CAPC and the wider community, raising issues of concern, developing responses, and providing input into the project as it seeks to achieve its goals.

1.2 Project Mission, Goals and Objectives

The mission of the CAPC project is as follows:

- CAPC provides the opportunity for residents of east Hamilton/Stoney Creek to play an active role in planning for their communities.
- CAPC believes that families/community want to provide the best for their young children, but there is a reality of barriers to resources, which is a serious restriction to goal achievement.
- CAPC feels that active involvement of community residents (living or working in the area) is the key to reducing these barriers and improving child health.

The goals and objectives of the CAPC program are:

- To improve the health and wellbeing of children aged 0 6
- To work with parents to make parenting easier
- To reduce child abuse and neglect
- To work collaboratively with community members to direct and improve CAPC so as to best serve the needs of parents and children

1.3 Program Descriptions and Changes

At the time of release for this report, Hamilton's CAPC project provides ten partnering programs for children and families in the CAPC catchment area. Between April 1, 2012 and March 31, 2013, one new program, the Systems Navigation Program, was launched, while another, babyshowers, was discontinued. Another partner program, Skills Through Activities and Recreation (STAR), has undergone some organizational changes during that time, outlined below.

The other partnering programs are: Community Access to Child Health (CATCH), Boys and Girls Club of Hamilton, Hamilton Public Library, Home Management Program, Today's Family Early Learning and Childcare, Catholic Family Services, Immigrant Women's Centre, and Hamilton Partners in Nutrition.

Systems Navigation Program

The objective of the Systems Navigation Program is to increase service system access for parents of children newborn to six years of age in east Hamilton. This is achieved through one-on-one support and educational opportunities targeted toward increased connection to various child and family systems. In particular, the program focuses on families from diverse ethno-racial communities who face increased barriers to service systems in Hamilton. This program currently operates as a pilot project that will be assessed independently of this local evaluation of the Hamilton CAPC project as a whole. To assess the reach and impacts of this program, a tracking form was developed collaboratively by the evaluator and CAPC staff to allow for efficient and straightforward data collection.

babyshowers

babyshowers is an independent, nonprofit organization committed to helping families meet the basic needs of their children. They collect new and gently used baby and toddler items to give through established community agencies in Hamilton. Referrals are made through Public Health Nurses, Family Home Visitors, Hamilton Health Sciences, St. Martin's Manor, the Maternity Centre, St. Joseph's Immigrant Women's Centre, CATCH, and The Hamilton Children's Hospital. The babyshowers program discontinued as of February 28, 2013. As an entirely volunteer-run program, maintaining the service in the CAPC catchment area became challenging.

Skills Through Activities and Recreation (STAR)

STAR provides skill development programs for children between the ages of 5 to 15 in order to address the challenges faced by low-income families. STAR's goal is to provide children with opportunities for participation in recreational activities and to promote an interest in positive activities for children. Their partnership with CAPC enables the participation of 5 and 6 year olds in the programs. In the past year STAR's Board of Directors decided to formally dissolve the organization, but STAR is transitioning to a project of the Boys and Girls Clubs of Hamilton.

Community Access to Child Health (CATCH)

CATCH is a community development program in east Hamilton and Stoney Creek. The goal of the program is to work together with community residents in promoting healthy children, families and community support. CATCH strives to create safer environments for children both inside and outside the home by offering a variety of programs including a Parent and Tot Interactive Playgroup.

Boys and Girls Club of Hamilton

Boys and Girls Club of Hamilton operate a Lunch and Life Skills Program which offers the opportunity for parents to prepare nutritious lunches and snacks. They also provide a Multicultural Parent Education Program that addresses the needs of newcomer families in the areas of education and employment.

Hamilton Public Library – Red Hill Branch

The Hamilton Public Library offers the Multicultural Early learning Development Project (MELD) intended to reach newcomer families and provide parents with supports for their children's early learning and school readiness development. Supports include dual language family workbooks, accessible dual language collection and family based programs including the Summer Reading Club and Storytime for Newcomer Families.

Home Management Program

The Home Management Program offered by the City of Hamilton Public Health Services is designed to support and assist parents with children ages 0 to 6. Home Management Workers meet with parents in their homes and focus on the development of life skills, child rearing skills and household management skills. In addition, they assist parents in the development of action plans for returning to school or finding employment.

