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A CASE STUDY OF CHILDREN'S PROGRAMMING IN
TRANSITIONAL HOUSING

Presented in Partial Fulfillment of the
Requirements for the Degree of
Doctor of Occupational Therapy

Eastern Kentucky University
College of Health Sciences
Department of Occupational Science and Occupational Therapy

Crystal L. Coffman
2021

**EASTERN KENTUCKY UNIVERSITY
COLLEGE OF HEALTH SCIENCES
DEPARTMENT OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY**

This project, written by Crystal L. Coffman under direction of Dr. Shirley O'Brien Faculty Mentor, and approved by members of the project committee, has been presented and accepted in partial fulfillment of requirements for the degree of

DOCTOR OF OCCUPATIONAL THERAPY

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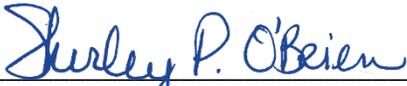
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**EASTERN KENTUCKY UNIVERSITY
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DEPARTMENT OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL
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Certification

We hereby certify that this Capstone project, submitted by Crystal L. Coffman, conforms to acceptable standards and is fully adequate in scope and quality to fulfill the project requirement for the Doctor of Occupational Therapy degree.

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Executive Summary

Background: Female-headed households with children make-up nearly 30% of the homeless population, and are challenged to become self-sufficient while embodying multiple roles with inadequate supports (Bassuk, 2010; Crncec, 2008; Fisher, 2000; Schultz-Krohn & Tyminski, 2018). While there is growing literature to support the social-cultural and occupational needs of adults in this population, few programs and research efforts have explored the life skill and developmental needs of children (Fleary et al., 2019).

Purpose: The purpose and objectives of this capstone project were to examine the planning, execution, follow-up, and contextual adaptation of the programs provided to children and youth at a transitional living facility for homeless women and children in the Mid-Atlantic region of the United States. The project also aimed to increase the body of evidence supporting the unique analytic skills of occupational therapists to evaluate the aspects and interrelationships of client occupations that affect individuals' identity, health, well-being, and participation in life (AOTA, 2020)

Theoretical Framework. This capstone embraced the Model of Human Occupation (MOHO) as a theoretical framework because it illuminates the reciprocal influence of human volition, habituation, and performance capacity, with the environment, and how the resulting dynamic motivates occupational engagement and the desire and capacity of the parent and child to participate and adapt (Kilmer et al., 2012; Taylor & Kielhofner, 2017).

Methods. A qualitative case-study methodology allowed for an in-depth exploration of the contextual intertwining of clients, the facility, and the environment. Data collection involved participant observation, individual interviews, and review of facility artifacts and documents following IRB approval.

Results. Results demonstrated the contextual challenges of program planning, execution, and evaluation among community-based settings serving homeless populations, particularly amid a global health crisis. Volunteer readiness, communication, and program evaluation were perceived differently among study participants, highlighting the importance of self-efficacy and communication in motivation and commitment. Diversity issues were an uncomfortable but significant factor in residents' lives, agency partnerships, and study participation.

Conclusions: The results highlight the complexity in studying programming provided to children and youth within this transient population. Yet, the data undeniably points to the inclusion of occupational therapists as essential team members to create, implement, and evaluate relevant and culturally responsive services.

Acknowledgements

I would like to acknowledge and thank my husband and children for their unfailing support, encouragement, and endurance. They adopted my goal as their own became the best cheerleaders and team players I could have ever imagined.

I would also like to acknowledge “New Hope,” the executive director, study participants, and the mothers and children that allowed me to observe and participate in their journey.

Finally, thank you to the occupational therapy doctorate faculty at Eastern Kentucky University, especially my committee members, Dr. Shirley O’Brien and Dr. Dana Howell.

**EASTERN KENTUCKY UNIVERSITY
COLLEGE OF HEALTH SCIENCES
DEPARTMENT OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY**

CERTIFICATION OF AUTHORSHIP

Submitted to (Faculty Mentor's Name): Dr. Shirley O'Brien

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Title of Submission: A Case Study of Children's Programming in Transitional Housing

Certification of Authorship: I hereby certify that I am the author of this document and that any assistance I received in its preparation is fully acknowledged and disclosed in the document. I have also cited all sources from which I obtained data, ideas, or words that are copied directly or paraphrased in the document. Sources are properly credited according to accepted standards for professional publications. I also certify that this paper was prepared by me for this purpose.

Student's Signature: 

Date of Submission: 23 November 2021

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Section One: Nature of Project and Problem Identification

Family homelessness is a complex public health issue that is an integration of both individual and structural factors (Grant et al., 2013; Kanak et al., 2018; Thomas et al., 2011). In 2019, approximately 568,000 people across the United States (U.S.) experienced homelessness on any given night, with more than 30% being families with children (U.S. Department of Housing and Urban Development [HUD], 2020). While the direct relationship between homelessness and family well-being is not fully understood (Thomas et al., 2010), there is a well-established body of evidence linking safe and stable housing as a determining factor in child health (Fowler & Farrell, 2017). It is also clear that family homelessness impacts all five social determinants of health domains as identified by the U.S. Department of Health and Human Services, and the Office of Disease Prevention and Health Promotion's (n.d.) Healthy People 2030 initiative. These include economic stability, education access and quality, health care access and quality, neighborhood and build environment, and social and community context. Thus, it follows that children who have experienced homelessness may exhibit negative health outcomes, such decreased self-concept and increased anxiety, depression, emotional problems, and withdrawal than their peers (Carter, 2015; Kanak et al., 2018; Portwood et al., 2015;). Behavioral problems are also common, and can become a social isolator, or lead to school or daycare suspensions and expulsions (Portwood et al., 2015); thus raising a concern about the occupational marginalization of an already compromised group.

Homelessness can be a time of confusion for children with mixed messages, stress, and feelings of helplessness because they rely heavily on the input and reactions of adults. Their sense of self-concept is formed by internalizing the messages they receive through child-adult interactions about their self-worth, importance, and place (Carter, 2015). Research correlates

decreased reasoning, nurturing, and consistency in parenting and increased use of physical punishment by caregivers enduring the strain of poverty and lack of stable housing (Kilmer et al., 2012). Evidence suggests these challenges can be prevented or ameliorated with the appropriate supportive interventions for families; thus, the primary goal in developing interventions is to ensure housing stability, prevent future homelessness, and minimize the cumulative risks associated with homelessness (Grant et al., 2013; Portwood et al., 2015).

Within most communities, social services and other community supports may be present with a broad perspective to support the homeless population. Varying levels of supportive housing is offered within the context of many systems. The most common include emergency shelters, transitional housing, short-term rental subsidies, and permanent supportive housing (Fleury et al., 2021; Shinn et al., 2017). Specifically, transitional housing programs intend to bridge emergency accommodations to permanent housing by providing secure housing for up to two years, with varying degrees of case management and support services devised to address contextual housing barriers and self-sufficiency skills (Bassuk et al., 2014; Shinn et al., 2017; Washington, 2002). It is important for transitional housing programs to participate in ongoing program evaluation to best meet the ever-changing needs of the population, be cost-effective, and maintain available resources (Carman, 2011; Doll, 2010; Heras de Pablo et al., 2017).

Problem Statement

Transitional housing programs aim to help families who experience the trauma of losing their home, their jobs, and the roles that bring meaning to their lives by overcoming housing barriers and reaching self-sufficiency (Bassuk et al., 2014; Shinn et al., 2017; Washington, 2002). A growing base of literature supports the social-cultural, economic, and occupational self-sufficiency needs of adults (Fleary et al., 2019; Fleury et al., 2020; Schultz-Krohn & Tyminski,

2018; Washington et al., 2002) and establishes the need for safe and stable housing for child health and wellbeing (Fowler & Farrell, 2017; Portwood, 2015; Simpson et al, 2020; Schultz-Krohn & Tyminski, 2018). However, there is a void of relevant, scalable evidence-based approaches that address ecological and contextual influences, the interaction and variation of various social service programs, and implementation to capitalize on a family's ability to cope, adapt, and be self-sufficient (Fleary et al., 2019; Fowler & Farrell, 2017). Thus, it follows that there is a void of practical approaches to address the developmental life skills of homeless children and youth in the literature. This capstone set out to examine the unique child and youth programming at one transitional living facility in the Mid-Atlantic region, including key aspects such as structure, facilitation, training, and contextual adaptation using a case-study approach. Throughout this capstone the facility will be addressed under the pseudonym "New Hope."

Purpose of the Project

The purpose of this capstone project was to examine the planning, execution, delivery, follow-up, and contextual adaptation of programs provided to children and youth at New Hope, a transitional living facility for homeless women and children. This capstone explicitly sought to capture the interplay of multiple contextual factors and resources, and how they impacted the stakeholders in the transitional living center. The facility had a unique after-school curriculum that seeks to heal trauma, teach self-advocacy, improve academic performance, and develop the character traits, social-skills, and life-skills needed by children to successfully engage in their roles, routines, activities, and meaningful occupations (American Occupational Therapy Association [AOTA], 2020). Stakeholders served through the project included employees, volunteers, the recipients of intervention services (including children and their caregivers), and the local community. The significance of this project reflects the ongoing need for education, life

skill development, and advocacy surrounding the poverty cycle and homelessness (Edwards, 2020; Simpson et al., 2020). Settings such as New Hope support adaptation to adversity and they promote and facilitate resilience through the development of life skills in caregivers and their children (Cutuli & Willard, 2019; Portwood, 2015). The programs provided to these children and youth aim to change the trajectory of their lives for the better.

Project Objectives

1. Examine current educational and support modules with regard to the occupational needs of child and youth consumers, with respect to age, cognition, and social-emotional development in a transitional living facility.
2. Explore how contextual factors may support or hinder participation in children and youth programming at a transitional living facility.
3. Educate stakeholders on current evidence and best-practice methods, including relevant training and evaluation models for ongoing program evaluation.

