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EVALUATION STUDY IN PARTNERSHIP:

GARAGE A MUSIQUE, CENTRE DE PEDIATRIE SOCIALE EN COMMUNAUTE (FONDATION DR JULIEN)

Évaluation de processus en partenariat: Garage à musique, CPSC-Fondation du Dr Julien

UN RÉSUMÉ EXÉCUTIF EN FRANÇAIS EST DISPONIBLE À LA FIN DU DOCUMENT

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THE PROJECT: GARAGE A MUSIQUE IMPLEMENTATION, POPULATION AND OBJECTIVES

Started as a pilot in 2009, the Garage a musique pour les jeunes (GAM) is the first specialized offering of the Centre de pédiatrie sociale en communauté network of services, set in place by Hélène (Sioui) Trudel, Senior Legal Advisor and General Director at the Fondation Dr Julien. Based in Hochelaga-Maisonneuve, a Montreal neighbourhood holding the highest concentration of children who are not ready for school (over 42.3%; EQDM, 2012¹), amongst poverty-related problematics; this unique blend of integrated preventive interventions proposes a 3-pronged strategy to accompany vulnerable youth (0-17):

- 1) Offering free music education with a collective pedagogy;
- 2) Providing individualized and adapted educational support at CAS (Centre Accès Scolaire);
- 3) Insuring evaluation-orientation and follow-up by the interdisciplinary team in social pediatry clinic.

During the time of evaluation, over 700 children and adolescents have participated at least during one 3-month session; half of them receiving the attention and care of PSC services.

The "Garage" is an intersectorial, interdisciplinary intervention reflecting Dr Julien's social pediatry in community approach (involving medicine, law and social work), the collective practice of music and a school access Centre. GAM is the first of Quebec's network of Centre de pédiatrie sociale en communauté (CPSC) to offer a specialized approach; although all 20 centers across Quebec do offer arts-based interventions of all kind. CPSC-GAM is now one of 3 "centres-experts" of the Foundation, adding to the first created in 1997 (CPSC-AED, also in Hochelaga-Maisonneuve) and second (CPSC-Côte-des-Neiges; 2003).

Preventive as well as curative, the GAM works with children and adolescents (0-17), their families and networks to give them access to developmental and educational opportunities they are generally lacking in their environment. The prioritized groups were 220 boys and girls aged 6-11 and 100 aged 12-17, living and studying in Hochelaga-Maisonneuve.

These groups of participants also targeted youth who have been identified with learning and-or behaviour disorders, who have been involved with the justice system or Centre Jeunesse; referred by the medico-social team at clinique AED; at-risk or in situation of school exclusion.

¹ Bellehumeur, P., & Desjardins, L. (2014). Enquête québécoise sur le développement des enfants à la maternelle (EQDEM) 2012.

Over half of the families that are being followed by the center are composed of two unemployed parents (58%) living on welfare for the majority or are single-parent led. It has been identified that almost half of children of this neighbourhood lack the stimulation and necessary developmental support to be ready for school at age 5 (42.3%; EQDEM, 2012). Hochelaga also has a high crime rate, often involving parents, and youth can easily get enrolled in drug trafficking and use.

OBJECTIVES

Short-term objectives of the GAM are for participating youth to: ameliorate self-esteem, develop a positive sense of identity, maintain pro-social relationships, reinforce emotional regulation, increase aptitudes to express oneself and communicate feelings, ameliorate problem-solving skills, develop fine motricity, concentration, perseverance, sociability and discipline to perform at school.



In the school environment, GAM music education provides tools to increase a sense of belongingness, reduce suspensions and exclusions, and ameliorate motivation in participating children.

Mid-term objectives also include: the development of a sense of affiliation to a pro-social group, development of a constructive social network and identification to positive adult and peer models, reduction of conflicts with peers, reduction of violent behaviour, amelioration of academic results, and diminution of school drop-out rates.

Long-term, the CPSC-GAM aims to see diminished rates of DYP signalements in their population, diminution of justice related problems, diminution of the number of kids interested and enrolled in antisocial activities (gang-related or not).