Today's Family Early Learning and Child Care

Today's Family is a multi-service agency that strives to meet the diverse cultural, social and economic needs of families. In partnership with CAPC, Today's Family provides supports to enable local residents to start up small childcare businesses in their own homes including regular home visits. This partnership addresses the issues of a lack of childcare spaces in the area and the difficulty experienced by the newcomer population finding work in Canada.

Hamilton Partners in Nutrition (HPIN)

Hamilton Partners in Nutrition (HPIN) is a partnership of community agencies and community members that supports and facilitates local student nutrition programs for children and youth in Hamilton. Hamilton CAPC offers some financial support to HPIN programs in the catchment area to help address need for nutritious food as part of healthy child development.

Immigrant Women's Centre (IWC)

Immigrant Women's Centre (IWC) works with immigrant and refugee women and their families towards their mission of clients fully participating in a just and supportive Canadian Society. The partnership between CAPC and IWC seeks to strengthen connections between services aimed at immigrant and refugee women and services aimed at families with young children. Part of this partnership entails the CAPC Community Outreach/Volunteer Coordinator offering support at the IWC office one day per week (Thursdays). In addition, Hamilton CAPC partners with IWC to provide monthly educational workshops for newcomer families with young children.

Catholic Family Services (CFS)

CAPC's partnership with Catholic Family Services (CFS) supports modest enhancements to the Young Parent Network in order to provide additional services and participation incentives for programs offered to Angela's Place tenants and young parents in the community. These supports are for a fathering group and a young mother's respite service.

1.4 Evaluation Objectives

The objectives of this local evaluation are as follows:

- Using numerical data provided by program partners previously collected as part of the Public Health Agency of Canada's Integrated National Assessment Tool (INAT), describe numbers of sub-groups of participants and visits within each program.
- Collect stories from program partners about ways that their programs are making a difference in individual families' lives under each of the three program priorities, as well as challenges or unexpected outcomes experienced by partners.

These objectives were met through a mix of quantitative and qualitative research methods, described in the following section.

2.0 METHODOLOGY

Each partner organization submitted complete reports on the numbers of caregivers, children 0-6, and visits among participants in their CAPC supported program (among other information). This information was previously part of the Integrated National Assessment Tool (INAT) evaluation conducted by the Public Health Agency of Canada, but this piece of evaluation is not being carried out at the national level at this time. Valuable information from this tool formed a major component of this local evaluation. Numbers of caregivers, children 0-6, and visits at each Hamilton CAPC partner program were totalled for each program. Monthly averages for each of these indicators were also calculated. For programs that operated for less than the 12 months of the evaluation period, averages were calculated using only months during which they operated. (Initially, the evaluation plan was to graph monthly participation for these indicators, but since no pattern emerged it was decided that totals for the year and monthly averages were more meaningful.)

To supplement the quantitative data found from the INAT evaluation tool with qualitative data, service providers were also consulted through a focus group on February 25th, 2013. Supplementary interviews were conducted with service providers who were not able to attend the focus group. In the focus group and interviews, service providers were asked to provide example stories of how their partner programs are impacting individual families, and what challenges or unexpected outcomes they experienced in their program. While service providers offered a wide range of stories from their programs, only a selection of these examples are discussed below.

3.0 KEY FINDINGS

3.1 Service Provider Program Participation Numbers

The table below demonstrates the total number across all of Hamilton CAPC's program partners of parents or caregivers who participated, the number of visits, and the number of children 0-6 who participated.

It is important to note that the total participation numbers for children and parents/caregivers are sums of monthly participation reports submitted by program partners, which may include the same participants from one month to another. Thus, the total number of participants should be interpreted with caution as total participation numbers may be lower than reported figures.

Overall

| | # of parents/caregivers who participated | # of visits | # of children ages 0 – 6 who participated |
|-------|--|-------------|--|
| Total | 3,705 | 9,868 | 7,058 |

Through all partner programs combined, Hamilton CAPC provided support to 3,705 parents/caregivers, 7,058 children ages newborn to 6 years, through 9,868 visits between April 1, 2012 and March 31, 2013. For each service provider partner, the following information is provided in tables below:

- Total number of caregiver participants, and the monthly average, from April 2012 to March 2013
- Total number of visits, and the monthly average, from April 2012 to March 2013
- Total child participants aged newborn to 6 years, and the monthly average, from April 2012 to March 2013

Although data on the same indicators is shown for each program partner in the tables below, it is also important to use caution in making comparisons between programs because of the diversity in the nature of the partner programs. Each program has its own unique objectives, format, and target population and so cannot be compared to one another meaningfully.

