

2023 REPORT



Final Outcomes Evaluation Report

**POSITIVE
FUTURES II**

Welcoming Women Home

Time for Change Foundation's (TFCF) Positive Futures II Program (PF II) provides essential resources to currently and formerly incarcerated women to reduce homelessness and recidivism while leading women to stabilization and self-sufficiency. In essence, PF II is a 5-year scientific health project under the National Institute of Health's partnership with the Substance Abuse and Mental Health Services Administration (SAMHSA). It targets women who have been diagnosed with either substance abuse disorders and/or mental health co-occurring disorders and who are impacted by the criminal justice system. The Positive Futures II Program provides evidence-based practices to support incarcerated women (90 days pre-release) with transitional planning and services and supports formerly incarcerated women at the critical point of reintegration to the community. The utilization of evidence-based practices and programs such as strength-based case management, trauma-informed therapeutic services, substance abuse treatment, mental health treatment, peer to peer mentoring and supportive services for housing, employment, and family reunification has proven to be very effective.

PF II is an expansion of our original Positive Futures Program which was selected as a 3-year pilot project in 2012 whereby we served 135 incarcerated women. The results of that effort yielded an astounding 0% recidivism rate, 85% increased employment, 90% reduced reliance upon substance abuse and 78% increased ability to manage mental health through new coping skills and medication management. Positive Futures utilizes a culmination of talent, lived experiences and expertise that has proven to be effective in both cost efficiency and social economic mobility. TFCF believes that everyone is deserving of a nurturing home. We set out to prove that women impacted by the criminal justice system could lead full and satisfying lives if given the opportunity to heal from past traumas, reunify with their children, and reside in healthy environments. Since 2002, TFCF has been providing housing and supportive services to women recovering from the effects of homelessness, incarceration, and family separation. Our mission is to empower disenfranchised low-income individuals and families by building leadership through evidence-based programs and housing to create self-sufficiency and thriving communities. To date, TFCF has assisted over 2,800 women make the transition from incarceration and homelessness to self-sufficiency. Positive Futures is just one of many innovative solutions we have created to assist women with reaching their highest potential.

Time for Change Foundation:

Positive Futures II Summative Outcomes Report

Summative Final Evaluation for Years 1 – 5

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“Even though I have ups and downs in my life, I'd never forget about Time for Change Foundation because they fight with me, no matter what.”

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Program Overview: Evidence Based Practices

Time for Change Foundation's (TFCF) Positive Futures II Program was a five-year program funded by the Center for Substance Abuse Treatment that provided essential resources to formerly incarcerated women in order to reduce homelessness and recidivism and to lead to stable self-sufficiency. The Positive Futures II Program provided evidence-based practices to support incarcerated women (90 days pre-release) and formerly incarcerated women at the critical point of reintegration to the community, including strengths-based, trauma-informed case management; substance abuse treatment; and supportive services for housing, employment, and mental health. TFCF began recruitment and outreach activities in October 2018; this report details the outcomes of the entire five years of grant-funded services, which served a total of 209 women in San Bernardino County, California.

Key Personnel and Staff Training

Across the five years of the Positive Futures II Program, key personnel was remarkably stable. Kim Carter (TFCF Founder/Ambassador), Vanessa Perez (Executive Director), and Phyllis Scott (Program Coordinator/Manager) managed the program as a team, with specific program areas of focus for each person. Regular staff meetings in TFCF and between the management team and the external evaluator ensured program success. Though occasional temporary reductions in staffing negatively impacted recruitment/enrollment, these were corrected as soon as a person who was an appropriate fit for this key position was located and hired. When TFCF was fully staffed, recruitment and enrollment numbers were on target. The evaluator agrees that while enrollment was slightly lower than target, the quality of TFCF staff (and therefore their hiring practices) was demonstrated through exceptional client outcomes. TFCF also demonstrated across the five-year period a commitment to continuous personnel development and improvement through providing staff with training opportunities on a monthly basis. Across the five-year period, at least one staff member (and often two or three) attended professional training each month.

Policies and Procedures

TFCF had consistent policies and procedures, with relatively minor pivots during the pandemic to successfully recruit incarcerated women without capacity to enter the prisons and to provide pro-social drug-free activities and treatment services safely. These measures were successful, as demonstrated in the program's exceptionally high completion and outcomes rates. TFCF adopted a sustainability plan when the Positive Futures II Program began. While there is still insufficient funds to address the region's gaps in coverage for formerly incarcerated and homeless women, TFCF was able to successfully build networks with additional Foundation, Federal, and State funders to sustain program services after the CSAT funding ended.

Evidence-Based Practices for Client Success

TFCF used a variety of evidence-based practices in an innovative comprehensive relationship-focused evidence-based model to ensure their clients were optimally prepared for and supported through their transition from incarceration to TFCF supportive services to full independence:

EVIDENCE-BASED PRACTICES

Ensuring Client Success

STRENGTHS-BASED AND TRAUMA-INFORMED

Practices that help clients feel confident and supported as they transition from institutional settings to independent living. Participants in the program received 2 hours per week for at least six months. Paired with Seeking Safety, clients were provided with trained staff who integrate the unique concerns of women, including developing healthy relationships, with treatment.



12-STEP AND COGNITIVE BEHAVIORAL THERAPY

Participants in the program received 8-10 hours per week of 12-step facilitated group support for 30, 60, or 90 days depending on their needs, as well as daily support services. Clients with mental health needs were provided at least 2-3 hours per week for 30, 60, or 90 days depending on their needs..



AOD COLLABORATIVE MODEL PEER NAVIGATORS

Clients were provided with TFCF's evidence-based "sister" mentoring while in the program, and were provided follow-up support as they transitioned to self-sufficiency. "Sister" peer navigators provided role models to newly released women and helped all women develop healthy new friendships and self-worth.



LIFE AND JOB SKILLS TRAINING

Clients received life skills training using Motivational Interviewing and Thinking for a Change to successfully bridge between treatment while in the program and becoming self-sufficient. Clients were extensively supported in job skills training, self-advocacy training, and job placement and support to help women become financially independent.



Overview of Goals, Objectives, and Key Accomplishments

Overview of Goals and Objectives

Goals	Objectives	Outcomes
1. Engage experienced and credentialed partner organizations.	1. Develop and implement a plan for expanding engagement of relevant partner organizations.	Exceeded
2. Expand capacity to serve more clients in the target population, including those on waiting lists at TFCF and partner organizations.	2. Track and strengthen the organizational network serving the target client population.	Exceeded
	3. Identify, apply for, and secure other funding streams that support treatment services, and critical support services (such as housing, employment skill-building, and family reunification), by the post-grant period.	Exceeded
3. Address the gaps in treatment services in San Bernardino County through the Positive Futures Program, with positive outcomes for clients in the target population.	4. Engage 44 ex-offenders per year (220 total persons).	Nearly Met
Service Delivery Objectives	5. Enroll 75% women with children, LGBTQ, or veterans.	Exceeded
	6. Retain 95% of enrolled participants.	Exceeded
	7. Provide substance abuse treatment, mental health services, or both types of services to 90% of enrolled participants.	Exceeded
	8. Provide critical support services to 100% of enrolled participants.	Met
	9. Provide basic employment skills, coaching, and assistance to 80% of enrolled participants.	Nearly Met
	10. Provide case management to 90% of enrolled participants.	Exceeded
	11. Provide assessment to 100% of enrolled participants.	Met
	12. Provide peer coaching/mentoring to 90% of enrolled participants.	Exceeded
	13. Maintain a completion rate of 100% of program participants.	Nearly Met
	14. Reduce substance use below 20% of graduated clients (80% abstinence rate).	Nearly Met
Outcomes Objectives	15. Reduce recidivism below 20% of graduated clients.	Exceeded

	16. Improve mental health among graduated clients.	Met
	17. Reduce homelessness below 10% of graduated clients.	Exceeded
	18. Increase employment rate above 50% of graduated clients.	Met when including enrollment in training programs

Key Accomplishments

TFCF's program is exceptional in its outcomes compared to both normative indicators and the rates of other discretionary grants. This is because of TFCF's relationship-centered organizational culture, which affirms the dignity and worth of each woman they serve and recognizes their unique individual needs, strengths, and challenges. The success of the Positive Futures II Program and TFCF's organizational culture and structure has been detailed in an extensive white paper and was presented at the peer-reviewed American Public Health Association conference in November 2022. Notable successes are provided in an infographic on the next page.

