



Dan's Legacy Program Evaluation

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The information, views and recommendations in this report do not necessarily represent the views of the funder or of Dan's Legacy, but are solely those of the evaluation team.



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Evaluation of Dan's Legacy

Executive Summary

The UBC Stigma and Resilience Among Vulnerable Youth Centre in the School of Nursing has conducted a mixed methods evaluation of Dan's Legacy with three key aims:

- Identify key features of the mental health and wraparound model and how they're recognized by leaders, staff and external partners of Dan's Legacy.
- Assess the program's effectiveness in supporting marginalized youth.
- Explore what helps or hinders implementation and potential to scale up for underserved youth facing mental health and substance use challenges.

Using data from youth who accessed Dan's Legacy services, we found:

1. **The program showed improvements in mental health** and daily functioning among clients who accessed the counselling program. Significant improvements (strong effect sizes) were observed for gender-diverse youth, reflecting the inclusive, and gender-affirming approach that participants in the interviews often praised.
2. **Youth need more than just short-term solutions**, and Dan's Legacy meets this need with a 16-session therapeutic model designed for deeper, long-term impact. Those who completed 16 sessions or more showed greater improvements in the outcomes, reinforcing the value of sustained, trauma-informed care.
3. **Wraparound care is essential**. About 37% of clients accessed multiple services in addition to counseling, such as the outreach or social work programs, demonstrating how Dan's Legacy supports youth in a holistic, interconnected way.
4. **The outreach and social work programs were among the most frequently accessed**, reinforcing the demand for support that goes beyond therapy.

From interviews with 17 participants, including external collaborators and internal staff with varied lengths of experience, we learned:

1. **Participants consistently reported positive impacts** of Dan's Legacy's low-barrier, no-cost services, highlighting their value for marginalized youth. They noted that the wide range of support helps meet youth where they are.
2. **Staff and partners emphasized successful components** of the program like wraparound care, flexible and adaptable counselling program, staff training and development, and interagency collaboration.
3. **At the same time, they shared the need for more support and resources**. This includes things like more office space, managing staff turnover, and keeping up with the growing demand for services.
4. **Dan's Legacy offers a promising model of care**, with participants highlighting its inclusive, culturally relevant, and trauma-focused approach as key strengths in supporting vulnerable youth.

Introduction

Youth who experience trauma often develop mental health and substance use disorders and require treatment that addresses the underlying trauma. However, it seems that existing trauma-informed approaches to treating mental health and substance use disorders among youth with trauma do not adequately address the additional challenges faced by vulnerable youth, like Indigenous and 2SLGBTQ+ youth – including housing instability, financial stress, experiences with government care, and the burden of discrimination and stigma placed upon them by society – despite heightened rates of trauma and associated mental health and substance use disorders among at risk youth like Indigenous, 2SLGBTQ+ , and youth in or aging out of care (Spillane et al., 2022; Marchi et al., 2023). Sources of mental health and substance use care – much less those taking a trauma-informed approach – can also have high barriers for entry, making them inaccessible for most extremely marginalized youth, and even those who gain access often face discrimination and stigma within those settings.

Dan's Legacy provides free, trauma-informed, and culturally relevant mental health counselling and wraparound care for youth in and aging out of foster care. The organization attempts to maintain a no-wait list and has developed specific programming that addresses the complex needs of diverse clients who face significant barriers in accessing health services by a) providing tailored Cognitive Behaviour Therapy (CBT), Dialectical Behaviour Therapy (DBT) and mindfulness approaches; b) mindfulness c) ensuring that support is provided by culturally diverse therapists, and outreach staff. Additionally, they have wrap-around programs to support their core counseling program, such as fitness, a food bank, Indigenous cultural workshops, and Dan's Diner.

Dan's Legacy offers approaches to care that are innovative and holistic; however, they are looking to establish the effectiveness of such approaches, and UBC's Stigma and Resilience Among Vulnerable Youth Centre (SARAVYC) provides expertise in evaluation and youth-engaged research, including with homeless and street-involved 2SLGBTQ+ youth. Together we expected to gain new insights into how such programs as Dan's Legacy might make a difference in young people's lives and make recommendations in finding better ways of sharing the evaluation results with the funders. To do so, researchers at SARAVYC collaborated with Dan's Legacy and partner services to evaluate the key approaches and principles of the model of trauma-informed mental health and addictions care used at Dan's Legacy with a multi-pronged evaluation plan.