Theoretical Framework: The Model of Human Occupation (MOHO)

The complex and dynamic interaction between children, families, and their environment that cause, correlate, or become a consequence of homelessness demands a robust framework to provide effective supports and services (Kilmer, 2012; Melton et al., 2017). The Model of Human Occupation facilitates understanding of a client [population] from multiple perspectives through their lived experience, relevant environmental aspects, and the synchronous and asynchronous reciprocal influence of both (Melton et al., 2017; Taylor & Kielhofner, 2017). Four key elements guide the ongoing process of the multidimensional, multisystem adaptations referred to as human development. A change to any element subsequently shifts the dynamic,

which may result in new ways of thinking, feeling, acting, opportunity (or lack thereof), skill, or patterns (Taylor et al., 2017).

The four elements explain an individual's way of being and doing, their participation in work, play, or activities of daily living that give their life meaning and define their personhood. The first, volition, refers to motivation toward or away from an action. Habituation illustrates the emergence of occupational patterns over time, such as habits and roles within the temporal, physical and social habitat. Performance capacity encompasses both an individual's lived experience and perception of their ability to engage or perform an occupation as well as others' perceptions of the individual's personal experience and abilities (Taylor & Kielhofner, 2017). This is the aspect of performance that can be observed, measured, and quantified, but is also subjectively experienced by the person (Taylor, 2017). Finally, the environment includes the physical, social, occupational, economic, political, cultural, and temporal aspects in which a person exists and engages in occupation (AOTA, 2014). Environmental dimensions exist at immediate, local, and global levels that interact with the person and each other across all dimensions (Fisher et al., 2017). Thus, environmental factors, such as opportunity, inequity, or cultural factors impact an individual's motivation and belief in their abilities as they engage in supportive programming.

Significance of the Study to Practice

Occupational therapists are skilled professionals trained to address the barriers that prevent individuals from optimally functioning within in the roles, routines, and rituals that give their lives meaning (AOTA, 2020; Castenda et al., 2013; Melton et al., 2017; Schultz-Krohn, 2004). The profession is rooted in the understanding that engagement in personally meaningful occupations contributes to health and quality of life (AOTA, 2020; Heiser, 2020; Thomas et al.,

2011). Evidence repeatedly demonstrates occupational therapy has an appropriate and beneficial role identifying the occupational needs of the homeless population (Cipriani & Templeton, 2019; Schultz-Krohn & Tyminski, 2018; Simpson et al., 2020) through the unique consideration of contextual factors and their reciprocal relationship with client volition, habituation, and the objective and subjective elements of performance capacity (Humphrey, 2017; O'Brien & Kielhofner, 2017). Relevant programming and effective interventions cannot be established without consideration of where the clients' skills, performance, and participation lie, and how they affect and are affected by the immediate, local, and global context (de las Heras de Pablo et al., 2017; Fisher et al., 2017).

Yet evidence repeatedly demonstrates that contextual limitations constrain opportunities for homeless individuals to meaningfully engage in occupations that contribute to the formation of occupational identity and competence through habit and routine (Schultz-Krohn & Tyminski, 2018; de las Heras de Pablo et al., 2017; Schultz-Krohn, 2004). Thus, this unique perspective obligates the occupational therapy profession to collaborate with individuals, organizations, and policymakers to address the occupational inequities experienced by this marginalized population (AOTA, 2017; Thomas et al., 2010), particularly for the children who should be attaining milestones of growth and development, learning social roles, and developing relationships outside of the family. They are at the greatest risk for poor health and diminished social and educational outcomes compared to their peers (Carter, 2015; Gultekin et al., 2020; Kanak et al., 2018; Portwood et al., 2015).

Summary

Homelessness is a growing social issue across developed countries (Thomas et al., 2011; Fleury, 2020). Specifically, within the United States, homelessness has been a complex national

problem for more than eight decades (Schultz-Krohn & Tyminski, 2018). The trauma of homelessness negatively affects the education, health, and social-emotional well-being of children and youths increasing risk for substance abuse, behavior issues, and further social isolation (Gultekin et al., 2020; Portwood et al., 2015). Occupational therapy has the power to facilitate growth and positive change through consultative support and program development in partnership with organizations that serve the homeless community (Grant et al., 2013; Portwood et al., 2015; Schultz-Krohn & Tyminski, 2018). Therefore, this project specifically contributes to the profession by increasing the body of evidence supporting the unique analytic skills of occupational therapists to evaluate the aspects and interrelationships of client occupations, contexts, performance patterns, performance skills, and client factors (the OT Domain) that affect individuals' identity, health, well-being, and participation in life (AOTA, 2020). This project further identifies needs for service providers to support the occupational needs of children and youth that reside in transitional housing.

Section Two: Review of the Literature

This literature review focused on information relevant to family homelessness, and supportive programming for children and youth in relation to child development, occupation and the role of occupational therapy, program evaluation, and contextual influences. The information was retrieved through a search of academic journals using key words such as homeless[ness], transitional housing, programs/ services/ interventions, occupational therapy/ therapists, children/ youth/ adolescents/ kids, program evaluation, community-based program assessment, and Model of Human Occupation. Academic databases such as Academic Search Elite, CINAHL Complete, and Google Scholar were utilized to locate current research. Hand searching of reference lists was employed. The American Occupational Therapy Association (AOTA)'s website, the housing

facility's website, government websites, and related materials were explored to support content knowledge about the topic.

Family and Child Homelessness

Homelessness is a multifarious and heterogenous issue. Families arrive at homelessness and experience homelessness differently (Fleury, 2021; Kilmer et al., 2012). Many have faced considerable poverty-related adversity, challenges accessing health care, food insecurity, and have had to endure toxic stress (Kilmer et al., 2012; Knowles et al., 2016). Approximately 6 million Americans have “worst case housing needs,” meaning that they devote more than 50% of their income to housing yet still live in substandard housing units and have limited resources for other necessities, such as food and heat (Bassuk, 2010).

Female-headed households now make-up the largest group of homeless families. These women often embody multiple roles, such as parent, breadwinner, and homemaker, yet have inadequate supportive childcare, insufficient child support, employment with few or no family benefits, and inadequate access to poverty programs that might improve their circumstances (Bassuk, 2010; Fischer, 2000). Unique risk factors make parenting difficulty – including providing safe and stable home for children to learn and play (Schultz-Krohn & Tyminski, 2018). Eighty percent of homeless mothers have experienced domestic violence, leading to decreased ability to maintain friendships and function in social environments and increased isolation (Schultz-Krohn & Tyminski, 2018). Nearly half of these domestic violence survivors reported concerns and difficulty managing daily responsibilities, poor self-concept, and inability to develop new relationships, and care for children (Črnčec et al., 2008; Schultz-Krohn & Tyminski, 2018). Self-efficacy in one's own life and parenting skills has proven to be an important protective factor in a child's development as parents who feel capable and effective are

able to seek help and opportunity, accept feedback, and persevere (Črnčec et al., 2008; Lee & Kielhofner, 2017). Thus, it becomes a buffer against risk factors, increasing positive child outcomes, and is associated with actual parenting competence. (Črnčec et al., 2008).

According to HUD (2020), children under the age of 18 make up 59% of people experiencing homelessness and are disproportionately African American and Native American. Homelessness is more than a loss of the home to a child; dislocation, chaos, and loss of friends, pets, possessions, place and sometimes families interrupt the child's developmental need to explore and increase their freedom (Bassuk, 2010). It is no wonder that children growing up in poverty and homelessness experience higher rates of depression, behavioral problems, somatic complaints, strained peer relationships (Carter, 2015; Kanak et al., 2018; Kilmer et al., 2012; Portwood et al., 2015) and have impoverished academic, play, and social skills development compared to their economically advantaged peers (Schultz-Krohn & Tyminski, 2018).

Homeless families are often cut-off from informal supportive social networks either by events preceding homelessness (such as family conflicts or overstaying welcome) or result from homelessness (such as purposely cutting ties due to stigma or shame) (Kilmer et al., 2012). The judgement and stigma that accompanies homelessness is stressful and damaging, and is often exhibited by employers, school personnel, students, and even helping professionals (Kilmer et al., 2012; Schultz-Krohn & Tyminski, 2018). Further, the actual experience, reflection, and revelations of one's personal experiences shape motivation, values, and can lead to anxiety or confidence. Being less capable or accepted than others can lead to avoidance and comradery with those in similar situations (Lee & Kielhofner, 2017).

Evidence suggests that prolonged and repeated episodes of homelessness are associated with the process of acculturation, meaning that homelessness begins to be perceived as normal

and engagement in the mainstream community is decreased (Thomas et al., 2011). Length of homelessness also compounds and increases risks of poor health outcomes (Gultekin et al., 2020). Yet, this group can be notoriously difficult to follow for longitudinal research, to study health, housing, social trajectories, mediators, consequences of change, and effective interventions (Gerlitz et al., 2017; Winship, 2001). Thus, program evaluation can be a complex process regardless of the supports for each of these entities.

Transitional Housing Programs

Over the past 40 years, transitional housing programs have been developed across the country to empower homeless people through the transition from shelter or street living to stable housing through comprehensive services to include resources, referrals, case management, education, job training, and other skill development required for self-sufficiency (Shinn et al., 2017; Washington, 2002). However, as the problem continues to grow, it is argued that the service systems designed to assist and support families striving to improve their situation create additional challenges, adversities, and transitions (Fleary et al., 2019). The nature of institutional housing facilities demands that residents to abide by strict rules for safety, such as curfews, meal schedules, mandatory check-ins, and supervision. These limitations afford few opportunities for those learning the skills needed for independence to practice using them in context (Schultz-Krohn & Tyminski, 2018).