Systems Support Worker

| | # of parents/caregivers who participated | # of visits | # of children ages 0 – 6 who participated |
|-----------------|---|-------------|--|
| Total | 104 | 240 | 50 |
| Monthly Average | 26 | 60 | 13 |

- This program has supported 104 parents or caregivers since beginning in December 2012.
- The fact that the monthly average number of visits (60) is more than double the monthly average number of parents/givers who participated suggests that many households receive support multiple times within a month. This is not surprising given the one-to-one support offered through this program.

babyshowers

| | # of parents/caregivers who participated | # of visits | # of children ages 0 – 6 who participated |
|-----------------|--|-------------|--|
| Total | 18 | 18 | 23 |
| Monthly Average | 2 | 2 | 2 |

- This volunteer-run program provided items to 13 families with newborn babies (number of visits) over the past year.
- babyshowers discontinued its operations in the CAPC catchment area as of February 28, 2013.

Skills Through Activity and Recreation (STAR)

| | # of parents/caregivers who participated | # of visits | # of children ages 0 – 6 who participated |
|-----------------|---|-------------|--|
| Total | 0 | 0 | 561 |
| Monthly Average | 0 | 0 | 51 |

- The STAR program serves children ages 5-15, including 561 children ages 5 or 6 over the past year, which is why no parents or caregivers participated.
- The actual number of visits is likely greater than the reported number of visits.

CATCH

| | # of parents/caregivers who participated | # of visits | # of children ages 0 – 6 who participated |
|-----------------|--|-------------|--|
| Total | 288 | 1395 | 851 |
| Monthly Average | 24 | 116 | 71 |

- CATCH supports a large number of families in east Hamilton, with an average of 116 monthly visits.
- The program supports more young children (851 over the past year) than parents (288 over the past year).

Home Management Worker

| | # of parents/caregivers who participated | # of visits | # of children ages 0 – 6 who participated |
|-----------------|--|-------------|--|
| Total | 376 | 1093 | 296 |
| Monthly Average | 31 | 91 | 25 |

- The Home Management Worker program supported a fairly large number of parents/caregivers (376) and children newborn to six years old (296) over the last year.
- The fact that the average monthly visits in this program (91) is nearly triple the monthly average of parents/caregivers who participated (31) suggests that many households are supported through multiple visits per month in this program. Like in the Systems Navigation Program, this program employs a one-to-one model, making multiple visits within a given month fairly common.

Hamilton Public Library

| | # of parents/caregivers who participated | # of Visits | # of children ages 0 – 6 who participated |
|-----------------|--|-------------|--|
| Total | 445 | 511 | 901 |
| Monthly Average | 37 | 43 | 75 |

- The Hamilton Public Library's CAPC supported program serves more than double the number of young children (901 total) as parents (445 total), suggesting that many parents/caregivers who participate in the program have multiple children.
- The monthly average of visits is slightly higher than the number of parents/caregivers, suggesting that a small number of families participate more than once monthly.

Boys & Girls Club

| | # of parents/caregivers who participated | # of visits | # of children ages 0 – 6 who participated |
|-----------------|--|-------------|--|
| Total | 1866 | 5897 | 4022 |
| Monthly Average | 156 | 491 | 335 |

- The Boys and Girls Club supports a large number of families, reflecting in part both that the organization operates two programs with CAPC support, and that these use a group model where many households participate at once.
- Average monthly visits being more than triple the monthly average of parents/caregivers participating, and nearly one-and-a-half times the average monthly participation of young children suggests that most families participate more than once monthly, and that many households have multiple children.

Today's Family

| | # of parents/caregivers | # of visits | # of children ages |
|-----------------|-------------------------|-------------|------------------------|
| | who participated | | 0 – 6 who participated |
| Total | 319 | 355 | 354 |
| Monthly Average | 27 | 30 | 30 |

- Slightly more children (354) than parents/caregivers (319) participated in Today's Family's CAPC supported program over the past year. As for other programs, this suggests that some households accessed child care for more than one child.
- Given that the monthly average number of visits to this program (30) exceeds the monthly average of parents/caregivers who participated (27) slightly, it appears that regular visits to these licensed, home-based child care providers are taking place.