THE SOCIAL PEDIATRY IN COMMUNITY APPROACH: COUNTERING SOCIAL DETERMINANTS

Broadly, the Garage was set in place to actively prevent juvenile crime and antisocial behaviors in its youth population; involving a consortium of social enterprises and community partners. To address the underlying and structural causes of this phenomena of social disinsertion (Bedard, 1999²), or exclusion, affecting generation after generation in this part of the city, the CPSC-GAM approach started to develop a set of integrated tools conceived around the reduction of toxic stress in the environment of children.

Their approach is based on a structural and complex comprehension of health and psychosocial problematics such as neglect, behaviour disorders, victimisation, and juvenile crime. Social pediatry in community or PSC considers the root of these problems to stem not only from neuro-physio-psychological or genetic dysfunction; but also in social inequities repeating themselves over generations and ultimately taking away from children and families opportunities to reach education standards, find secure employment, live well and love well.

In this view, environmental determinants (physical, mental, emotional) combined with a lack of basic life conditions are at the source of short and long-term problems observed in children; leading to health and development difficulties, school and social drop-out, isolation, low self-esteem and confidence; lack of self-control, depression, marginalisation and lack of positive identity, among others.

² Bédard, J. (1999). *Familles en détresse sociale. Familles en détresse sociale : repères d'action*. Sillery, Québec : A. Sigier.

According to Garage founders and its PSC approach, a transsystemic and intersectorial approach is essential to identify and eliminate such toxic stressors to break the dynamic of despair, isolation and breaks in the social fabric. Tools such as collective apprenticeship of music aim to give children from the youngest ages a sense of purpose, competency, and accompany them in a caring, highly benevolent web of adults (including parents, family members, music teachers, educators). Integrating the latest discoveries in neurosciences and education, which support the effects of an intensive and regular program of music learning within a youth group; the GAMs main objective was to strengthen these youth's general learning abilities, as they learn an instrument (or singing). And to give them an opportunity to belong, and solidarize as a part of a group of youths of related ages; learning respect, team-work, rigour and discipline in a caring setting led by adults trained in the approach.

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An individualized action plan is the issue of an interdisciplinary and intersectorial clinical evaluation process, at CPSC-GAM, which is on the premises of music lessons and adapted school tutoring services. Evaluation-orientation involves the social pediatrician, a social worker in link with the lawyer-mediator if needed; the child, his family, all significant persons inside or outside the family; also, a collaboration is established with school or daycare, community groups, CSSS or Centre Jeunesse, etc. A space of mutual learning, sharing of information and perceptions, comprehension and action (APCA) is then established and a reference to GAM is made depending on the child's specific needs.



EVALUATION STUDY OF CPSC-GAM 2012-2016

An evaluation of GAM's implementation process was officially started in 2012 in partnership with Fondation du Dr Julien and its professionals, and was directed by Anne-Marie Piché, social work professor at UQÀM. The study, and the first phase of the project were supported by Centre National de Prévention du Crime, (CNPC) (Ministère de la sécurité publique, Stratégie nationale pour la prévention du crime, Gouvernement du Canada) and Fondation du Dr Julien.

The main objectives of the evaluation were to 1) examine how much the project was meeting the goals of its logic model, 2) how and how much it succeeded in reaching target youth groups in the population; 3) determine to what extent activities met their short and mid-term objectives; 4) also, we wanted to document the bond and continuity of support available to participating youth in their development throughout the program; 5) as well as analyze the modalities of community partnerships that were established around the process of implementing GAM (schools, community youth and family organizations, among others).

An internal evaluation of GAM was started in April 2011 with the help of the study direction, and was followed up by this external evaluation, between April 2012 and March 2016. All three components of the GAM project were considered in the evaluation, for themselves but also to explore how much they integrated one to another: 1) evaluation and follow-up in social pediatry community clinic; 2) collective music apprenticeship; and 3) specialized school tutoring.

The final report³ and its summary⁴ present quantitative and qualitative outcomes of this process evaluation, challenges and lessons learned in implementing GAM. Also identified are the factors which contributed to its success, perceptions of all participant and professional groups who have participated, and recommendations for future programs.



METHODOLOGY

In 5 years, the study met and collected testimonies of 260 participants; amongst whom 57 participated in semi-structured interviews and focus-groups with the principal researcher and assistants (24 children and youth and 4 parents; 21 GAM professionals; 8 community organization partners). 203 surveys were collected in 2 phases of implementation and with 2 participant groups (133 parents and 70 youth aged 5-18).