KEY PROGRAMMATIC OUTCOMES

97%

RECIDIVISM: 0%

100% of clients who completed the Positive Futures II Program did not recidivate.

95%

The enrollment rate compared to the target (the discretionary grants average was 80%).



ABSTINENCE

Abstinence rates at discharge were 77.5%, substantially higher than the discretionary grants average of 60.3%.



SOCIAL CONNECTION

95.7% of clients reported being socially connected at time of discharge, compared to the discretionary grants rate of 86.9%

HOUSING AND EMPLOYMENT



53.2% of clients were employed or in educational training programs at discharge, an increase of 900%!

97.9% of clients were housed at the time of discharge and 20.7% of clients had permanent housing. Stable housing was at nearly 0% at intake.

Summary of Methods for Evaluation

This evaluation used both process (formative) and outcomes (summative) approaches. Process evaluation was conducted quarterly, focusing on project services, identifying and addressing challenges, and measuring outputs against the grant's timeline. Each quarter, the evaluator presented an executive summary and visual aids describing the client characteristics, services planned and delivered, and changes to consider based on any challenges that arose. Evaluation of outcomes was conducted annually to fully assess the program's attainment of its goals and to evaluate in detail the impact of the program on clients. Disparities analysis was conducted annually to help TFCF assess the finer details impacting the outcomes of their program for different demographic groups, to assess if any changes needed to be made (which were unnecessary across the five year period), and to inform advocacy work outside the grant-funded program.

Evaluation was based on four instruments:

Instrument	Process Evaluation	Outcomes Evaluation
Monthly Activity Tracking Tool	X	
GPRA	X	X
Trauma Symptoms Checklist (TSC)		X
Client Satisfaction Survey	X	X

The Monthly Activity Tracking Tool was a site-specific form that tracks and communicates information on: recruitment and outreach activities; enrollment; retention activities; follow-up; client satisfaction surveys; staff trainings; and grant-related meetings. The GPRA was the primary instrument used for outcomes evaluation; however, the Trauma Symptoms Checklist (TSC) was also used as a finer-detailed instrument to measure mental and physical health effects of past trauma. The Client Satisfaction Survey was a program-specific survey designed by the evaluator to allow clients to periodically (at 3 months and discharge) communicate their satisfaction with various aspects of the program and provide brief qualitative data for continuous improvement.

The following table maps each of the outcome's objectives onto specific indicators in particular instruments. The evaluator used these indicators to measure progress toward the program goals for the comprehensive final evaluation. The indicators used changed in Year 5 of the program due to changes CSAT made in the GPRA instrument, which required alterations to our use of indicators compared to Years 1-4 of the grant.

Objective	Indicators (GPRA except where indicated)
Maintain a completion rate of 100% of program participants.	Discharge status
Reduce substance abuse rate to lower than 20% (80%+ of clients are abstinent).	Use of alcohol (days of use over last 30) Use of cocaine (days of use over last 30) Use of marijuana (days of use over last 30) Use of opiates (days of use over last 30, combined for entire class) Use of methamphetamines (days of use over last 30) Use of sedatives (days of use over last 30, combined for entire class) Combined substance use in CSAT provided dashboard/visualizations
Improve the mental health of program participants.	<p><i>Indicators of risk:</i></p> <p>Depression (in last 30 days) Anxiety (in last 30 days) Cognitively impaired functioning (in last 30 days) Violent behavior (in last 30 days) Suicidality (in last 30 days) Quality of Life Extent to which program helped improve quality of life Health status (only from prior to GPRA change) Trauma Symptoms Checklist (aggregated data across symptoms – average rating) CSAT provided dashboard/visualizations</p> <p><i>Indicators of resiliency:</i></p> <p>Engagement in supportive recovery groups (combined types) Engagement in supportive family/friend relationships Satisfaction with personal relationships</p>
Reduce recidivism rate to lower than 20%.	Arrests (in last 30 days) CSAT provided dashboard/visualizations
Maintain a rate of 90%+ for housed clients.	Housing location Stability of housing Received programmatic support with housing CSAT provided dashboard/visualizations
Maintain a rate of 50%+ for employed, wage-earning clients.	Employment status Income (only from prior to GPRA change) Enough money for meeting needs (only from prior to GPRA change) School enrollment Vocational training enrollment Employed (in some capacity) Received programmatic support with employment Combined employment/education in CSAT provided dashboard/visualizations

Goals 1 and 2: Administrative and Management

TFCF's Positive Futures II Program demonstrated an exceptionally supportive environment for clients and a working environment that emphasizes excellence and professional development. The organization was highly communicative with the Evaluation Team. Over the five-year period, TFCF's Client Satisfaction Survey consistently provided nearly 5/5 responses across all indicators, demonstrating TFCF's consistency in providing optimized services for its target population. The organization was consistently proactive (including through very challenging circumstances in the pandemic), engaged with state-level advocacy on behalf of its clients, and responsive to client needs. Its program and organizational culture and structure were presented as an evidence-based model for serving formerly incarcerated women of color at the 150th meeting of the American Public Health Association in 2022.

Goals #1 and #2 for the program are administrative goals: (1) to engage experienced and credentialed partner organizations and (2) to expand capacity to serve eligible women on the waiting lists of TFCF and partner organizations. These goals span the entire program period (Years 1-5). These two goals are taken together and articulated through the following objectives:

- **Objective 1:** To develop and implement a plan for expanding the engagement of relevant partner organizations.
- **Objective 2:** To track and strengthen the organizational network serving incarcerated women (pre-release) and formerly incarcerated women with substance abuse treatment, mental health, and critical support services.
- **Objective 3:** To secure additional funding to expand and maintain TFCF's services serving incarcerated women (pre-release) and formerly incarcerated women.

Engaging Partner Agencies

In year 5 of the grant-funded period, TFCF continued to train formerly incarcerated women in leadership development and advocacy through both leadership development classes and engagement in community events, voting, town halls, and online advocacy. Priorities for advocacy continue to be addressing barriers to employment, housing, and family reunification – three key interrelated areas affecting formerly incarcerated women. In Year 5, TFCF partnered with five other agencies to host a Child Protective Services rally at the county courthouse in order to make the needs for family safety and success more visible and generate unity among Californians. The long-term advocacy around child reunification has been effective; in 2022, California implemented SB 354, which makes it easier for relatives to get their family's children placed in their homes by affording criminal exemptions and child-specific approvals for placing children into relative homes. Another bill, AB 873, will ensure Tribal foster youth have Tribal representation during court proceedings involving possible removal from their homes. TFCF continues to diligently work with partners to advocate the end of policies that lead to the removal of hundreds of thousands of California children – disproportionately poor and of color – from their families. On the front for employment, TFCF has become part of the California Living Wage for All Coalition, advancing policy to raise California minimum wage closer to a living wage and end subminimum wages for incarcerated workers.