Community Action Program for Children (CAPC)

| | # of parents/caregivers who participated | # of visits | # of children ages 0 – 6 who participated |
|-----------------|--|-------------|--|
| Total | 266 | 341 | 0 |
| Monthly Average | 22 | 28 | 0 |

- As this program serves only parents of young children, no children participated in the program.
- A small number of parents/caregivers seek support from CAPC more than once monthly, given that average monthly visits (28) exceed the monthly average of parents/caregivers (22) somewhat.

Immigrant Women's Centre (IWC)

| | # of parents/caregivers who participated | # of visits | # of children ages 0 – 6 who participated |
|-----------------|--|-------------|---|
| Total | 23 | 23 | 0 |
| Monthly Average | 2 | 2 | 0 |

- The total number of parents/caregivers who participated in this program is equal to the number of visits, indicating that community members who access supports through this program typically do so once.
- This program is focused on supporting parents of young children, and so no young children participate directly in the program.

3.2 Service Provider Focus Group and Supplementary Interviews

Service providers shared many stories of how their programs had been helped an individual client or family in relation to one of the three program focus areas (mental health promotion, injury prevention, or healthy weights). Below is a selection of these anecdotes:

- In a family with three children (two between the ages of 0 and 6), a mother began struggling with mental health issues after her brother died. She was accompanied by a program partner to the family physician, who referred her to a psychiatrist. She now receives grief counselling and other mental health resources. The father husband stayed home with their baby so she could recover. (Mental health promotion)
- At healthy snack and lunch programs, partners have observed children eating vegetables that are new to them, such as asparagus (Healthy weights)
- Two parent participants have food handler certificates and are now employed as cooks with a partner program. One is now looking to do an Early Childhood Education (ECE) apprenticeship. (Mental health promotion)
- One woman attending a partner program could not read 10 years ago, and today has her GED (high school equivalency). She also offered the idea of advertising OEYCs on city buses. She often uses the phrase "follow me to the OEYC" to help encourage people to attend and participate at OEYCs. (Mental health promotion)
- A woman struggling with anxiety had difficulty coming to a community room at one program. She attended public health workshop about anxiety, gathered resources, and now wants to lead parent chat about anxiety and share information with other families at the program. She is also organizing others to go and visit another volunteer who is in the hospital. (Mental health promotion)
- One client wanted to be a caregiver, but her apartment was not suitable because of maintenance issues. She moved, and her new dwelling was acceptable. She became a caregiver with a partner organization, and a staff member was recently invited to the home that the client had bought. (Injury prevention)
- When one grandmother's grandson began attending to daycare, the grandmother felt lonely and began to abuse medication. She received support from a program partner, and is now off medication, exercising, and receiving counselling. She also now helps organize events. (Mental health promotion)
- One young mother has found a program partner's respite service crucial, as she currently attends
 college and is headed to university next year. The mother works with staff and gets help with
 homework, focusing on educational goals during that time. (Mental health promotion)
- A young mother who had had some street involvement was housed at a partner program. Her partner became homeless but was then housed at another location. The father would bring the child to the Ontario Early Years Centre, and support the mother when the baby was in respite care by going grocery shopping or cleaning her housing unit. The fathering group was also a support for the father. They are now living together as a family unit after receiving supports giving them the opportunity to grow as a family unit before they were on their own. (Mental health promotion)

Program partners were also asked about challenges/unexpected outcomes they had experienced in the past year. Several themes emerged from the discussions, as outlined below.

- Funding was the most common challenge described by program partners. Maintaining service levels as costs rise while funding remains the same, and growing demand for some programs (such as nutrition-based programs and subsidized childcare) make funding a challenge. For some partners this means no longer being able to offer bus tickets to participants.
- Reaching out to newcomer communities, young fathers, and socially isolated clients was another common theme.
- Staffing is challenge for some partners, particularly those employing early child educators (ECEs). The growth of full-day kindergarten has led to an increasing demand from school boards for trained ECEs, which is attracting many ECEs employed by community organizations as well as new ECE graduates, thus limiting the supply of trained workers for community organizations.
- Recruiting, coaching, and mentoring enough volunteers was a challenge for some programs.
- Community members seeking a service or support that is unknown or unavailable was challenging for some partners. An example of this is combined language and faith programs, such as Arabic and Koran classes.