The following methods were used to maximize participation and reach all groups: 1) participation surveys, 2) semi-structured interviews, 3) focus groups, 4) observation of activities at GAM, 5) participation to advising committee meetings, 6) access to GAM database.

A mixed-methods, exploratory evaluation study was used with the following objectives, derived from Canada's CNPC domains of evaluation questions: 1) describe youth participants and their families; 2) document intensity of activity offering and interest in participating to GAM activities; 3) describe and document implementation of activities and adaptations; 4) document resources that were needed and put in place in the implementation process to reach initial goals; 5) analyze how the enterprise consortium partnership worked together and managed activities together 6) extract the lessons learned in implementation challenges, to ameliorate and capacitate the program in its future delivery.



ANALYSIS

SELF-REPORT SURVEYS OF PARTICIPATION: PARENTS & YOUTH (2013-2016)

133-self- report participation surveys- parents (2013-2014) :	70 self-report participation surveys- youth participants 5-18 y. old (2015-2016) :
Outcomes	
41% single-parent led families (46% biparental)	Youth aged 5-18 y. old; 66 % are 12-13 y. old (Chomedey high-school); 50/50 boys and girls
Children aged 2½ - 15 y. old; 56,6 % girls; 48 % elementary school. Quebecois francophone origin in majority living in Hochelaga.	81% originally from Quebec; 88% have French as 1st language. All live in Hochelaga.
Over 55% registered more than 1 child to GAM	School, then parents, were principal sources of referral to GAM
Income below threshold of poverty (majority)- 23% have less than 10 K/ year	77.1% had collective music lessons as only GAM activity; 5.7% reported using CAS tutoring service.
Motives to register child in GAM to learn music and socialize	45.7% registered since less than a year; 40% participated twice a week.

³ Piché, Anne-Marie. (Juin 2016). Rapport final de l'évaluation des processus de mise en œuvre du Garage à musique (Fondation du Dr Julien). Recherche financée par le Centre national de prévention du crime (CNPC-Sécurité publique, Gouvernement du Canada & Fondation du Dr Julien. Partenariat Fondation du Dr Julien et Service des partenariats et du soutien à l'innovation (SepSi) UQÀM. 268 p.

⁴ Piché, Anne-Marie. (Juin 2016). Résumé exécutif de l'évaluation des processus de mise en œuvre du Garage à musique (Fondation du Dr Julien)

47% children seen in social pediatry yet 70% could not identify difficulties (individual or family life); 35% did not perceive school problems. When perceived; mostly learning disorders.	80 % perceived at least 1 domain of positive change in their life since GAM participation. Mean of 5 changes observed by youth (concentration, perseverance, sociable, school motivation, mastery of anger ranked the highest).
	11% had been suspended or excluded at school in the past
	93% did not report justice related problems/ 7% reported having intimidated peers or committed acts of vandalism
	83% did not report ever consuming alcohol- 17% did (at 13 y. old)
	91% did not report ever consuming drugs/ 9 % tried at least once.
	Main motivations to participate and stay in GAM are learning an instrument and playing, making friends, positive relationships with GAM adults.

THEMES DRAWN OUT OF SEMI-STRUCTURED INTERVIEWS AND FOCUS-GROUPS WITH YOUTH (6-18)

An accessible space to socialize and learn together	<ul style="list-style-type: none"> ✓ The Garage was an attractive, fun place to learn and practice a music instrument for children and youth we have met; a real passion for music has developed or had a chance to be actualized through offering free professional music courses every day at GAM. ✓ Coming to this space, well located as it is close to their schools and homes, has become routine over the years and year-round, as many also participated in the summer music camp. Even if the Garage is perceived as a fun cool place to hang-around and meet new friends; youth also perceived the emphasis on learning and rigour in practice of their music instrument.
Finding one's place and overcoming the challenge of learning	<ul style="list-style-type: none"> ✓ The challenge of learning an instrument is associated to the challenge of learning as a part of a group, trying to reach harmony with individuals possessing various levels of experience, motivation and commitment to work. ✓ Youth have learned to work together to reach a common goal, which is to play well and ultimately, give a great show at the end of year concert. ✓ This dimension of exigence, of hard-work and discipline pays-off, as youth themselves all mentioned feeling proud, capable and more confident in their overall abilities; their self-image also improved in many cases. ✓ Support of caring, encouraging adults who can focus on their positives without judging their occasional lapses or social difficulties, is also hugely important for them, as it stimulates them to persevere.
Themes drawn out of semi-structured interviews and focus-groups with GAM music teachers	
Educational approach: pushing or following?	<ul style="list-style-type: none"> ✓ Interviewed teachers soon realized the importance of adapting their style and expectancies gradually, child by child; without leaving behind promotion of excellence and perseverance. ✓ This balance became better achieved as the program continued. A "non-constraining" approach was used from the beginning not to off-put marginalized youth, who have become allergic to any form of control or rules in their lives, or that have received very little supervision from their families. ✓ However, a strong core belief in their potential has necessitated the addition of a specialized harmonic education approach in the last years, to also emphasize the importance of structure in music, as in life, to accomplish goals.