Across the grant-funded period, TFCF trained 120 formerly incarcerated women in leadership development and advocacy and participated as key supporters in 16 regional and statewide initiatives. These women participated in mayoral candidate forums, community events, voting, town halls, online advocacy, and visits to Sacramento. Remarkable achievements across the grant-funded period include TFCF's People's Plan for Economic Prosperity Report (which outlined key data in the areas of employment, entrepreneurship, economic mobility, housing, education, labor, youth, and arts); TFCF's Inland Region Housing Justice Coalition; and their event to advocate for family reunification and support over foster/adoption (which engaged state advocates and legislators in Sacramento). TFCF's work was exceptional in that the organization not only successfully partnered with other agencies to advocate on behalf of improved policies for formerly incarcerated women, but also trained their clients to have the skills for self-advocacy and civic change.

The evaluator concludes that TFCF has exceeded the standard for Objective 1.

Increasing Strength of the Organizational Network

TFCF increased its organizational network by 74 partners over the grant-funded period and has significantly enhanced its capacity to market its services and provide core and auxiliary services in coordination and collaboration with other regional service providers.

Partnering Organization	New this year?	Partner for Outreach & Recruitment	Partner for Core Services	Partner for Auxiliary Services
12 Step Program Providers			X	
African American Sub Committee		X		
American Recovery Center Pomona		X		
California Board of State and Community Corrections		X		
California Department of Corrections and Rehabilitation (CDCR)		X		
Cal EITC		X		
California Institution for Women		X		
Cal-State Re-entry Initiative - DRC Moreno Valley		X		
Cal-State Re-entry Initiative - DRC San Bernardino		X		
Cal-State Re-entry Initiative - DRC Victorville		X		
Catholic Charities			X	
Cedar House Residential Treatment		X	X	
Center for Employment Opportunities			X	
Chase Bank				X
Children Juvenile Superior Court		X		
City of Rialto				X

Clay Counseling Center			X	
Crossroads Re-Entry		X		
Day Reporting Center (CSRI) Indio		X		
Day Reporting Center (CSRI) Moreno Valley		X		
Day Reporting Center (CSRI) San Bernardino		X		
Day Reporting Center (CSRI) Victorville		X		
Department of Behavioral Health			X	
Department of Public Health				X
Department of Public Health Re-Entry Collaborative		X		
DBH Women's Awareness Subcommittee		X		
DMV				X
Faith Based Network Meeting		X		
Folsom Women's Prisons		X		
Fontana PACT		X		
Fontana Re-Entry Collaboration		X		
Gibson House Women Program		X		
Glen Helen Rehabilitation Center		X		
Hayward Brighter Futures		X		
Heart 2 Serve			X	
Hope Homes			X	
Housing Authority of San Bernardino County			X	
Inland Career Education Center			X	
Inland Empire Fair Chance Coalition		X		
Inland Empire Health				X
Inland Valley Recovery Center		X		
Interagency Council on Homelessness		X		
James Irvine Foundation		X		
LA Jail and County		X		
Maple House Women and Children		X		
Pacific West Bank				X
Phoenix Arizona Family Services				
Ramada R&B Victorville		X		
Rancho Cucamonga IEHP Network		X		
Rialto HPN		X		
Rialto ICH		X		
Rising of a Fallen Angel			X	
San Bernardino City Council		X		
San Bernardino HPN Meeting		X		
SB County Homeless Network			X	
SB County Parole (PACT)		X		
SB County Probation		X		
SB County Sheriff's Department		X		
SB County WDB			X	
Sister Warriors		X		
SMASH		X		

Sober Living Network				X
Sozo House			X	
Stay Free Ministries		X		
Technical Employ/Training			X	
Victor Valley Family Resource			X	
Victorville Federal Prison	X			
Victorville PACT	X			
Victorville Women's Empowerment Meeting	X			
Way World Outreach	X			
West Valley Detention Center	X			
West Valley Detention Center Victorville		X		
Superior Court				

The evaluator concludes that TFCF has exceeded the standard for Objective 2.

Sustainability

TFCF acquired additional funding in each year of the Positive Futures II Program, with a total of 14 new relationships with funding agencies acquired across the five years. By following its five-year fund development plan, it has secured funding to sustain program services beyond the grant-funded period. TFCF continues to work on fund development, as the region's demand for services to successfully transition formerly incarcerated and homeless women into independent, stable, and sober lives is still not fully met by supply. TFCF continues to move forward, with major advancements in securing new avenues to providing employment and entrepreneurial training, supportive housing, and mental health and substance use treatment services.

The evaluator concludes that TFCF has exceeded the standard for Objective 3.

Overall, TFCF has exceeded goals 1 and 2.

Goal 3: Service Delivery (Objectives 4-12)

TFCF's Positive Futures II Program Goal #3 is to address the gaps in treatment services in San Bernardino County through the Positive Futures Program, with positive outcomes for clients in the target population. This goal can be broken into two parts: service delivery objectives and outcomes objectives. Service delivery objectives include 9 targets covering intake, retention, and service delivery that address the gaps in treatment services in San Bernardino County:

- **Objective 4:** Engage 44 ex-offenders per year (220 total persons).
- **Objective 5:** Enroll 75% women with children, LGBTQ, or veterans.
- **Objective 6:** Retain 95% of enrolled participants.
- **Objective 7:** Provide substance abuse treatment, mental health services, or both types of services to 90% of enrolled participants.
- **Objective 8:** Provide critical support services to 100% of enrolled participants.
- **Objective 9:** Provide basic employment skills, coaching, and assistance to 80% of enrolled participants.

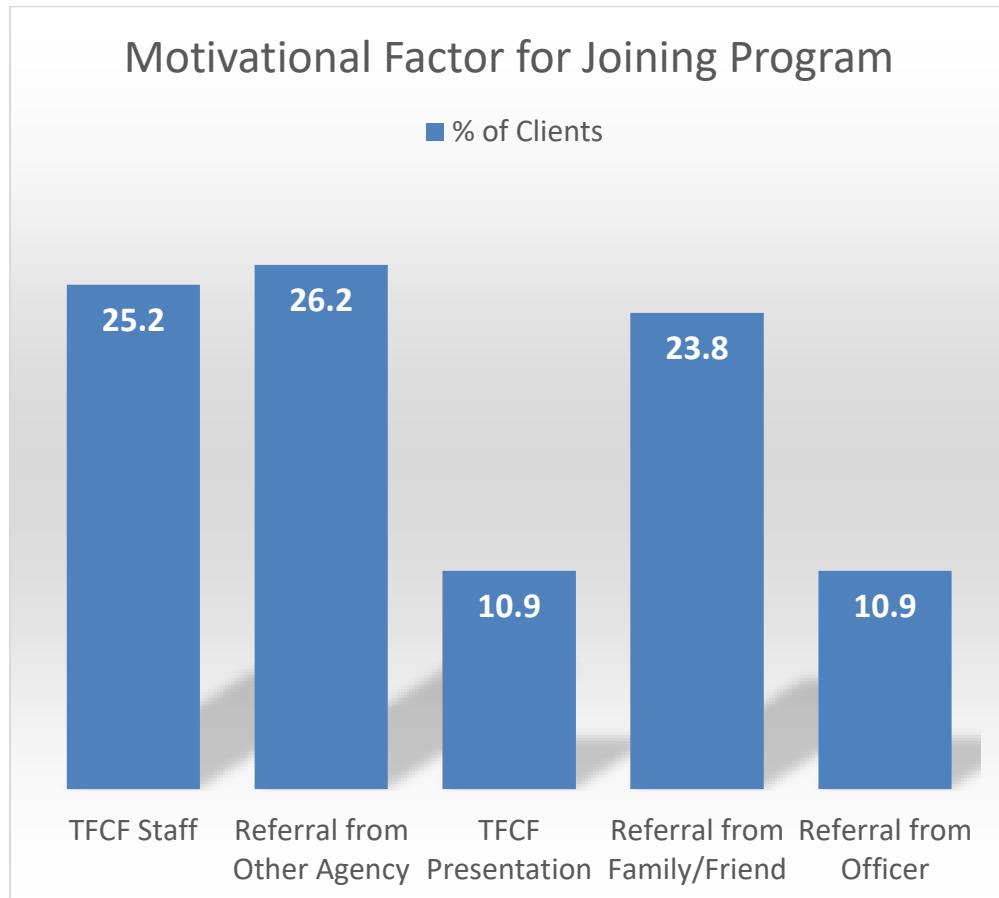
- **Objective 10:** Provide case management to 90% of enrolled participants.
- **Objective 11:** Provide assessment to 100% of enrolled participants.
- **Objective 12:** Provide peer coaching/ mentoring to 90% of enrolled participants.