3.3 CAPC Priorities Addressed By Partners

The chart below shows all of the target outcomes under the Public Health Agency of Canada's three priorities for CAPC programs (Mental Health Promotion, Injury Prevention, and Healthy Weights). Those addressed by one or more of Hamilton CAPC's partners in the past year are marked with an "X". For Mental Health Promotion, 11 of 13 outcomes were addressed. Under Injury Prevention, 6 of 8 outcomes were addressed; the two that were not addressed were rural/farm safety and hunting/fishing safety, both of which relate to activities that are less common in urban environments like Hamilton. Under Healthy Weights, 11 of 12 outcomes were addressed. These findings demonstrate that Hamilton CAPC programs are meeting the vast majority of the target outcomes for the program (28 of 33, or 85%).

| Mental Health Promotion Check outcome(s) addressed | Injury Prevention Check outcome(s) addressed | Healthy Weights Check outcome(s) addressed |
|--|--|---|
| X Social isolation X Family violence Substance abuse/addictions FASD X Mental health support or education Postpartum depression X Parent or child self- esteem/positive sense of self X Parent-child attachment X Positive parenting/Father Involvement X Parent or child coping skills X Parent leadership development X Community participation Other: | X Car seat safety Home environment safety (i.e., child proofing) X Toy and play safety education X Road, Bike and/or ATV safety Rural/farm safety Hunting/fishing safety X Child Safety Other: | X Healthy pregnancy weight gain Prenatal support or education X Prenatal nutrition X Postnatal support or education X Breastfeeding X Physical activity/active lifestyle X Obesity prevention X Food security assistance X Collective food preparation and/or purchasing X Nutrition education/healthy eating X Traditional Aboriginal foods & education X Other: |

4.0 DISCUSSION AND RECOMMENDATIONS

This evaluation has focused on reporting levels of program participation that was previously collected for the Public Health Agency of Canada's INAT, supplementing these figures with examples from program partners of success stories and challenges.

As discussed earlier, because of the uniqueness of each partner program it is advisable not to compare participation levels between programs. Taken together, however, Hamilton CAPC program partners are addressing a significant majority of the outcomes established by Public Health Agency of Canada.

Some challenges experienced by program partners could be partly addressed through mutual support and information sharing among partners and/or facilitated by Hamilton CAPC. Specifically, partners may be able to support one another and/or share information to address the following:

- Reaching out to newcomer communities, young fathers, and socially isolated clients
- Recruiting, coaching, and mentoring volunteers
- Community members seeking a service or support that is unknown or unavailable

Other challenges discussed by program partners, such as funding and staffing, are broader than the scope of influence of CAPC as a coordinating program, though continuing to be aware of such challenges is worthwhile.

In terms of evaluation itself, it is recommended that Hamilton CAPC continue to collect monthly program participation data from partners in the previously-used INAT template. This allows for comparison across years and does not require any additional reporting from partners. Further, it is recommended that Hamilton CAPC continue to track and evaluate the impacts of the System Navigation Program, as is already planned. Finally, the sharing of success stories among service providers in the focus group, which took place at a monthly service providers meeting, seemed to be a positive experience for many participants; this format could be considered for use in future evaluations as well.

APPENDIX A - CAPC SERVICE PROVIDER FOCUS GROUP QUESTIONS

(The same questions were used for supplementary interviews with partners who did not participate in the focus group.)

1. Please describe one time (or situation) when one of your CAPC supported programs helped a client or family who accesses that program in relation to one priority area your program focuses on (mental health promotion, injury prevention, or healthy weights).

In other words, what is one example of how your program is really working to make a difference in one of the priority areas?

Possible example:

A client who had been having challenges with breastfeeding learned about where she could seek support through a program for new mothers. This will likely help the baby to maintain a healthy weight.

2. What is one challenge or unexpected outcome from your CAPC supported program that you hope to address in the coming year?

For example, one challenge might be outreach to newcomer communities.