	<ul style="list-style-type: none"> ✓ Youth seem to appreciate this blend of "flexibility in approach and structure in the means"; and did see the difference with classical music formations or courses that would have otherwise refused them.
Parents perceived benefits of GAM for their children (interviews and surveys)	
	<ul style="list-style-type: none"> ✓ Parents have a supporting role in the program: in fact, GAM was designed also to encourage them to become more involved in their children's life's, to make talents and efforts visible and encouraged. ✓ Parents appreciate the program, and often have mentioned the importance of providing another space than school offers to help socialization processes, help a child with a learning disability become more confident; also, to meet other parents at practices and concerts.
Themes drawn out of semi-structured interviews with GAMs community partners	
Knowhow: working with families and children of the neighborhood	<ul style="list-style-type: none"> ✓ Community professionals working along with GAM have developed a close knowledge of youth and family mentalities and life-views for many years. They have developed strategies to detect and act with the breaks in attachments, stories of conflict and exclusion that lead to mistrust of adults. ✓ Establishing a solid trust relationship by accepting them as they are, is the first key to improve other dimensions and help these youths trust themselves and succeed. ✓ Not being off put by appearances or negative attitudes, having patience, and being able to spot the developmental aspects that were lacking in the trajectories of their clientele are essential to this work.
Inclusion: a common value	<ul style="list-style-type: none"> ✓ Including vulnerable youth that have learned not to believe in themselves in stimulating activities that are interesting for them and reach their culture allows the experience of lived successes. ✓ Knowing how to influence; without imposing. Respecting, to instill respect. Teaching the importance of structure, through more informal means. These are all strategies developed through the years to join with this population and involve them in change; which has also worked well in their cooperation with the GAM.
A shared management with flexibility	<ul style="list-style-type: none"> ✓ As a program like GAM is built from the observation of needs, and context, community partners have needed to follow the implementation with a flexible attitude around changes made to improve services, address hidden needs or prioritize certain groups in the delivery. Partner organizations have managed over the years to follow this rhythm and re-assess their involvement in the program but all maintained their involvement with GAM.



IN CONCLUSION

In less than 5 years, CPSC-GAM has managed to accomplish its objectives and has demonstrated innovation in prevention of juvenile crime and other psychosocial problematics of youth. Based on a solid conceptual frame, explicitly formulating and operationalizing interventions that are developmental-based and founded on the latest neuropsychology findings about collective learning of music; the GAM was developed following a PSC protocol, whilst making necessary adjustments all along to better adapt to needs of participants.

A major adaptation involved the reformulation of the school tutoring component, which became CAS (Centre d'Accès scolaire) in 2015. Realizing the very high number of children suffering from moderate to severe levels of learning disorders, often paired with complex family difficulties; the organization needed to design a specialized education program and hire appropriate resources to deliver it as regular after-school tutoring (still offered by Hochelaga based Je Passe Partout) was far from

sufficient. Also, the clinical support formula was redesigned, on the GAM premises and involved the hiring of 3 educators and psycho-educators to support youths with emotional or behavioral difficulties between-and-inside classes.



Victim of its success, the GAM has needed to hire double the number of music teachers estimated at the beginning as over 700 youth participate every week. A move to a larger edifice, loaned by the Ville de Montreal, was also necessary to run activities and to get closer to secondary schools.