Objectives 4, 5, and 6: Intake, Client Characteristics, and Retention

TFCF's objectives were to engage 44 ex-offenders per year (220 total persons) (of which 75% would be women with children, LGBTQ, or veterans), and to retain 95% of enrolled participants. TFCF had a 95% enrollment rate (N=209). Staffing shortages in 2022-2023 were primarily responsible for challenges in meeting enrollment target, though the TFCF rate was still higher than that of the discretionary grant cohort. Of enrolled clients, 79% were women with children. 97% of clients were tracked to program completion (189 of 194 total, who were discharged prior to the end of the grant-funded period), an exceptionally high retention rate.

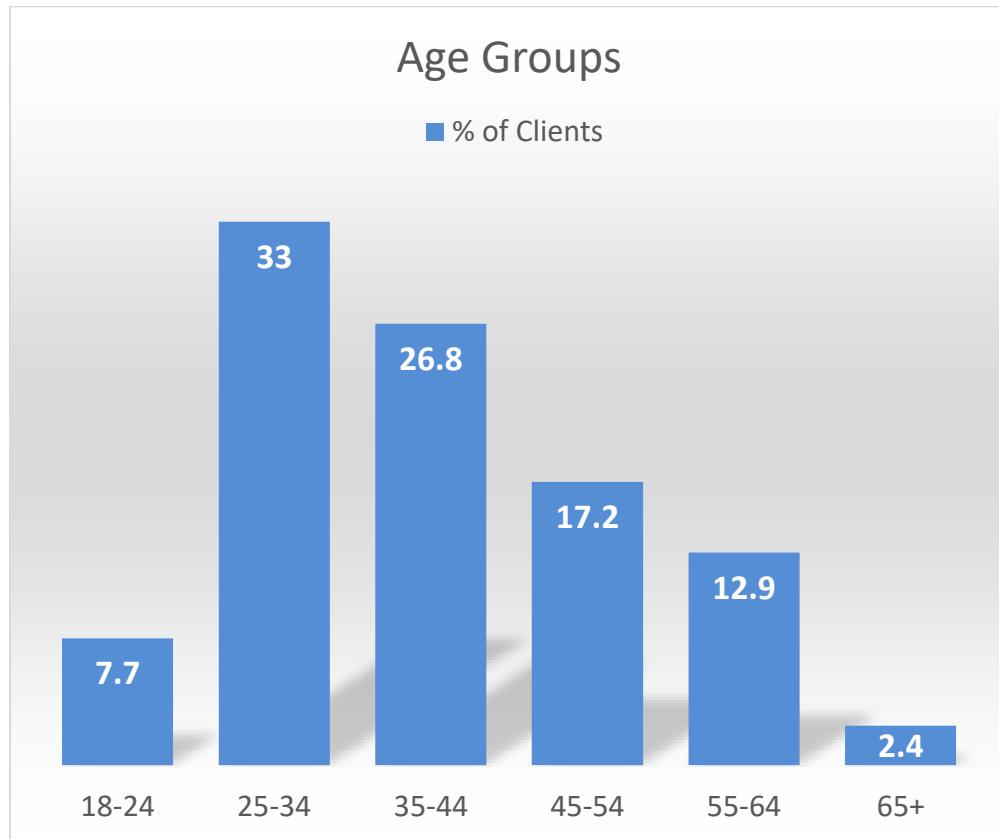
Recruitment and Outreach

Midway through the grant-funded period, TFCF had to make significant changes to its recruitment and outreach efforts due to the pandemic. The pandemic eliminated the policy that allowed TFCF to enter the jails and prisons to directly recruit women while they were still incarcerated. In response, TFCF developed an effective strategic letter and email campaign, along with delivering flyers to the jails and prisons. TFCF paired these efforts with webinars and online recruitment events, as well as driving to meet women in the jail and prison parking lots as they were released. TFCF averaged 15 recruitment and outreach events per month, reaching an average of 10,000 to 12,000 potential clients per year. In addition, TFCF mailed an average of 1,000 to 2,000 letters and emails per month to potential clients. The Client Satisfaction Survey, which asked clients' motivation for joining the program, found that both TFCF staff efforts and its partnerships with officers and other agencies in the community provided effective mechanisms to reach potential clients.



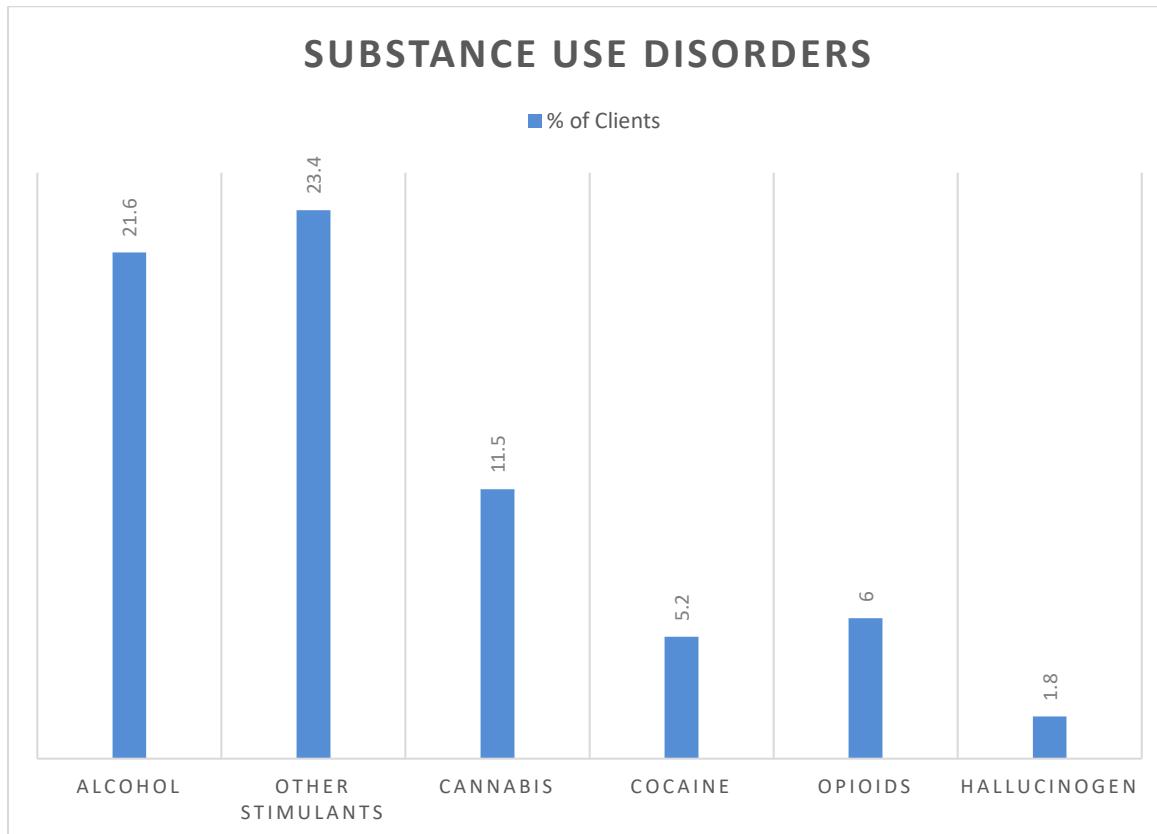
Client Demographics

TFCF clients are representative of the diversity of the population of San Bernardino County, California. 47.4% of clients are Hispanic, 39.6% are Black, and 37.8% are white. The remaining clients are American Indian, Asian American, Native Hawaiian/Pacific Islander, or other races and ethnicities. The majority of TFCF clients are between the ages of 25 and 54, but the age distribution is diverse. 79% of clients are mothers. 95.7% of clients entered the program directly out of prison or jail (out of an institutional setting) and 98% of clients had no form of employment at intake.