To address this challenge, Kilmer et al. (2012) advocated for a family-centered model from an ecological, or contextually aware perspective to fully address the range of influences and correlated constraints that support either positive development or problematic paths for a family. A recent study done by Fleary et al. (2019) addressed the experiences of residents at a transitional housing facility using the ecologically-based recommendations identified by Kilmer

et al (2012). Findings highlighted the usefulness of contextually relevant recommendations as a tool to determine the extent to which families' needs are met in transitional housing programs. "Empowerment resources" that addressed multiple aspects of the residents' lives, such as roles, routines, and occupations were highlighted and regarded as a vital step on the path to self-sufficiency. Additionally, the youth programs were noted to be critical in helping the children deal with the trauma of homelessness; specifically, participants found the presence of an adult role model especially beneficial, having a substantial impact on youths' positive development (Fleary et al., 2019). The National Center on Family Homelessness reinforced these principles and emphasized the need to recognize the context of trauma and violence (Bassuk, 2010), further solidifying the relevance and benefit of the unique, well-rounded occupational therapy approach. A free Trauma Informed Organizational Toolkit and a guide for creating trauma-informed services for mothers and children are available on the website for the National Center for Homeless Education (n.d.)

Program Evaluation

According to scholars, program evaluation informs policies and programs offered and validates purpose to stakeholders and funding sources through intentional and thorough review of content quality and provision. Although this idyllic definition, along with thorough forethought, planning, and budgeting to accommodate program evaluation is considered best practice (Carman, 2011; Winship, 2001), Huffman et al. (2002) counselled researchers and evaluators to consider the differences in academic and community-based culture. In fact, evidence demonstrates the discrepancy in values and the mismatch of reality in that evaluation is often not part of the planning process for community-based programs, and is therefore, not thoroughly funded (Winship, 2001). This devaluation of the evaluation process lends credence to

the mindset that program evaluation drains valuable resources that could be better spent to improve programs and services. Thus, community-based nonprofit program evaluations are typically structured to meet only the specific targets required for monitoring and compliance purposes (Carman, 2011).

Community-based programs serving homeless populations experience additional challenges that impact their ability to measure whether they make a difference in the lives of participants. Some examples of these complications could include challenges implementing a program as intended and assessing the appropriate duration of impact because changes fostered by social programs are often incremental. It can also be difficult to track families after they have left the program. Finally, because the process of data collection, analysis, and interpretation are contextually bound, external factors on a local, national, or global level can impact success. This can range from weather, to political stances, to global health (Winship, 2001). And as demonstrated over the past several months, pandemic conditions can and do impact the availability and validity of data gathering.

Role of Occupational Therapy

Occupations are the everyday activities situated within a person's unique context that are performed based on a desire, need, or expectation, as both a means to and an end or, for the purpose of adding value to life (AOTA, 2020). The profession of occupational therapy (OT) embraces the occupational nature of humans and the significance of occupational identity to a healthful, productive, and satisfying life (AOTA, 2014). Thus, justice, advocacy, and activism are essential interventions to support individual, group, and population-based occupations necessary for survival, health, and well-being (Balser et al., 2020). Specifically, OT facilitates culturally responsive services, dignity, respect, and meaningful occupational engagement within

marginalized populations, including homeless populations, by creating inclusive, accessible environments, and by removing practical barriers (AOTA, 2017; Gupta, 2016; Hocking & Townsend, 2016).

Systematic reviews of the literature repeatedly find that occupational therapy has an appropriate and beneficial role in serving people who experience homelessness (Cipriani & Templeton, 2019; Schultz-Krohn & Tyminski, 2018; Thomas et al., 2011). As previously established, homelessness removes a sense of normality through forced changes to roles, routines, the social and built environment, and the lived experience (Melton et al., 2017; Schultz-Krohn & Tyminski, 2018). Combined, these can induce a “volitional vacuum” (Melton et al., 2017, p.351) that challenges one’s self-identity and pursuits. Occupational therapy recognizes the need to reestablish volition, rebuild habit patterns, and revise or reengage in life roles to discover new or adapted ways to perform and participate (Melton et al., 2017; Thomas et al., 2011). Each family’s situation is dynamic and complex. Yet, occupational therapists carefully consider each contextual element (including their own influence) as it unfolds within the client’s experience from their perspective. Thus, OTs galvanize families’ incremental movement toward fresh ways of perceiving and experiencing occupations, acknowledging difficult realities, and making tough decisions and concessions from an empathically grounded approach (Melton et al., 2017; Schultz-Krohn & Tyminski, 2018; Taylor et al., 2017). Because homelessness impacts children and caregivers differently, a dual service delivery model is recommended to address the child-parent dyad and promote a healthy maturing and evolving relationship, that flows from infant dependency to increased autonomy, responsibility, and freedom of choice in youth (Cipriani & Templeton, 2019; Fleary et al., 2019).

Summary

This literature review highlights the importance of understanding the impact of homelessness on families, well-being, and individual capacity to move toward self-sufficiency within their given built and social environments and personal contexts. A brief overview of supportive services is provided within the context of this case study to demonstrate the importance of program evaluation planning and appropriate professional consultation. It further identifies the overwhelming benefit of OT involvement in direct intervention, program development and evaluation, policymaking, and other leadership opportunities for customized and culturally responsive services (AOTA, 2017).

Section Three: Methods

Project Design

A qualitative case study approach was used to describe and analyze the programs provided to children and youths at New Hope. The facility and its curriculum are contextually intertwined with the individuals that engage with them. Occupational therapists explore and facilitate individuals' unique patterns of occupation. The case study methodology enables the exploration of the children's' nuanced occupations, as they are simultaneously bound within the context of their situation, community, and everyday life (Jones & Hocking, 2015).

Institutional Review Board (IRB) approval through Eastern Kentucky University was obtained by the primary investigator (PI) prior to initiating this study (see Appendix A). Informed consent was gained from all participants prior to conducting interviews. Document review was conducted by published materials at the New Hope site and on the New Hope site webpage.

Setting

This case study was conducted at a transitional housing facility for homeless female-headed households in the Mid-Atlantic region. The facility seeks to give homeless women and their children a second chance by equipping them to achieve and maintain self-sufficiency. This mission is executed through counseling, mentorship, outreach programs, and educational opportunities designed to foster psychological healing and growth. Women are eligible to live at this facility if they and their family are currently living in emergency housing or places not intended for habitation, lack the resources to obtain a home, or are destitute due to serious medical conditions. They are ineligible if they have violent felony convictions, restrictions limiting interactions with a child, have active domestic violence cases, are actively use drugs or alcohol, or have a history of violent or destructive behaviors that prevent them from working. Outreach clients, including former residents and families on the waiting list, are offered the opportunity to participate in adult and youth programs.

Data Sources

This study incorporated several qualitative data collection methods that include participant observation, semi-structured individual interviews, and review of organizational artifacts. The PI participated in the child and youth program both as a volunteer and as a child mentor for over one year for longevity and understanding of the setting and programming. This added to richness in observations of the researcher, along with understanding of programming in context. Interviews were conducted with the executive director, a human services intern, and two Bonner Scholar interns. Bonner scholars are undergraduate students that engage with local service sites across their four academic years for a minimum of ten hours per week to receive a financial aid scholarship (Corella & Bertram F. Bonner Foundation, n.d.). Facility documents,

including program overviews, blank templates used for child intake forms, session feedback forms, and pre- and post- assessments for the program season were examined for data triangulation and contextual comparison to service provision throughout the pandemic. The interview protocol used with the executive director was comprised of ten open-ended questions designed to explore how the curriculum was created, outcome measures, use of staff and volunteers, and developmental leveling. Open-ended questions for the interns focused on training provided, perceived level of support and competency, level of participation, and their perception of the program's execution and efficacy.

Based on current COVID safety restrictions, interviews were recorded via Zoom and stored on a secure, multi-level password-protected cloud storage account. The Otter-AI application and hand-editing was used to transcribe the interviews. All data was stored on the secure cloud storage account. Following completion of the study, all of the research materials, including informed consent forms, interview question notes, printed coded transcripts were shared with the faculty advisor for storage in a secure cloud location. Data will be stored for three years following the completion of the study, then responsibly destroyed.

Data Analysis

Observation narratives, facility artifacts, and interview transcripts were methodically reviewed to provide a preliminary chunking of the data. Chunking is preferred over word-to-word deliberation to ensure accurate interpretation of meaning in context (Jones & Hocking, 2015). Tentative codes were assigned, and then mapped by hand. Similar codes were grouped to establish commonality. Quotations reinforce the integration of codes into categories and themes (Creswell & Poth, 2018). Visual representations may be created to confirm or refute the relationships and patterns to be drawn from the codes (Creswell & Poth, 2018; Jones & Hocking,

2015). Intercoder agreement was established with mentor to increase reliability (Lysack et al., 2017).

Validity

A researcher must continually reflect on the trustworthiness of the data and its presentation to ensure an accurate reflection of reality (Heiser, 2020; Lysack, et al., 2017). Procedures to strengthen the validity for this case study include prolonged engagement in the field, reflexive journaling, triangulation of data collection methods, and an audit trail (Lysack et al., 2017).

The PI engaged in note-taking and reflexive journaling after each volunteer session, team meeting, or encounter with the data to triangulate data and acknowledge personal bias. Reflexivity is a deliberate process of reflection on roles, personal cultural and social backgrounds, and experiences to examine the potential impact of bias on data interpretation (Heiser, 2020; Lysack et al., 2017). Personal reactions, thoughts, prejudices, and orientations that may have shaped the interpretation or the PI's approach to the study are purposely disclosed and acknowledged to increase validation (Creswell & Poth, 2018). An audit trail was maintained throughout the research process to document the PI's thought progression and to clarify understanding of data refining interpretation over the course of the study (Creswell & Poth, 2018; Jones & Hocking, 2015).

Ethical Considerations

It is imperative to acknowledge ethical considerations and standards of practice, particularly in case study research where there is a delicate balance between the accurate portrayal of the whole case and the protection of participant anonymity (Creswell & Creswell, 2018; Jones & Hocking, 2015). To protect participants from harm (Creswell & Poth, 2018), all

parties involved in the study were trained in the knowledge of legal and ethical procedures and requirements of research with human subjects. Facility and participant names were kept confidential throughout the research process through the exclusion of their use in data collection, analysis, and writing process. Names provided through informed consent were kept confidential. No other personal identifying information was collected or recorded. Pseudonyms were used to maintain anonymity throughout coding to ensure disassociation. Thus, there is limited risk for participant identities; participants were informed of this low risk during the informed consent process.