GAM is unique in its kind amongst other models involving collective apprenticeship of music for youth: it's the only one that is structured around and using tools of social pediatry; as such it incorporates developmental notions in its framework and its daily interventions. It is also the only one that proceeds by clinical reference and follows-up progress of all registered youth participants. A depistage avenue is also available, allowing for youth that are not know by the clinic but do have important difficulties to be identified and offered services. The clinics integrated and intersectorial services

have also allowed many to gain accessibility to essential care whether for health and development, family needs or professional educational support, now almost absent from Montreal public schools. This fact is in coherence with the children's rights (CRDC) base of PSC, stating that every one of them regardless of the effect of social determinants, should benefit from global developmental support.



RÉSUMÉ EXÉCUTIF

Le Garage à musique (GAM) est établi depuis 2009 dans le quartier Hochelaga-Maisonneuve, un des quartiers les plus défavorisés de Montréal. On y observe des retards chez plus de 50% des enfants sur le plan de leur développement et une espérance de vie d'environ 10 ans de moins. Le GAM unit la pédiatrie sociale en communauté (médecine, droit, travail social), la pratique collective de la musique et un centre d'accès scolaire. Il représente un projet unique sur le plan de l'intervention en prévention et en curatif auprès de jeunes (0-22 ans) issus de milieux de vie vulnérable. Ces jeunes et leurs familles ont peu accès aux soins de base pour assurer leur santé globale et le respect de leurs droits fondamentaux. Ils font souvent preuve d'exclusion sociale et économique. Le GAM implique l'enfant, son réseau familial, des professionnels en pédiatrie sociale en communauté, ceux des réseaux de la santé et services sociaux, du milieu scolaire, et des bénévoles de la communauté. Tous s'allient pour soigner et accompagner le jeune en identifiant et agissant ensemble pour éliminer les sources de stress toxique qui nuisent à son développement.

Une évaluation du GAM a été menée entre 2011 et 2016 sous la supervision d'Anne-Marie Piché, professeure titulaire à l'École de travail social de l'Université du Québec à Montréal. Cette évaluation visait entre autres à rendre compte de la mise en œuvre globale du GAM et de son évolution; à décrire la participation et la satisfaction des enfants utilisateurs ainsi que leurs parents; à rapporter le point de vue des intervenants ainsi que des organismes partenaires du projet et à commenter l'évolution, la mise en place et l'intégration spécifique des trois composantes du projet. À l'aide d'un devis de recherche mixte, les chercheurs ont recueilli des données auprès de 267 personnes (entrevues semi-structurées, groupes de discussion et sondages). Des observations des activités, la participation aux rencontres du comité bisannuel, ainsi que les éléments de la base de données du GAM et de la base de données clinique ont également été utilisés.

La solidarité est un thème central dans le projet du GAM, principalement dans la collaboration et l'importance de créer des liens de confiance, autant avec les jeunes, leurs familles, qu'entre les différents intervenants et organismes impliqués. Plus précisément, la présente soumission propose un atelier interactif autour du thème de l'intersectorialité dans le travail auprès des jeunes en situation de vulnérabilité. Une présentation animée conjointement par différents intervenants mettra en lumière certaines constatations majeures:

- Le GAM est un modèle d'intervention unique et innovateur tant sur le plan de la prévention que de l'offre de soins auprès des enfants et des jeunes en difficulté.
- Il est le seul modèle recensé dont l'intervention est basée sur un diagnostic clinique, permettant un suivi en médecine sociale intégrant le droit et les sciences sociales.
- Le modèle potentialise le développement global des enfants et des jeunes par l'effet combiné du suivi en pédiatrie sociale en communauté, de l'accompagnement scolaire adapté et de l'apprentissage collectif de la musique de manière active et soutenue.
- Le GAM fonctionne sur la base de l'implication soutenue des intervenants et des organismes auprès des enfants et familles dans un mode de « consortium d'entreprises sociales ». Il contribue ainsi au rapprochement de toute une communauté autour de ceux qui sont généralement exclus socialement et économiquement.

L'importance de la co-intervention et de la collaboration sera soulignée ainsi que les principales recommandations issues de la recherche, autant dans une optique d'amélioration que pour la mise en place de programmes et recherches similaires. Finalement, l'expérience et l'évaluation du GAM nous permettront de rapporter les points de vue des acteurs et des différents niveaux où se développent les liens sociaux (famille, école, communauté, société).

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