Client Substance Use and Mental Health Disorders on Intake

Most clients entered the program sober because they had been recently housed in prison or jail. The goal, therefore, was for TFCF's program to help them maintain sobriety as they transitioned to an independent and self-sufficient life in the general society. Clients enrolled with diverse substance use disorders, but the most common were alcohol-related disorders, cannabis-related disorders, and other stimulant-related disorders.



27.1% of clients entered with one or more identified mental health diagnoses. The most common mental health symptoms reported at intake were anxiety (averaging 7 days out of the last 30), depression (averaging 4 days out of the last 30), and impairment of cognitive functioning (related to PTSD symptoms, averaging 3 days out of the last 30).

Client Retention

TFCF's six-month follow-up rate was 97.4%, indicating a retention rate higher than its goal of 95% and far exceeding the discretionary grants rate as a whole. TFCF's exceptional retention rate is a result of its comprehensive strategy for consistent client engagement and relationship-building, which was detailed in the peer-reviewed presentation and report provided at the American Public Health Association conference. This comprehensive strategy included peer mentoring calls and letters, providing self-care and hygiene supplies to clients, and maintaining consistent monthly drug-free social activities. The Client Satisfaction Survey indicated extremely high rates of satisfaction with the services and care clients received at TFCF. No indicator in the survey scored less than a 4.7 on a 5-point scale (where 5 is very satisfied), and the average across factors was a 4.8. Qualitative comments provided by clients in focus groups were almost uniformly positive and were detailed in the report to the American Public Health Association. Clients routinely described the program as providing not only much needed high-quality services that helped them successfully transition to society, but also that the program helped them built healthy new friendships and support networks.

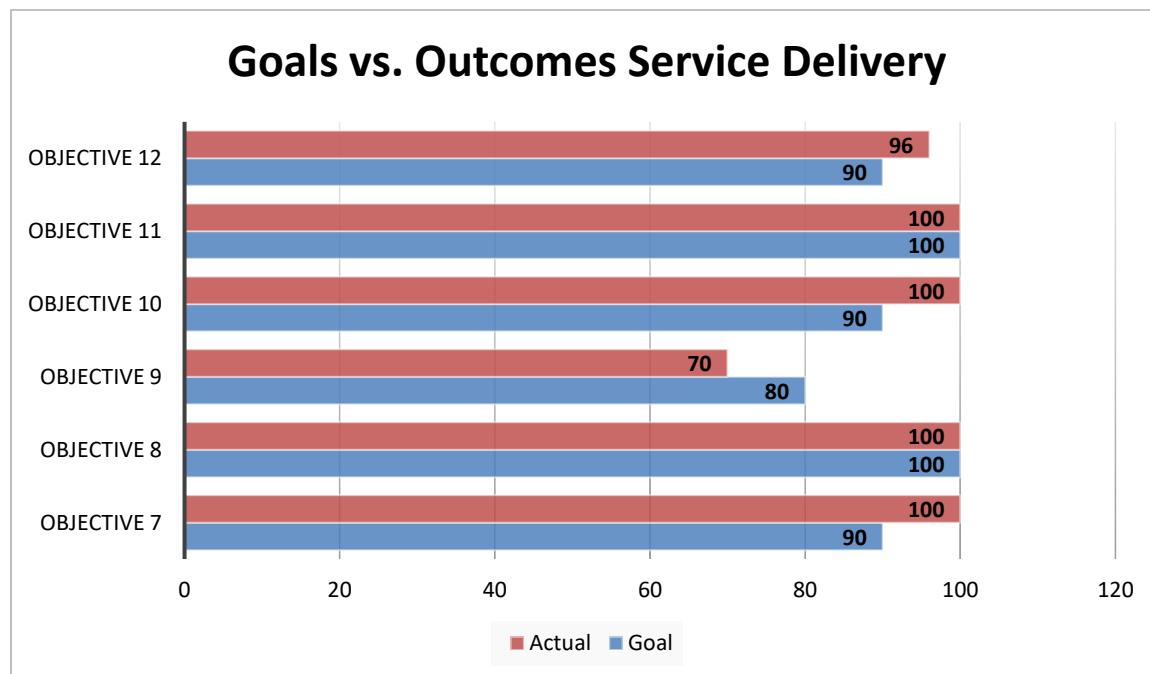
The evaluator concludes that TFCF has nearly met the standard for Objective 4, has exceeded the standard for Objective 5; and has exceeded the standard for Objective 6.

Objectives 7-12: Services Provision

TFCF had six objectives for services provision to enrolled clients, which supports the goal to expand the capacity of San Bernardino County to meet the needs of the target population:

- **Objective 7:** Provide substance abuse treatment, mental health services, or both types of services to 90% of enrolled participants.
- **Objective 8:** Provide critical support services to 100% of enrolled participants.
- **Objective 9:** Provide basic employment skills, coaching, and assistance to 80% of enrolled participants.
- **Objective 10:** Provide case management to 90% of enrolled participants.
- **Objective 11:** Provide assessment to 100% of enrolled participants.
- **Objective 12:** Provide peer coaching/ mentoring to 90% of enrolled participants.

Services provision objectives were assessed based on discharge data (N=189).



The evaluator concludes that TFCF has exceeded the standard for Objective 7; has met the standard for Objective 8; has nearly met the standard for Objective 9; has exceeded the standard for Objective 10; has met the standard for Objective 11; and has exceeded the standard for Objective 12.

Substance Abuse Treatment and Mental Health Services

TFCF provided many different substance abuse treatment services. As most clients entered the program sober (from having been recently in prison or jail), the goal was primarily to help them abstain from alcohol and drugs and achieve longer-term sobriety. Therefore, services provided were primarily oriented toward recovery support (86.8% of clients received this service), recovery coaching (75.7%), self-help support (56.6%), relapse prevention (56%), and substance abuse education (50.3%). 87.3% of clients received treatment planning. Additionally, 96.3% of clients received peer coaching, a key part of both supporting sobriety and in client retention through relationship-building. 39.7% of clients received individual counseling and 2.6% received group counseling.

Critical Support Services

Critical support services in the Positive Futures II Program focused on diverse supportive services and activities to assist clients in rebuilding their lives as they re-entered society. At TFCF, critical support services are organized in a way that builds relationships and women's feelings of safety, security, and stability. Housing, transportation, and other services are integrated so that women feel they are not simply part of a program, but rather are part of a community. These supports are approached as part of a process that helps women become independent and self-sufficient over time, but within a context of building a sense of community and mutuality. The following page details critical support services provided by TFCF and their rates of usage. Services are coordinated through a process of assessment and case management, which 100% of TFCF clients received.