Although research ethics with homeless families is surprisingly sparse (Gerlitz et al., 2017), anticipated risks were reasonable regarding the benefits to learn about the transitional housing facility child and youth curriculum. Safety concerns were not an anticipated challenge for this study. Benefits involved an increased awareness of child and youth interventions and the value of specific developmental occupational considerations, occupational justice, and provision of occupational therapy in a homeless shelter.

Section Four: Results and Discussion

This case study was intended to be a comprehensive program evaluation of a relatively novel project: a life skills program for children and youth within a transitional housing facility. Although family homelessness has been a societal issue for decades, it is an emerging practice area within occupational therapy. Much of the research completed focuses on the impact of the trauma of homelessness and the effectiveness of various strategies with adults (Fleary et al., 2019; Fowler & Farrell, 2017; Thomas et al., 2011). There is a void of relevant and scalable approaches that are rooted in evidence and address the ecological and contextual influences that affect a family or child's skills, motivation, access to resources, and the ongoing circular

interplay of these factors (Fleary et al., 2019; Fowler & Farrell, 2017). However, contextual challenges through a pandemic required this capstone structure to be updated to a case study, with focus on evidence in addressing life skills for children and youth and occupational therapy's unique contribution to program evaluation through the synthesis of a client profile, goals, system supports and hindrances, and context (AOTA, 2020).

The case study design promoted an in-depth understanding of the children's program at New Hope using multiple data sources to address project objectives (Creswell & Poth, 2017). The qualitative methods used for data collection in this project included participant observation and narrative notes, semi-structured interviews, artifacts, and facility documents. This section presents a detailed description of the results, themes and subthemes, and subsequent discussion to facilitate a thorough understanding of the dynamic interplay of study participants' personal factors within their contextual realm.

Results

Participant Characteristics

Four individuals responded to the PI's request for interview participants: the facility executive director (ED), a human services intern (HSI), and two Bonner scholar interns (B1; B2). The only facility staff member to respond was the director. The researcher was also unable to recruit the parents of children and youth that presently or formally participated in the program. The facility director had been in that position for the duration of the program, which is approximately ten years. The human services intern was assigned to the program and began participation in March 2021. Both Bonner Scholars were in their second [academic] year of participation and participated from September 2020 through May 2021. Please refer to Table 1 below for participant demographics.

Table 1: Participant demographics

Participant	Length of Time with Program	Level of Education	Gender	Race
ED	10 years	Post-graduate (Ph.D.)	F	Black
HSI	2 months	Undergraduate Student	F	Black
B1	2 years	Undergraduate Student-Sophomore	M	Black
B2	2 years	Undergraduate Student-Sophomore	F	White

Data Analysis

The four interviews were viewed multiple times to observe non-verbal cues and then transcribed verbatim. Relevant statements were transferred to a secure web-based spreadsheet to increase organization and facilitate the discovery of codes. Rigorous analysis of narrative observation notes, reflexive journals, facility documents, and artifacts contributed to the iterative process of coding and theme-building. Participant statements were then moved to the appropriate triangulated themes to support findings. The varied occupational roles of study participants provided multiple and enhanced theme exploration.

Themes

Three primary themes were identified in the data, each with subthemes that add depth and clarification. Theme One, *Sneak Peak: Behind the Scenes at New Hope*, dives into the organizational structure, patterns of follow-through, measurements of success, and how those structures impact client choice and volition. Theme Two, *Revelations of a Pandemic*, examines the specific impact of COVID on the child and youth (CY) program, how it impacted the occupational roles and occupational adaptation of study participants, what needs were identified by participants to successfully move forward, and the persistent hope noted through the

challenging time. Theme Three: *Culture: Understanding Before Concluding* summarizes key insights about the culture and inner workings of New Hope that must be considered for authentic interpretation and assessment. Subthemes indicate the significance of appreciation, beliefs about how children should be taught to survive, trust and diversity challenges, and the role of faith.

Table 2: Themes and Subthemes

Themes	Sneak Peak: Behind the Scenes at New Hope	Revelations of a Pandemic	Culture: Understanding Before Concluding
	Structure and modules	Impact on CY program	The importance of appreciation
Subthemes	Patterns of follow-through	Rethinking roles and leadership opportunities	Teach them to survive
	Measuring success	Moving forward	Trust challenges and diversity issues
	Choice and volition	Hope	The role of faith in New Hope's culture

Sneak Peak: Behind the Scenes at New Hope.

The Best Laid Plans: Structure and Modules.

The construction and administration of New Hope is the result of collaborative efforts between a local pastor who had the vision to serve “hurting women with children,” and the ED who was homeless with three children. As the ED explains, the two “went out together, speaking, finding out what we needed to do to have a transition home in [our] county, and getting the support that we were going to need in order to make that happen.” The ED proudly shared that agency funds come from donors and the profits from program outputs, not government allocation. Thus, the facility has long utilized student interns to build, facilitate, and

run programming, exchanging opportunity and experience for service. In fact, nearly 10 years ago, the CY program was created by a social work intern for a senior project. The entire program continues to be run by student interns to this day.

According to document review of published material, the CY program is designed to be an interactive village consisting of five modules that help the youth participants “become successful individuals and entrepreneurs.” CY “is not school;” the ED clarified; it’s a supplemental enrichment program meant to introduce the children to experiences they wouldn’t otherwise have access to and create opportunities and advocacy skills. According to the website, the modules “use proven systems-thinking training to instill five B’s: Be Healthy; Be Fit; Be Educated; Be Creative; and Be of Character.” The ED further expounded, “We have it narrowed down to our modules that we stickin’ with. We are not trying to recreate school. They have enough of that. But we are trying to hedge the gap... we provide pencil/ paper, hands-on kind of activities... we want to pull them away from the screens and get them interacting...”

The CY program is mandatory for children living in New Hope. Involvement is one hour, Monday through Thursday, four weeks per month, while the mothers participate in their own specialized sessions (see the Appendix B). Many outreach children and youth also voluntarily participate, including former child residents and at-risk youth or children of women on the New Hope housing waiting list. To individualize programming, the mothers of program participants complete a Child Intake Survey that includes a medical and health history, a parental behavioral assessment, and an educational profile (see Appendix C). New Hope refers to the mothers as “Moms;” henceforth this terminology will be adopted through the remainder of the project.

Facility documents, trainings, and interviews concurred:

Our social workers and human services interns are supposed to facilitate the age groups and our Bonners [Scholars] are there to assist. Mentors are responsible for working with their person on the work they have or are falling behind on. (ED quotation)

However, the choice to limit human exposure to increase resident and staff safety through the pandemic, meant no new human services or social work interns were accepted in the Fall 2020 semester. Thus, there were no interns assigned to facilitate the CY programming during the time of this case study. To balance potential curriculum gaps, a new evidence-based program that did not require skilled professional planning was added to the schedule Per B1:

The mentorship program is actually new this year. We kind of talked about that a little bit over the summer, me, [B2], and [ED]... We had an orientation for new mentorship volunteers, and that was in the fall semester. So that kind of kicked off.

According to the ED, the Bonner Scholars, and facility documents, a volunteer orientation was provided to all interns and volunteers prior to the fall academic semester. Only 1 out of 4 interns participating in this case study (including the researcher) participated due to schedule limitations, as it was only offered at one time. B1 described it as follows:

It was like a Saturday morning we came in; it was other Bonner Scholars, and then other volunteers with [CY]. We came and then they just kind of broke down the history of [New Hope], what the house does, and then... talk[ed] about some things that we would do with the kids. Like the programs that they had in place and things like that.

His report was consistent with the ED's description. She also noted "...it's not necessary to provide them [the volunteers] with specialized training. It's just a matter of teaching them some of the nuances about the age groups and what's developmentally appropriate." B2 described her experience without an orientation, "I just got to jump in... I was just like trying to understand it,

and be immersed in it. I think the main part [of being trained] was getting to just be there and be consistent...” The HSI, who later joined the intern team in Spring 2021, considered personal life experience her training for the house. “I’ve been raising my own kids... I definitely have experience working with kids...as far as like supervising and managing, that is what I do in my regular 9 to 5.”

Patterns of Follow-Through.

Follow through is an inherently vague, difficult to measure, but foundational element in community service organizations. Inconsistent follow-through in communication, action, and response was regularly observed, noted, and ultimately supported by interview data. This subtheme highlights pre-existing challenges within organizational patterns at New Hope, as well as layered complexity added by the pandemic circumstances. The aforementioned contextual and environmental challenges coupled with each individuals’ assumptions of others’ perceptions, personal volition, and preexistent habits and patterns, highlight the fluidity of group occupation.

All interviewed interns indicated strong lines of communication with the ED. However, communication between different types of interns, with staff, or volunteers was non-existent or strained. Narrative notes indicated that this was especially true between Bonner Scholars and volunteers outside their university due to email restriction settings. B2 shared:

[With ED] I have always felt like I can be honest if I ever have an issue. I can always express that. And it's been really, really good...With the staff, I honestly, I didn't interact with them too much... [HSI] has probably been the most communicative...she's talked with us more than others in the past and so that's been really nice.

Email communication rendered irregular “weekly” newsletters and information dissemination. Erratic texts also peppered partial information or inquired about volunteer

attendance. Responses to email or text questions were limited, resulting in confusion and unfulfilled expectations regarding key programmatic changes and individual participation. As B1 explains, "Overall, and this includes me too, but [we] definitely need to be doing better at, like, communication. Specifically, between, like, people who work at New Hope, or are within New Hope, and volunteers, [and interns]."

Lapses in planning and unanticipated changes led to confusion and frustration. Examples included switching a planned session for a mentor session, or pairing a child with a volunteer other than their assigned mentor. B1 iterates "[the mentor sessions] ...they've kind of just been, you know, at random Tuesdays or Wednesdays, or actually Wednesdays or Thursdays, I think." After the HSI joined the intern team in March 2021, day-to-day activity feedback and suggestions were communicated via written forms and used for planning next sessions. Although children were encouraged to bring homework to mentoring sessions, prepared activities (see Appendix B for pre-pandemic schedule of activities) did not account for desired parental goals for their children (identified in Appendix C). In fact, none of the interns interviewed recalled knowing what goals (if any) were set by parents. Interns are not privy to any information listed on the Child Intake.

