



*Supporting life after institutional care  
Bruxelles, 18 January 2012*

# The common evaluation methodology

## Impact evaluation

Selection of a target and control group of individuals.

Measurement of the impact of the program by comparing the differences among groups after the target individuals have been “treated” and of the differences within groups before and after a period of time in which the service is delivered. Validated sets of questions have been used.

## Process evaluation

Interviews in all countries to key actors (social services, coordinators/supervisors, social intermediaries, care leavers) regarding integration level of the new figure, relationships, quality of delivery, usefulness, impact perception.

# The evaluation steps

<i>Step</i>	<i>Type</i>	<i>Target</i>	<i>Tool</i>	<i>Period</i>
1	Impact	Care leavers	Questionnaire surveying all relevant areas of life	November 2010
2	Process	Social intermediaries, social workers, coordinators/supervisors	Qualitative interview	July 2011
3	Process	Care leavers	Qualitative interview	September 2011
4	Impact	Care leavers	Same questionnaire	September 2011

# Problems encountered during the project

- The period of social experimentation/service delivery was **too short** to produce tangible changes
- For this type of service a **voluntary compliance** of the target is needed, but random assignment does not guarantee for that
- There were some cases with **mental health** problems, issue on which the social intermediary is not trained to intervene (they needed another type of service)
- Not everywhere there was **institutional backing** (Sofia especially), with subsequent problems of access to care leavers and in progress rearrangements
- The relationship of the social intermediaries **with educators/social workers** of institutions was difficult at first and some of them did not collaborate, due to them feeling monitored

# Specific problems with the survey

- **Sample.** 72 initially involved  
Final number: 44 (14 in Italy; 12 in Bulgaria; 18 in Romania)
- **Drop out.** Main reason for dropping out from the target: lack of motivation/ cooperation/ mistrust, difficulty in establishing a one to one relationship for heavily institutionalised youngsters.
- **Target.** Language and understanding problems, due to large majority of foreign ex minors (Italy), structural difficulties of concentration of the target (Bulgaria) and length of questionnaire (everywhere).

# Main findings - quantitative

- **Similar trends** can be recorded in the target and control group as regards accommodation and work, in all countries, where, however, the starting conditions are different.
- **Slight improvements** in the target groups, as opposed to control groups, regard, on the other hand, self-control and depression (everywhere), socialising activities and social relations (Bulgaria).

# Main findings - qualitative

- All agree that the most innovative and positive aspect of the training and of the service is the **emphasis on activation** of the care leaver resources/the different adult to adult relationship aimed at increasing autonomy/ increased interaction with the outside world
- The support of social intermediaries was valued by most actors (including care leavers), especially in developing a more **active and concrete attitude** to their future
- Care leavers who stayed until the end of the project contributed to the building of a **relationship of trust** with the social intermediaries. This created as negative outcome a “mourning”
- The service implementation **process** on the whole worked well

# As a researcher..

- A relational service is better evaluated through qualitative in depth research
- The co-construction of the model proved a key point for social innovation
- Activation of the person creates a virtuous cycle

# THANK YOU!

**Rebecca Zanuso**

**[rzanuso@synergia-net.it](mailto:rzanuso@synergia-net.it)**