Critical Support Services

Support through Transitions to Independence



Building Healthy Relationships

96% of women engaged in peer coaching. 80% benefitted from drug-free social activities..



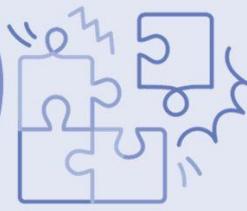
Employment Support

12% of women received pre-employment services and 69% received employment coaching. 95% of those receiving employment services reported the services helped.



Housing Support

51% of women received housing support services and 42% received drug-free housing. 81% of women said the program helped them secure stable housing.



Transportation

93% of women benefitted from transportation services, which ensures women can safely make it to a variety of services, required meetings, and work. This meets a key need in the region, which lacks sufficient public transportation.



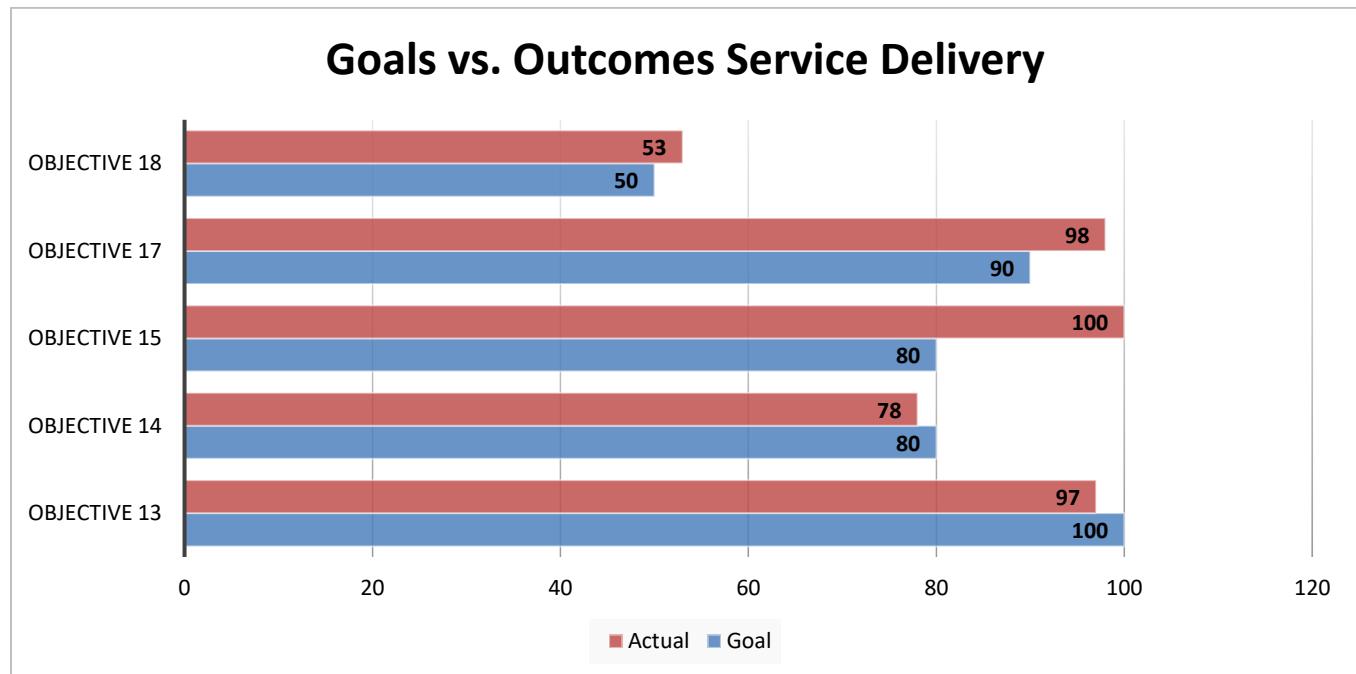
Providing Key Information

89% of women received information referrals and 58% received individual coordination. 52% of women received HIV/AIDS education.

Goal 3: Client Outcomes (Objectives 13-18)

TFCF's remaining objectives (13-18) relate to client outcomes, fulfilling the second part of goal #3, to address the gaps in treatment services in San Bernardino County through the Positive Futures Program, *with positive outcomes for clients in the target population*. Outcomes objectives include:

- **Objective 13:** Maintain a completion rate of 100% of program participants (of those who have been retained).
- **Objective 14:** Reduce substance use below 20% of graduated clients (80% abstinence rate).
- **Objective 15:** Reduce recidivism below 20% of graduated clients (80% do not recidivate).
- **Objective 16:** Improve mental health among graduated clients.
- **Objective 17:** Reduce homelessness below 10% of graduated clients (90% are housed).
- **Objective 18:** Increase employment rate above 50% of graduated clients (including those enrolled in school or vocational training leading to employment).



The evaluator concludes that TFCF has nearly met the standard for Objective 13; has nearly met the standard for Objective 14; has exceeded the standard for Objective 15; has met the standard for Objective 16 (detailed below); has exceeded the standard for Objective 17; and has met the standard for Objective 18.

Promoting Sobriety

TFCF employed a number of strategies and services to assist clients in maintaining sobriety. These included the services detailed in the prior section on service delivery, primarily oriented toward recovery support, and providing drug free housing and drug and alcohol-free social activities. TFCF also encourages and provides 12-step facilitated groups and peer coaching. Focus group data indicated that clients particularly appreciated TFCF's non-judgmental but highly engaged approach to clients who struggle to remain sober – TFCF staff consistently reach out to clients who begin to disengage or who reportedly struggle with sobriety but encourage clients to return to the program without judgment if they have a period of alcohol or drug use. Clients overall increased their engagement in recovery support groups as a result of being in the program (from 65.4% engaged at intake to 75.5% engaged at discharge). Clients also increased the number of days (out of last 30) that they attended recovery support groups: intake average of $M= 5.35$, $SD= 9.07$ to a discharge average of $M= 7.12$, $SD= 8.93$, $t(166)= -2.277$, $p< 0.012$, $d= 0.176$ (a small effect).

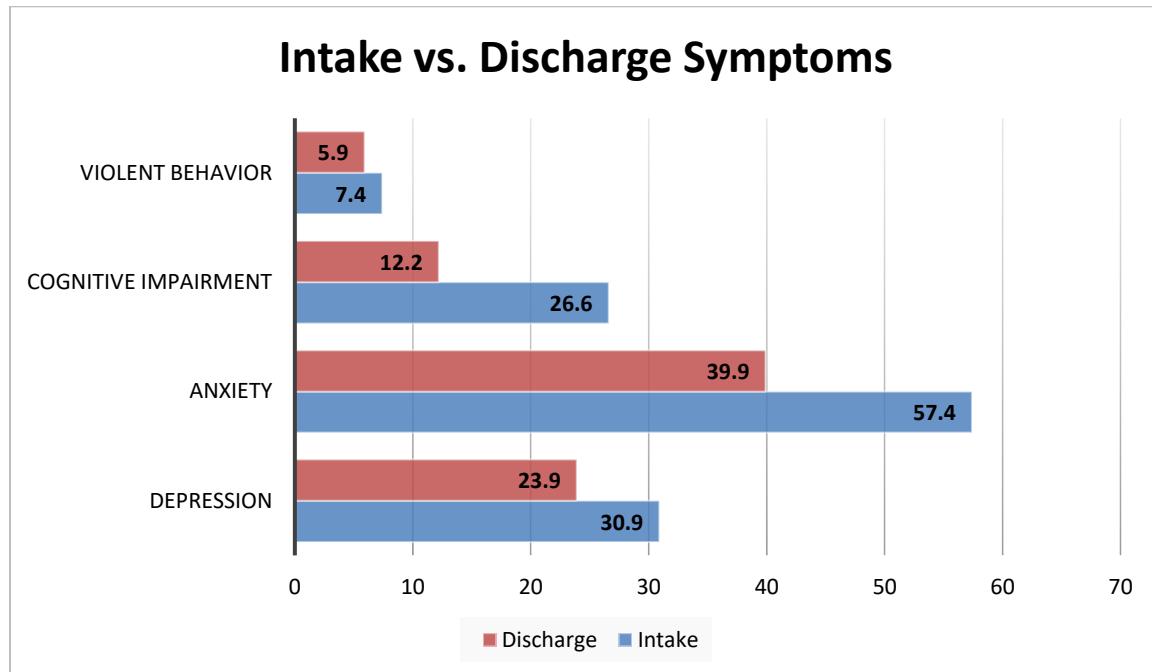
As a result of these strategies, while TFCF narrowly missed its goal of 80% abstinence among clients, it achieved a significantly higher rate than that of all discretionary grants (TFCF rate was 77.5%, whereas all discretionary grants rate was 60.3%). Decreases in use of alcohol and drugs were reported by clients in all reported drug classes: alcohol (from 7% of clients to 3.7%); marijuana (from 7.5% to 2.7%); methamphetamines (from 7.5% to 4.8%); hallucinogens (from 1.3% to 0%); and cocaine/crack (from 0.6% to 0%).