Measuring Success.

The official CY program overview document describes the program goals and approach as follows:

Use educational entertainment experiences to deliver trauma-centered services that help children: (1) heal and self-advocate; (2) improve academic performance and research careers; (3) develop the character traits, life skills, and social skills needed for lifetime

success in every aspect of life. The program pursues these goals in three main ways: civic engagement, multidisciplinary education, and career role-playing.

However, the program evaluation document provided to potential funding sources details a more succinct list of program goals with specific outputs, measurement tools, and outcomes (see Appendix D). According to the ED and HSI, these goals and outcomes are assessed through report cards, progress reports, and two tracking systems completed by the interns. The HSI shared, "...we do require the Moms to bring in progress reports; and sometimes they do and sometimes they don't. But we look at those to see if there's been success in what we've been doing."

The first tracking system shared with this researcher in the Fall 2020 semester, referred to as "5-ups," is a shared online document template to be completed by the lead intern after each session (see Appendix E). 5-ups was reported to be used pre-pandemic, and tracks (1) the module, date, time; (2) the unit/focus of study; (3) the specific activity; (4) the number of attendees (youth and volunteers); (5) observations of program delivery and if it was effective. The ED examines the report monthly to:

Take stuff out that doesn't work. You know, sometimes it's not the activity didn't work.

Sometimes it's the people that's supposed to be facilitating the activity that didn't work.

You know, and so when I get the [report], you know, I try to have some dialogue with the persons that are doing those, asking them how the sessions are going, what's working, what's not working.

All interviewed interns reported that they were unfamiliar with this tracking system, likely due to the absence of a lead intern amidst COVID-19 precautions.

The second system, reinstated by the HSI in the spring 2021 semester, used a one-page template to capture pertinent feedback. The form required the intern to handwrite answers that included the goal of the session, the intern's perception of how it went, the child's strengths and areas for growth, and additional notes to be shared with the next volunteer. An individual binder assigned to each child housed this daily feedback, as well as the all the activity worksheets completed by the child at each session.

All participant interviews included a question inquiring how success is measured and tracked in the CY program. The ED's response focused on the 5-ups monthly reports, with notation that the program is adjusted as the population changes. She also emphasized that the facilitators or volunteers could be the problem rather than the preplanned module due to lack of understanding. The HSI shared:

I guess it's a combination what the kids are doing, what the Bonners [Scholars] report back, and then looking at their grades in school...With the older kids... you kind of [measure success] by how they've been in the session... if I put a particular worksheet in there but the note from the Bonner [Scholar] is that they didn't understand that at all... the next week I'm going to take a step back...

B1 judged success as follows:

Well I would say if we get through the whole thing... kids obviously might get distracted...or there's certain days where it may not be run exactly on schedule. But overall...I would say we judge it based off of if the kids can, one, sit through it. But also if...it seems like they either...enjoyed it or learned something.

B2 shared a similar perspective:

For the children...the engagement...if you could kind of see the wheels turning. Or if they were excited to participate or gained something out of it. I feel like you could really tell, too, with the enthusiasm with the [CY] song at the beginning and at the end. You could kind of see how they were when they started versus how they felt afterwards.

Each interviewee's answer reflected child participation and satisfaction within individual sessions. The identified measurement tools evaluated surface-level engagement rather than program goals and outcomes.

Choice and Volition.

Diminished health, well-being, and social integration commonly follow a lack of occupational choice (Schultz-Krohn & Tyminski, 2018; Thomas et al., 2011). Like many housing facilities, New Hope enforces strict rules designed to keep residents safe and accountable. Facility documents and interviews highlight the following examples: counseling requirements, mandatory participation in the Moms' and CY programs, curfews, exhibiting financial reports and child report cards, sign-ins, chores, and the prohibition of TV, food, or drinks in the living units. Additionally, children must be supervised, are not permitted in the kitchen area, and may not sit or climb on the furniture in the communal living room. Each regulation contributes to the context and culture of the House, and thus impacts the habits, roles, routines, and volition of residents, staff, and volunteers (Taylor & Kielhofner, 2017).

Noncompliance with program structure is a point of frustration for the ED, particularly because all requirements are disclosed and discussed prior to admission. "...One thing I found within [New Hope], with our program, is they want the program benefits but they don't want to commit to the program itself...so that's been really problematic for us." (ED quotation) The temporal

demand of a program that requires participation four out of five weeknights after work or school is a big commitment. It can be exhausting for parents to maintain family routines, participate in required programs, work, and follow the facility rules (Shultz-Krohn, 2004). Consequently, there was a tension within perceived attitudes and expectations:

The Moms don't want to do it a lot of times. Not all of them. But a lot of them do not want to go to those sessions every Monday, Tuesday, Wednesday, and Thursday. And they have a terrible attitude about that. They take that attitude right back to their units and have that discussion with their children. And they take children who are otherwise very active, very interested, and turn them into children who want to be defiant. (ED quotation)

Despite mandatory attendance of CY for those living at New Hope, the children experienced creative freedoms within the structure and the guidelines of presented activities. Examples included freedom of design for thank you projects or the selection music or colors in healing arts modules. B1 observed:

[CY] actually gives [the kids] an opportunity to really hone in... they have a lot of autonomy within the program even though it seems like it's very structured. But it's structured so they can be on a path to doing what they want.

B2 shared, "I think once the kids are in it, and once they kind of understand what's happening in the structure, I think it's just so beneficial for them."

Rules and regulations are a necessary part of any group programming, but are particularly salient to facilitating expectations and accountability for this young population. The balance is the provision of choice and creativity within programming.

Revelations of a Pandemic.

The outbreak of a worldwide pandemic created multidimensional challenges for New Hope as the facility was forced to close its doors to visitors and new interns. Donor funding, which made up 56% of the annual budget, became scarce as businesses and other nonprofits struggled to stay afloat or elected to support alternate organizations. This theme specifically examines how the contextual effects of the pandemic were perceived by the study participants and how the changes instituted at New Hope for the safety of the house affected the implementation of the CY program.

Impact on the Children and Youth Program

The Fall 2020 season was drastically different than previous years (Note: Although COVID-19 changes were initiated in Spring 2020, the scope of this case study was through the 2020-2021 CY program schedule, which followed the interns' academic year). Per the HSI, "Obviously, you, know all the sessions pretty much came to a halt for the safety of the house." The schedule (Appendix B) was abandoned. The start of the CY program season was delayed through September and most of October. When CY restarted, it was entirely virtual. All of the children remained in the house seated around the large [adult-size] communal dining table under the supervision of the ED, with session leaders or interns projected on a white wall. As COVID-19 infection rates dropped, the Bonner Scholars, mentor volunteers, and the PI were permitted on the premises with COVID-19 precautions. Without social work or human services interns and a lack of facility partners, Bonner Scholars suddenly assumed greater roles in managing program sessions. The children frequently used donated laptops to engage in computer-based tutoring and enrichment programs (such as ABC Mouse or Khan Academy). They participated in group "Art Therapy" provided virtually by a counseling intern. When there was a gap in pre-planning of

sessions, the children created Thank You cards for donors. Age group divisions weren't possible for the entirety of the Fall 2020 season. B1 expressed his perceptions as follows, "After COVID hit, obviously, it was very hard...it seems like it's, you know, it's very trial and error...and we'll learn, you know, through that." B2 noted, "COVID was just so funky..." The children's volition, habituation, and performance capacity were also drastically affected by the environmental modifications. B2 recounts challenges to group participation:

[Prior to COVID] there was a good balance of older kids helping the younger kids or people who have graduated from [CY] helping the people who were new to it, which kind of calmed some of the bigger personalities. So, I think in the fall semester, a really big difference was there were big personalities but no way to balance it. So that was really hard...because the kids would help each other out...they really listen to each other.

The new leadership expectations left the Bonner Scholars feeling ill-equipped to navigate their new roles. B1 shared, "I've experienced some challenges with...trying to figure out the balance between authority, but also, you know, wanting to be their friend as well...What are, you know, the boundaries needed...I don't want to, you know, make them cry or anything." As a result, the ED regularly stepped in during or after the CY session to address any negative or disinterested attitudes and solicit cooperation. Understanding developmental expectations and social norms of children and youth is an area for further consideration in the training of the Bonner Scholars and volunteers at New Hope.

Early in the Spring 2021 semester, the HSI joined the New Hope intern team and began to lead session planning and volunteer support. She shared:

It was hard. I can tell you even coming in the middle of it all of it. It was definitely a struggle. And, you know, trying to get back on to where it used to be pre-COVID has

been a struggle. Because now the house is different. It has different Moms with different kids than before COVID...so it's a learning experience for everybody.

Her comment highlights another challenge New Hope endured through this period: an increased rotation of Moms and children. Within the 9-month period in which this researcher studied New Hope, all families chose to exit the program premature to reaching their stated goals. The ED shared concerns that the increased relief funds provided to families during COVID contributed to decreased program participation and commitment.

Rethinking Roles and Leadership Opportunities

All parties involved with CY experienced role shifts and new patterns of habituation through the pandemic. The ED extended her work hours to be present most evenings through the fall of 2020. She explained, "I try to stay on the scene for the most part, because we don't have a specific intern assigned at this time because of COVID...We didn't take in as many interns as we normally do." The Bonner Scholars were thrust into more direct leadership roles. B2 notes:

[The ED] has an expectation of us [the Bonner Scholars] that, you know, we are going to be expected to do more...We had a meeting over the summer, and she was like...what do you think would be best?... And so she kind of gave us the opportunity to see what we like, see what we dislike.

Challenges were not limited to in-person services. Virtual services also experienced hurdles related to consistency and competence. One example was from the virtual art therapy sessions. A lack of follow-through was observed, with limited discussion of meaning and/or usage in counseling sessions. The art remained on a pile in the shared living space.