Recidivism Rate

TFCF had an impressive 100% of clients avoid recidivating, a testimony to its strengths in providing relationship-centered services that effectively help women avoid returning to criminal activity. This rate was higher than the discretionary grants rate of 97.1%.

Mental Health

TFCF's programs had statistically significant positive impacts on every measure of mental health across clients, both with and without diagnosed mental health disorders. Across all of the common mental health symptoms reported by clients at intake, significant decreases in symptoms (as measured over last 30 days) were demonstrated at discharge:



Clients reported statistically significant decreases in symptoms of depression, from an intake average of $M= 3.93$ (days out of last 30 days), $SD= 8.71$ to a discharge average of $M= 1.61$, $SD= 5.23$, $t(187)= 5.929$, $p< 0.001$, $d= 0.432$ (a medium effect). Considering decreases in symptoms of anxiety, a similar significant decrease is noted: intake average of $M= 7.23$, $SD= 10.45$ to a discharge average of $M= 2.44$, $SD= 6.19$, $t(187)= 9.303$, $p< 0.001$, $d= 0.678$ (a medium-large effect). Cognitive impairment often linked to PTSD similarly declined: intake average of $M= 3.07$, $SD= 7.51$ to a discharge average of $M= 0.95$, $SD= 3.74$, $t(187)= 5.848$, $p< 0.001$, $d= 0.426$ (a medium effect). Across all three of these symptoms, there was not only a decrease in symptoms, but also a decrease in the variability of symptoms across the client population, indicating greater stabilization of those most symptomatic. Finally, the Trauma Symptoms Checklist, when averaged across all indicators of PTSD (where 0= never experiencing symptoms; 1= rarely experiencing symptoms; 2= sometimes experiencing symptoms and 3= often experiencing symptoms), demonstrated statistically significant decreases in symptoms as well: intake average of $M= 0.634$, $SD= 0.482$ to a discharge average of $M= 0.274$, $SD= 0.364$, $t(166)= 10.385$, $p< 0.001$, $d= 0.804$ (a large effect). These indicators, based on pre/post matched pair t-test, indicate that the Positive Futures II Program not only improved clients' mental health, but did so at a statistically significant level.

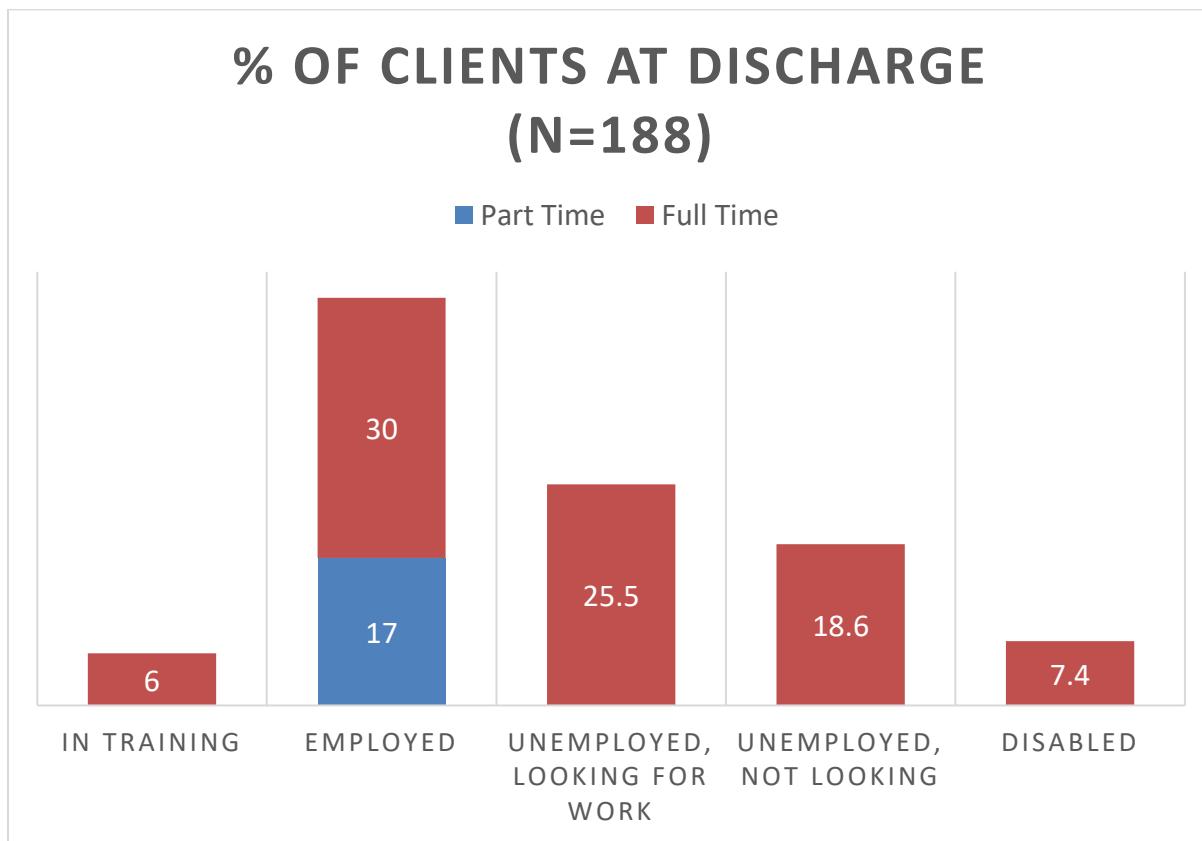
Homelessness

98% of TFCF clients are housed at discharge. Of these, 87.8% are in stable housing (i.e., not in a shelter or institution). 81.3% of clients reported the Positive Futures II Program helped them secure housing. While long-term permanent housing is often not achievable within the 6 month program period (due to California's exceptionally difficult and expensive housing and rental market), clients are provided with stable housing options.

Employment and Education

Nearly all TFCF clients were unemployed at intake, due their recent release from prison or jail. At discharge, 46.8% of clients were employed and a total of 53% of clients were in employment or educational pathways to employment. This was a 900% increase over intake (compared to the all discretionary grants rate of change of 54%). TFCF has also been able to refine its employment services over the grant-funded period and show year-over-year improvement in its client employment rates: 2019 (33%); 2020 (45%); 2021 (45%); 2022 (46%); and 2023 (47%).

Most of the remaining clients were looking for work or were disabled. TFCF's outcomes for employment are highly significant when one considers the context within which their clients are recovering. Aside from significant stigma against formerly incarcerated people in employment, particularly in the "caring" and "helping" professions that form many women's primary pathways to employment, there are significant challenges in the availability of full-time living wage work in Southern California. Furthermore, the women in the Positive Futures II Program, because they enter the program immediately upon release, often require an extensive amount of time to become fully stable in their mental and physical health and to gain the life and job skills needed to secure even entry level jobs. This means that many of them are not yet employed by discharge from the grant-funded program, but continue to receive employment-related (and other) services post-program from TFCF and eventually do become fully employed and financially self-sufficient.



There was a significant increase in income self-sufficiency on a scale of 1-5, where 5 is best: from intake ($M= 1.63$, $SD= 1.36$) to discharge ($M= 3.21$, $SD= 1.54$), $t(149) = -9.607$, $p < 0.001$ with a large effect size ($d= 0.784$). Income increased from an average of \$16.84/month (from wages) for clients to \$785.87/month. This was a statistically significant shift in income, $t(150) = -9.097$, $p < 0.001$, $d= 0.740$ (a large effect). Of those enrolled in school/training programs, 96% said the Positive Futures II Program helped them achieve this goal. Of those who were employed at discharge, 95.2% said that the program helped them secure employment.

Overall Quality of Life

In addition to the indicators linked to objectives, a number of indicators from the GPRA were used to assess quality of life. These included overall health status, client ranking of quality of life, engagement with family and friends, and relationship satisfaction. All of these indicators demonstrated statistically significant gains from intake to discharge. Health status improved from an intake average of $M= 2.71$ (where 1 is optimal and 5 is poor), $SD= 1.05$ to a discharge average of $M= 2.32$, $SD= 0.99$, $t(148) = 3.084$, $p < 0.001$, $d= 0.253$ (a small effect). Quality of life improved from an intake average of $M= 4.02$ (where 1 is poor and 5 is optimal), $SD= 0.89$ to a discharge average of $M= 4.34$, $SD= 1.29$, $t(187) = -2.858$, $p < 0.002$, $d= 0.208$ (a small effect). Engagement with family and friends improved from 87.8% of clients reporting engagement at intake to 93.1% reporting engagement at discharge. Relationship satisfaction also improved from an intake average of $M= 2.08$ (where 1 is good and 5 is poor), $SD= 0.841$ to a discharge average of $M= 1.59$, $SD= 1.00$, $t(185) = 5.927$, $p < 0.001$, $d= 0.435$ (a medium effect). Based on the GPRA data, the average client response to ranking the extent the Positive Futures II program helped them with their quality of life was that it helped to a great extent ($M= 1.178$, on a scale of 1= to a great extent, 2= somewhat, 3= very little, and 4= not at all).

Equity

In reviewing the National Outcomes Measures for program outcomes by demographic groups, the evaluator found the following trends:

- **Age and Sobriety:** The youngest age group (ages 18-24) struggled most with maintaining sobriety, achieving significantly lower abstinence than others (53.8%). Mid-life and older aged clients (45+) experienced significantly higher abstinence than others, with a positive correlation between age and rate of sobriety.
- **Age and Employment:** There was a slightly higher rate of employment and education among mid-life clients (ages 35-44, 66.7%) and a slightly lower rate among older (55+) clients (ages 55-64, 46.2%; ages 65+, 0%).
- **Race/Ethnicity and Employment:** Hispanic women were more likely to be employed than Black women (63.2% vs. 48.8%) and white women (63.2% vs. 42.1%).
- **Race/Ethnicity and Housing:** White women were the least likely to achieve permanent housing (15.8%).

Despite some minor disparities in outcomes by age and race/ethnicity, the Positive Futures II Program had overwhelmingly positive impacts on clients of all demographic groups. Diverse clients engaged in focus groups affirmed these outcomes, nearly universally describing benefits they had received from the program.

Summary: Innovative and Promising Practices

TFCF's model for its organization and program is innovative, in that it is relationship-centered, culturally responsive to Black and brown women, and affirms formerly incarcerated people as experts in their own experiences and needs – shaping them into strong self-advocates over time. In this way, the program not only successfully transitions clients into independent sober living, but also into engaged citizens. One focus group client offered: “This program was designed to help me change myself so I could be more open and not sit in the back seat. I was kind of standoffish and intimidated in the beginning, but I learned that if I needed help, I needed to speak up and I had a voice and needed to be heard.” Providing self-advocacy training alongside skills-based training such as employment coaching builds women up who often enter the program with negative self-image, providing them with a combination of coping strategies, self-advocacy tools, and self-confidence that help them become effective at changing their own lives and supporting change in others.

The program builds women’s skills and confidence through its focus on building relationships and community. Clients in focus groups often remarked on how staff were like friends or family, demonstrating empathy, compassion, and strong engagement alongside professional skill: “[The staff member] has a very calm spirit. She is like a friend, even though she’s a professional. She can read you. She says, ‘How are you doing today?’ and you say, ‘Fine.’ And she’s like, ‘No. Really.’” This relationship-centered model of care is designed to break intergenerational trauma and incarceration, teaching women how to have positive, healthy relationships. TFCF’s program changes the cycle of incarceration and foster care placement by providing the support when mothers need it most: “This program restored my family. I know I’d still be fighting for my son if it weren’t for this program that I’m in. I’m the mother of three boys. My youngest is the one who my alcoholism got taken from me. They were going to adopt him out. Time for Change Foundation saw the fight I was fighting. And they joined and fought it with me. Me and my boys are home. We’re safe. I’m sober.”

In conclusion, the Positive Futures II Program accomplished remarkably positive outcomes in its five-year period. Aside from its strong client outcomes, TFCF secured funding to sustain services and successfully advocated from individual to state levels for the rights of formerly incarcerated people. TFCF collaborated with university researchers to use the data from the Positive Futures II Program to effectively communicate to others the efficacy and value of its innovative relationship-centered culturally responsive model of care. TFCF has expanded and grown in their impact over the five-year period, not only in their capacity to serve vulnerable women in San Bernardino County, but more broadly in their service state-wide and nationally through their advocacy work.

About the Evaluator

Kimberly Kirner, PhD, is a Professor and cultural anthropologist at CSU Northridge specializing in applied anthropology. As an applied anthropologist, her research primarily focuses on using anthropological approaches, theories, and methods to solve problems in human well-being and health. More specifically, her research is in the application of cognitive anthropology (decision-making studies, cultural model theory, ethnoscience) to policy and organizational studies. The author of *Introduction to Ethnographic Research* and *Doing Ethnographic Research: Activities and Exercises*, she is passionate about teaching students and community members about how to use qualitative and mixed methods in service to solving real-world problems. In addition to her academic work, she is a practicing anthropologist and consultant in program design, needs assessment, program and project evaluation, and fund development for the non-profit and local government sectors. Theoretically, she is interested in the relationships between cultural knowledge



systems, identity and community, and behavior. In practice, she works on how to harness cultural anthropological methods and concepts in service to social justice, equity, and human well-being. Her research has focused on diverse problems, including: land management, environmental change, and cultural heritage; urban climate change and heat islands; household environmental sustainability; mental health and social services programs for vulnerable populations; individual and community resiliency; and culturally competent health services. When not working, she can be found riding her horses, hiking, and creating visual art.



It Home
It Hope.





2023

Final Outcomes Evaluation Report

TIME FOR CHANGE FOUNDATION

We Call It Home,
Others Call It Hope



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To Date TFCF has reunited 320 children with their mothers.