There was a palpable improvement in morale at the CY sessions in Spring 2021 following the addition of the HSI. "Once I really started, it's been so beneficial, with the kids and

the Bonners [Scholars] are loving it...They don't have to try to figure out what they're going to throw together to do with them" (HSI quotation). B2 affirmed, "She [the HSI] really helped me, too, with the babies...in regards to support." The HSI shared, "I see the vision that she [the ED] has, and I'm really trying to put it all together the way she wants it to be."

The Bonner Scholars' increased performance capacity following the addition of the HSI's support and modeling reinforced the need for additional training and ongoing check-ins to improve self-efficacy, motivation, and commitment.

Moving Forward

Without dedicated interns to run program through the fall 2020 semester, the Bonner Scholars, young undergraduate students equipped with a very basic orientation, pinpointed challenges to work with children effectively while simultaneously navigating facilitation of the CY program. Both openly expressed a desire for additional education and guidance. B1 voiced the need for additional boundary support, structured guidelines, how to keep the students on track or get them to initiate, and functional clarification of age-appropriate activities. "There have been a few times where...kids might be upset...like how do you necessarily contain that or just try to, like, calm them down?" B1 also notes a need for "more structure and training in exact guidelines for volunteering. There's obviously differences in how a three-year-old would learn and how a twelve-year-old would...That's always been hard for me to do, is, you know, fit well." This infers the need for explicit, age-appropriate developmental guidance within training considerations. B2 requested a more structured support system to increase volunteer confidence.

Remarks include:

I think what's really important is to keep having support afterwards [after the orientation], and kind of just checking in. Because it can be a lot of times, I feel like, if you're not

checking in with yourself and being like, 'Okay, I'm doing good, I'm doing bad,' you know, sometimes it can be more difficult to help the kids if you're not feeling confident in what you're doing.

All interns noted the need to recruit more volunteers, Bonner Scholars, and Interns to be mentors and volunteers to facilitate and participate in the CY program. The HSI commented:

So definitely trying to get more interns in, because that's going to help...I don't even know who it would work with only like one person to look after all those kids in different age groups... So, getting the right people and getting enough people.

Collectively, intern remarks reinforced the importance of self-efficacy (performance capacity) in motivation (volition). A dearth of tangible, practical education and support within the environment contributes to decreased volunteer volition in commitment (habitation), participation, or the drive to recruit additional volunteers (Taylor & Kielhofner, 2017).

Hope.

Despite the adversities and obstacles prompted by a global health crisis, all study participants exhibited resilience and proclaimed hope for the future of the program and the children involved. The ED stated:

We are just so big-minded that if one person's life, one of those children's lives has changed as a result of participating in [CY program], then it's worth it. But I do know quite a few of our children's lives have been changed as a result of [CY]. So, I'm excited about the direction we're going right now. And, um, the focus that we have. So eventually we'll have the right students in our [CY] village. So, I'm excited.

The HSI affirmed:

[CY] is a really great program. It really is. We just have to get back into the routine- in the swing of things. It's really, really good. The little ones, once they know and they get on that routine, even the babies, they'll see us come in and they already start clapping their hands to sing the song and it's so cute. And I know it's benefitting them. I know they love it.

B2 confirmed, "Overall I think the [CY] program is just really, really good." These sentiments were validated from the PI's narrative notes. On several occasions, the ED and other staff expressed how well the CY program pivoted in response to the pandemic.

Culture: Understanding Before Concluding

The cultural authenticity at New Hope as an organization serving the community was an important consideration in this case study. Community-based culture and university or clinical norms may focus on different issues and as a result is not fully compatible. Researchers must deliberately heed community organizations' belief systems, values, norms, traditions, and practices to avoid passive undermining of the project (Huffman et al., 2002). The PI's narrative notes confirmed the matter with repeated documentation from the ED sharing her experiences. She detailed frequent requests by agencies or graduate level interns to partner with New Hope, which she began to translate as "fix" the program without pausing to understand the culture. It is prudent for newcomers to New Hope to consider the significance of appreciation, survival skills, building trust, and diversity, within the context of the House and population prior making judgments and conclusions.

The Importance of Appreciation

Appreciation was fundamental to the CY program. It was part of the program name acronym, and the song children sang at the start and conclusion of each session. Frequent group discussions centered around the generosity of others who gave time, material donations, or money to the program for the direct benefit of the children. Students were expected to create “Thank You” cards to donors and service members regularly to reinforce the principle. Poor participation or negativity were met with “attitude adjustments” reinforced by the ED during or following sessions. Learning the value of and conveying appreciation is an expectation within the setting, as a skill for life and survival.

Teach Them to Survive

All data sources reflected a strong survival mentality in the mission and curriculum of New Hope, as driven by the ED. “We are working to hedge the gap that’s been created, and that continues to be created as is relates to our children... Country-wide people don’t care, they just say they do,” the ED passionately expounded. Narrative notes detailed beliefs about teaching children how to survive by avoiding excuses and preparing them for the “real world.” The observation that children contently remain silent and motionless for several hours with screens perpetuated the expectation for sustained attention and active engagement while quietly seated “properly” on their bottom [on adult size furniture] for the one-hour session. “Our children are lacking ‘cause we put them in front of those devices and put those devices in their hand” (ED quotation). This belief contributed to this theme because it shaped training as it related to acceptable behaviors and program activity planning. Observations and narrative notes detailed a preponderance of sedentary activities, including worksheets, computer games, and crafts. Over-reliance on these types of seated practice activities, with a strong focus on in-chair behaviors,

may hamper development of attention to tasks, based upon sensory motor development (Berwid & Halperin, 2012; Ratey & Hagerman, 2013). Thus, the CY program attempted to reinforce perceived real-world expectations for children and youth occupational performance based upon adult expectations for success.

Trust Challenges and Diversity Issues

The perseveration of stigma accompanying a family's homeless status and the often-sharp disjunction from supportive social networks may lead to shame and trust issues within mainstream community encounters (Kilmer et al., 2012; Thomas et al., 2011). Trust and segregation are further perpetuated by the societal organization of race in the U.S., particularly within economic, housing, and educational contexts (DiAngelo, 2018). Inequity and economic disparity regarding COVID was addressed by the ED:

I'm so tired of people blaming COVID for everything... No. It just caused us to pay attention.... [COVID] also shined the light on the disparities that exist in our communities and how willing we are to continue to have them. And how unwilling we are to have them change... People will go to great lengths to prevent them from being changed.

Trust and diversity also impacted the PI's ability to complete the planned program evaluation in this case study as the PI was denied access to the formal CY curriculum binders and other pertinent requested documents, including anonymous program feedback surveys. Narrative notes also described conversations in which the ED explained that when participation is difficult or information is not readily available, most volunteers give up.

In individual work sessions with the ED, she acknowledged that it took time to uncover and trust the PI's intentions. This was supported by reflexive journaling entries detailing several

instances in which the PI sensed guardedness from the ED, staff, and other interns. Narrative notes also document the ED's disclosure that individuals chose not to participate in the study due to personal prejudices and opinions about the PI. The ED supported this in her interview, stating "So it's like you can't make people do what they don't want to do or don't think they need to do...I'm not gonna pick no moms for you. I want them to want to do it." Over time with continued participation by the PI, the ED expressed a reciprocal learning partnership. Academic feedback for the PI reinforced this mutual respect, recounting "weekly work/discussion sessions... [that] proved to be enlightening, inspiring, challenging, and ultimately life-changing." The ED acknowledged a growing confidence that the partnership between New Hope and the PI was divinely inspired, and that people of all races can care genuinely even when they may not have had the same experiences.

Despite the trust and diversity challenges the PI experienced as it relates to this capstone, the Bonner Scholars expressed much different experiences. B2 stated, "[ED] knows you're a Bonner; she knows you'll be there...you're going to be there for four years." Later in the interview B2 also noted "If you needed the help, she was always there. And she always emphasized, you know, school comes first. So [the ED] is incredibly supportive, super helpful." Because the Bonner Scholar Program supports students who could not otherwise financially afford to attend college, there may be an underlying presumption that B1 and B2 are better able to empathize and relate to the population served at New Hope (Corella & Bertram F. Bonner Foundation, n.d.).

The Role of Faith in New Hope's Culture

Faith and divine purpose were repeatedly cited as a fundamental foundation to the ED's belief structure throughout narrative notes and the participant interview. Faith was an integral

factor in the founding of New Hope in partnership with a local pastor. Thus, faith played a key role in persistence through setbacks. When moms and children left the program unexpectedly without reaching their goals, the ED expressed confidence in God's sovereignty, and that her role as a leader was to continue preparing for what the Lord brings "despite opposition and naysayers." Narrative notes also detail determination to persevere through COVID while simultaneously growing the Bonner Scholars and youth in her charge:

I am a teacher...That's my passion. That's who He created me to be. So that part is not hard. That part is extremely enjoyable... And whether it's two children or twenty children, one at a time. That's one thing the Lord said- one at a time.... So eventually we'll have the right students in our [CY] village. So, I'm excited.

Summary

The results presented above highlight the importance of community immersion to success in community-based practice or research. Immersion is crucial because it facilitates trust alignment with community values and culture and provides the practitioner with insight into systems-based issues and policies that may promote or inhibit progress and occupational engagement (Doll, 2010). The themes described in detail how diversity, equity, inclusion, appreciation, and faith plainly served as underpinnings to the culture and programmatic intent at New Hope. It is only through reciprocal respect and equal partnership that the PI and New Hope can collaborate to enhance programs and services.

Discussion

The objectives of this capstone were to review New Hope's CY modules regarding the developmental and occupational needs of the children served, consider how contextual factors supported or hindered participation, and educate stakeholders on findings to include evidence,

best-practice, ongoing evaluation models, and relevant training to support continued program growth. The objectives are indivisible and must be considered as a whole. Trust, access, and contextual challenges hindered the PI's ability to assess or compare the CY curriculum as designed (and implemented pre-COVID), therefore all further discussion will be centered on the activities planned and implemented through the 2020-2021 program year as described in the results section.

The contextual constraints of COVID-19 dictated the necessity to group children of all ages together in Fall 2020, to limit health risks and accommodate the shortage of interns and volunteers. However, small bodies with developing postural stability require adequate physical support to free the mind for learning and focus (Berwid & Halperin, 2012; Williams & Shellenberger, 2001). The children would be able to engage to the best of their ability and interest level with appropriate seating arrangements and incorporated movement. Ideally, considerations would also accommodate the children's individual energy and stimulation needs (Krombach & Miltenberger, 2020). Seating options could potentially include floor sitting or kneeling, allowing students to kneel on adult-size chairs to see and access the table, or providing boxes to place under their feet to increase stability if the table is below chest-height. Given the broad age range of the children, another strategy to increase engagement and participation may be to alternate the seating of older and younger children. This would facilitate the older children serving as role models during activities and reinforce behavioral expectations consistent with the theme of teaching children survival skills. Providing the opportunity and expectation for the older children to guide the younger increases compassion, empathy, and supports the development of character traits targeted in the program mission (Gwadz et al., 2019).

While it is important to facilitate real-world expectations and values, research demonstrates that, like many cognitive skills, sustained attention develops in stages. Sustained attention limitations vary based on the activity presented, and differ among free play, structured activities, and passive attention (Sarid & Breznitz, 1997). Intentionally building movement into sessions would provide an opportunity for reorganization within the body by turning on the brain's attention system, or executive functions such as inhibition, sustaining attention, working memory, sequencing, and prioritizing (Berwid & Halperin, 2012; Ratey & Hagerman, 2013; Williams & Shellenberger, 2001). Further, new evidence also reinforces the importance of allowing children to move and shift their bodies as needed. Learning to read their body signals builds independence with body awareness and self-regulation (Mahler, 2021).

Personal choice is something that warrants consideration, particularly regarding individuals' motivation, self-efficacy, and determining future goals and professional occupations (Schultz-Krohn & Tyminski, 2018). However, given the expectations of transitional living, there is an unequal balance of choice and expectation, with a priority on compliance-based behaviors. Residents are expected to follow through with their written agreement, sacrificing some of their personal choice to follow the program and access the resources provided by the supportive housing program. This becomes the personal choice to participate in transitional housing.

Communication was problematic and identified by all interns as an area for growth. Information dissemination was assigned to undergraduate students inexperienced and untrained in organizational communication. There was little loop closure and important information was sporadic and often unclear. To be fair, questions and clarification may have gone unanswered because interns didn't know the answer, or because the ED, who was herself strained beyond her typical role duties and hours may not have had the opportunity to get back to them. One

recommendation is an assigned staff member to oversee and ensure accurate and timely dissemination of information.

The addition of mentoring was a positive change during COVID, as youth mentorship programs are found to have benefits for behavioral and psychosocial outcomes, particularly when they persist beyond 12 months (DeWit et al., 2016). Mentor nights provided CY with self-directed, supportive adult interaction sans demanding programmatic pre-planning. Child and youth volition, performance capacity, and commitment increase when their autonomy and personal goals are elicited and respected (Gwadz et al., 2019). In the future, mentor leaders may want to consider keeping mentorship on a designated day to increase consistency to help children build positive routines and habits. Once a mentor is assigned, it is imperative to protect that relationship and not switch mentors to free up an adult to work with another child (DeWit et al., 2016). Additional training was requested and is recommended for future mentors. B1 identified the need for increased guidance on boundary-setting, and clearer expectations of the distinction between authority and friendship. B2 acknowledged a need for ongoing support and mentor check-ins. This researcher also recommends training on how to navigate sensitive topics that arise through relationship and engagement, and how to refer to a more qualified professional while maintaining trust.

Throughout the year of study, a reduced number of interns meant more spontaneity and responsibility for untrained individuals. The ED was overextended beyond her own leadership and positional duties, to fill in agency staffing voids resulting from the pandemic. The Bonner Scholars, and later the HSI, became increasingly responsible for individual session planning and implementation, without access to the curriculum. Although dedicated to the program, their lack of time, training, and experience resulted in disjointed planning and execution. The sessions were

no longer a scaffolded curriculum designed to build and teach comprehension, but just a series of interesting and engaging sessions tailored to what the volunteers were able to provide. One strategy to address this was offered by B1, who suggested online modules that guide interns through the CY curriculum, breaking it down to explain the purpose behind each session and how to adjust for developmental level. This would help all volunteers understand the concepts and, with an increased understanding of development, allow for up- and down-grading of activities based on the group in attendance. The creation of online modules would also be consistent with the ED's stated future goal to market and sell the program to other facilities to increase effective CY services and increase the program's financial sustainability.

At New Hope, program evaluation is portrayed outwardly as a rational tool to gather information and make decisions about program improvement, goal achievement, and to secure funding (Carman, 2011). However, the measurement tools employed assess client satisfaction rather than outcome effectiveness (see Appendix E). The individuals gathering the data provide subjective input based on personal interpretation of child engagement. Further, the data collected from interviewees' interpretation of success measurements and the tools supplied to the PI for review fail to specify what means are used to form baseline measures for identified goals or outcomes, and how goals such as character trait development, healing, and self-advocacy are measured. Other important questions that need to be addressed include how "trauma-centered services" are defined by the facility, how these services are ensured (including consideration within volunteer and intern-led programs), and what means the facility uses to reflect upon and measure its trauma-centered effectiveness. Multiple steps are needed to transparently address these challenges. A possible first step is to train all individuals expected to take or reflect on data on the tools currently being utilized. Additional evaluative columns on the 5-ups could increase

relevance and effectiveness by prompting facilitators to reflect on how participation in the activity contributed to individual and program goals and outcomes. Education and specification on data parameters and collection methods is essential. According to program evaluation literature, a formal plan with a timeline and specific guidelines to assess program, not client, outcomes and successes ensures communication with collaborators, facilitates review and modification, and ensures ongoing success (Doll, 2010). New Hope's program evaluation plan needs to incorporate a plan for seeking and allocating funding for future plans, program revision, and ongoing evaluative processes (Carman, 2011). As long as funds are not allocated for data collection and evaluation, crises will always push program evaluation to back burner (Winship, 2001).

Occupational therapists' commitment to human dignity, client-centeredness, flexibility, and strengths-based individualization provides a unique contribution to the community-based setting (Scaffa, 2001). Review of the Child Intake Form (see Appendix C) through this lens yields concerns surrounding the strong focus on problematic or undesired behavior (as defined by caregivers or other adults) rather than the identification of the child's unique strengths and interests that can be engaged for skill building and motivation. It is important to view behavior as an observation of something deeper or internal that the child is expressing to communicate a need, want, or feeling (Cahill et al., 2017). Children may be viewed as little humans who should be afforded the same respect and choice. Participation indicates consent. If they're not participating, one must ask why and what else may be going on. It would be beneficial to reformat the intake questionnaire to guide parents and staff through the process of identifying the child's strengths, interests, and positive interactions that can be built upon as the child engages with program curriculum. Further, the information gathered is unhelpful if not shared with the

individuals tasked with service provision. Interns and volunteers would benefit from knowing the child's unique strengths, preferences, and ways of interacting. It is also worth considering that one shortfall in follow-through on child/parent goals is that engagement and treatment within the population at New Hope is conducted entirely by interns. Additional oversight by a licensed professional is recommended for the integrity of the program.

Finally, meaningful change in community-based settings cannot be solely rooted in expert-dominated approaches (Huffman et al., 2002). Professional community immersion paired with existing policies that guide intern involvement will be key in the revision and growth of New Hope's program evaluation and ongoing development. Community immersion facilitates trust and gives outsiders insight into cultural values and why policies and systems that may promote or inhibit progress exist (Doll, 2010). Thus, despite a substantial need for volume of volunteers, it is crucial that interns and volunteers be carefully selected. This PI recommends an interview process that explicitly details realistic expectations, boundaries, training, and scheduling prior to acceptance. It may be beneficial for key staff to be involved in, or for a discussion about the individual's qualifications to be held prior to the individual joining the team to reduce diversity tensions. When diversity challenges do arise, it would be best to address them directly rather than ignore and allow them to interfere with effective program delivery. It's also important to include the consumers of the program in planning and evaluation (Gwadz et al., 2019; Simpson et al., 2020). This would be an appropriate activity for the 12+ age group to increase self-efficacy, practice decision making and control, increase engagement with residents and outreach youth, and is consistent with program goals to develop life skill and self-advocacy. The PI also recommends exploration of the Positive Youth Development (PYD) philosophy to guide services and priorities through the involvement of youth in service design, decision-

making, and governance. This type of model not only increases positive development through a strengths-based approach and encourages autonomy and resilience through youths' investment in their own goals, it may also decrease the burden of planning and implementation on interns and staff (Gwadz et al., 2019).

Connection to MOHO

The foundational theory for this case study was Model of Human Occupation. This model recognizes the reciprocal influence of the three human components (volition, habituation, and performance capacity) with the environment, and how the resulting dynamic interplay of forces motivates occupational engagement (Humphry, 2017; Taylor & Kielhofner, 2017). The findings presented above demonstrate concrete application of this theory. They are described in a manner that illustrates how the environment, context, and personal factors of all study participants are intertwined and impact the occupations of program planning, execution, and evaluation. For example, the contextual influence of COVID-19 precautions resulted in limited facility access, a reduced number of interns, the propulsion of untrained volunteers and Bonner Scholars into leadership positions, and the difficulty of following through with pre-planned module curriculum due to limited agency partnership and donor involvement. All of these factors impacted each study participant's performance capacity (their observed experience and their perception of their experience), motivation, and habituation (roles and patterns of engagement). The resulting group occupation of program execution varied based on the facilitator or planner of the day and the interplay of the personal and contextual factors of each child involved. As demonstrated throughout the results and discussion section, it is difficult to examine a specific finding without acknowledging its relationship to the others. Thus, this case study reinforced the complexity of program evaluation within a transitional housing facility such as New Hope.

Strengths and Limitations

Strengths of the case study that supported validity of the results included the PI's longevity of volunteering and mentorship and the focus of the study on an existing program. The first positively contributed to a deep understanding of the context, population, and program goals. The latter allowed for skillful blending of professional knowledge into a specific community setting.

There were also limitations to the case study that require discussion. First, by nature, the case study involves only one specific program which means that findings may not be applicable to a larger or geographically diverse population. The participant group that consented to interviews was small and did not include caregivers of the children enrolled in the population. Effectiveness of any program cannot be weighed without input from its consumers. This also highlights another limitation- that the population occupying residence at the facility was transient throughout the time of the study. Several families and children cycled through, with none present for more than 3 months at a time and all terminating residence prior to meeting their stated goals. Poor communication engagement with staff and other interns at New Hope contributed to limited knowledge access for questions and support. There was a lack of follow-through that impacted study participation, engagement, and access. These difficulties in addition to challenges with trust and diversity impacted the researcher's ability to successfully recruit individuals or families who directly benefitted from the CY program. Finally, the contextual limitation of COVID reduced access to the facility and in-person participation for the safety of residents, staff, and volunteers.

Implications for OT

The profession's focus on occupational engagement throughout the life span is a relevant and holistic framework to addressing community-based programming, specifically within the homeless and at-risk populations (AOTA, 2017; Scaffa, 2001). OTs are well-equipped to serve in a variety of roles with the homeless population, blending a strengths-based lens and developmental knowledge to address help clients' opportunity, capacity, and motivation, to engage in meaningful occupations and form the habits and routine needed to reinforce occupational identity and self-efficacy (de las Heras de Pablo et al., 2017; Cipriani & Templeton, 2019; Schultz-Krohn & Tyminski, 2018). OTs can further utilize their skills to educate parents, staff, volunteers, and a variety of stakeholders on behavior as a form of communication, or as a neurological or physical need, rather than non-compliance. It is also worth noting that OTs need to explore trauma-centered care on a broader, more formal level. Advanced professional development and certification are recommended for involvement for community programming, particularly within the homeless population. Finally, reimbursement is a challenge that OTs in this setting will need to tackle. There is much advocacy and exploration to be done to promote funding through grants, foundations, religious organizations, civic groups, associations and government programs, particularly in facilities like New Hope, where the CY program is run by interns and resources are donated.

Future Research

Future research focusing on the implementation and outcomes of life skills programs for homeless and at-risk youth is needed. This study identified various contextual considerations when studying programming provided to this population. Next steps could potentially include the exploration of flexibility, personal choice, and the expansion of program participants' influence

on their level of engagement and commitment. It may be beneficial to compare program outcomes prior to and following consultation or involvement with occupational therapists in planning and implementation across one or many programs. Another strategy may be for the researcher to remain anonymous to explore the impact of diversity on participation. Additionally, exploration of holistic assessment tools that consider client's occupational performance within their environment is needed to facilitate the integration of individualized, evidence-based outcomes.

Conclusion

The information gained from this capstone highlights the complexity in studying programming provided to children and youth within this transient population. There are a myriad of delicate contextual factors to be considered that continuously impact each individual and family's motivation and ability to engage and adapt. Yet, the data undeniably points to the inclusion of occupational therapists as essential team members to create, implement, and evaluate relevant and culturally responsive services.

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Appendix A

Institutional Review Board Approval for Capstone Project

Consent to Participate in a Research Study

**Enhancing Life Skills Acquisition for Homeless Youth:
A Case Study Approach to Program Development**



Institutional Review Board
Protocol Number
3723

Approval Valid
1/20/21-12/1/21

Appendix B

Actual CY Program Calendar Prior to COVID-19

October 1 –May 14 Calendar

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY
First	<p>Moms – BRAVO-</p> <p>CY – STEPS <i>Yoga with Ms. Maygen</i></p>	<p>Moms - FIT with <i>Pastor V</i></p> <p>CY – CHAT IV- iCAFE’</p>	<p>Moms – BRAVO-SW</p> <p>CY – University <i>Music or Art Therapy</i></p>	<p>Moms—B2W Products <i>PillowTalk & Quilt sqre Mrs. G</i></p> <p>CY – CHAT II <i>Creative Arts- Calendar Art & Quilt sqre</i></p>
Second	<p>Moms– BRAVO-</p> <p>CY – CHAT IV <i>Prepare 4 -Blk Hstry</i></p>	<p>Moms - BRAVO with <i>Tory Donato</i></p> <p>CY - S2T/Ag-STEM</p>	<p>Moms - BRAVO-SW</p> <p>CY - University <i>Imagine it!- Reading Club</i></p>	<p>Moms—BRAVO <i>Yoga with Ms. M.</i></p> <p>CY – CHAT II <i>Creative Arts- Calendar Art & Quilt sqre</i></p>
Third	<p>Moms –CARP- Verizon Wrkplce Prncples</p> <p>CY – STEPS <i>“Stay Fit!”- virtual workout</i></p>	<p>Moms –HIP with <i>Bank</i></p> <p>CY – CHAT IV- iCAFE’</p>	<p>Moms - BRAVO-SW</p> <p>CY - University <i>Music or Art Therapy</i></p>	<p>Moms— B2W Products <i>“Bling 4 All”- Ms D</i></p> <p>CY - CHAT II <i>Creative Arts</i></p>
Fourth	<p>Moms –</p> <p>CY – CHAT IV <i>Prepare 4 Blk Hstry</i></p>	<p>Moms - BRAVO with T.D.</p> <p>CY – FIT</p>	<p>Moms - BRAVO-SW</p> <p>CY - University <i>Imagine it!- Reading Club</i></p>	<p>Moms—B2W Products <i>“Just 4 U”- Mrs. B</i></p> <p>CY - FIT <i>CY Store</i></p>

Appendix C

Official CY Child Intake Form (with identifying data removed)

CHILD NAME: _____

<u>Age</u>	<u>Biological parents name</u>	<u>Who has custody?</u>	<u>Who is the child living with?</u>	<u>Contact number, if not living with mom.</u>

MEDICAL HISTORY:

List any medical conditions that your child has:

List any medications that your child is taking daily and any side affects they are experiencing:

List any allergies that your child may have:

MENTAL HEALTH HISTORY:

Any history of substance, alcohol or tobacco use in the child's family?

NO___ YES___ if yes, please describe? _____

Does your child have any history of physical, sexual or verbal abuse?

NO___ YES___ If yes, please describe? _____

Has your child ever stated wanting to harm self or others?

NO___ YES ___ if yes, was it intentional? _____

Has your child experience any emotional losses?

NO___ YES___ if yes, please explain? _____

Please describe any past counseling your family or your child has had?

CHILD NAME: _____

BEHAVIORAL ASSESSMENT:

What do you believe your child does to get him/herself in trouble? What do you think causes it?

Does your child display any kind of behavior? If so, explain:

List two goals that can help improve the behavior:

List three things that you like that your child does:

List some current stressors for your child and family:

List any goals that your child and/or you have already established:

CHILD NAME: _____

EDUCATION HISTORY:

<u>School Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Current Grade</u>	<u>Teacher Name</u>

Has your child ever repeated a grade?

NO ___ YES ___ If yes, what grade?

Has your child had to receive special education services?

NO ___ YES ___ If yes, please describe?

Has your child ever had any problems in school?

NO ___ YES ___ If yes, please describe? _____

Which subject would your child need tutoring in? List all that applies.

What is your child favorite/least favorite subject in school? List all that applies.

Are there any sports and/or activities that your child is involved in?

What kind of career/job field would your child like to learn?

List some fun activities you would like to do with your mentor:

Appendix D

Evaluation to request funding for support and expansion of CY Program

EVALUTION

This request is for funding to support expansion of our [CY] programs explained above. The evaluation measures will be the achievement of the following goals:

Program Goal(s)	<ol style="list-style-type: none"> 1. Help youth succeed in school 2. Youth learn to play instruments & participate in a performance
Outputs	<ol style="list-style-type: none"> 1. 15 youth participating in 3 tutoring/ educational sessions per week 2. 15. Youth attend lessons & practices
Measurement Tool(s)	<ol style="list-style-type: none"> 1. Grades, test scores, & attendance 2. Youth perform for at least 2 [NH] events
Outcomes	<ol style="list-style-type: none"> 1. 70 % of those served increase academic performance by one letter grade in the current school year; 75 % improve one letter grade in problem class/ subject 2. 50 % of Youth perform at 2 [NH] events

Appendix E

Screenshot of the Official “5-ups” CY Monthly Program Report, which is to be filled out by the lead intern each evening following the CY session.

Monthly Report 2019

Module, Date & Time	Unit- Focus of Study	Activity	# Attendees	Observations of Program delivery and was it effective?
2019				
Example: <i>Be Educated</i> October 1, 2017 6 pm – 8 pm	Character Counts	Civic Engagement – Children created hygiene packs for the Veterans at the VA Hospital Word of the Week: <i>Service</i> – doing something for someone else Song	5 youth 4 Volunteers	This activity was effective but the children were restless after an hour of stuffing bags.
Many Pieces of Me January 14, 2019 6:30-7:30pm	How children have changed since program began	Many Pieces of Me -Children drew, colored, and or cut out pieces of a magazine that reflected each section of the personalized puzzle Word of the Week: Honor- Integrity, respected, nobility Song	6 youth 4 Volunteers	The youth were very engaged throughout the entire activity. Most preferred to cut out pieces from magazines while others preferred to draw their own pictures. The activity was effective for the youth and it assisted them to interact with each other in a healthy environment

This is an online template that should be completed after each session. Please identify the Unit, ex. **Character Counts**, the activity ex. **Character Development Lessons** and identify the lesson including the word of the week, champs cheer, etc.. For number of Attendees please specify # of volunteers and students. The observation is to determine if the activity was easy for the children to perform and if the activity was not effective. Example: Session needs more time, more volunteers to facilitate, children did not respond to activity etc.