The objectives of the study were to:

1. Identify the key features of the model and approach to mental health and wraparound services as identified by Dan's Legacy leaders and staff, and whether they are recognized/affirmed by partner organizations

2. Assess the effectiveness of Dan's Legacy program in providing mental health and wraparound care to marginalized youth.
3. Identify the facilitators and barriers to implementing the program and explore the potential to scale up the programming to address the opioid crisis among and mental health needs of underserved marginalized youth.

Methodology

For this evaluation, we used a mixed-methods approach, including both qualitative and quantitative analyses. We first interviewed key leaders and staff of Dan's Legacy, along with their community service partners, to assess their experiences and perceptions of Dan's Legacy's approach, identifying the features of their model of care. These interviews also helped us understand the expected outcomes and perceived impacts of the Dan's Legacy program from providers, in order to guide our assessment. Then we drew on their client data at intake and discharge to measure outcomes and change over time. These are described in more detail below.

Qualitative Interviews

We interviewed 17 participants from Dan's Legacy and partner agencies that both refer clients to Dan's Legacy or accept referrals for their services, for example, for shelter. After securing written consent, a SARAVYC team member scheduled the interview either in person or via Zoom for each participant. Each interview followed a semi-structured interview guide and was recorded. Participants were asked questions related to their role, perceived strengths and weaknesses of the programming at Dan's Legacy, and perceived impacts of the program. Interviews lasted about 45 to 60 minutes each, depending on the extent of the answers provided. Interview recordings were transcribed and cleaned of any personal identifiers. After an initial read of a portion of the transcripts, the research team met to create a list of codes to guide the analysis. Each transcript was coded using this guide, and additional insights were documented while coding transcripts. Upon completion of coding all transcripts, codes were organized according to key themes following the principles of Interpretive Description. Like other qualitative methods, Interpretive Description findings are grounded in the data. This method goes beyond describing a phenomenon and seeks to understand the implications of findings to inform and improve practice within certain disciplines, such as public health, nursing, healthcare, etc. The table below shows the demographic information of the participants.

Demographic Information of Interview Participants (N=17)

Role

Dan's Legacy Therapists/Outreach workers	7
Dan's Legacy Management Representatives	7
Partner Site Workers	3

Length of time with Dan’s Legacy

1 year or less	8
2-3 years	4
4+ years	5

Quantitative Analyses of Client Chart Data

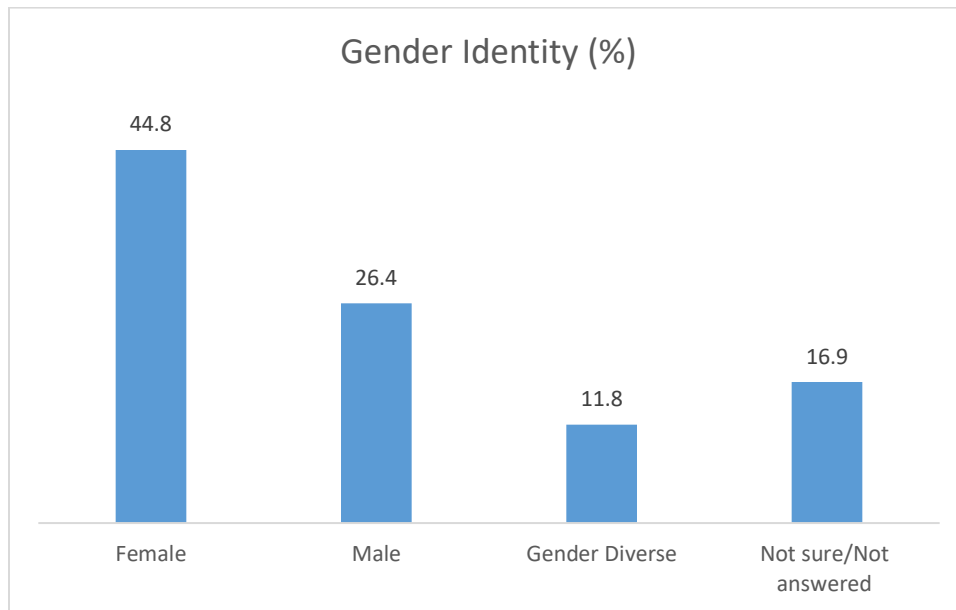
Data collection for the program evaluation at Dan’s Legacy began December 2023 after receiving UBC research ethics approval, and concluded in January 2025. Intake data were collected from the earliest available record in Dan’s Legacy’s database through July 2025, and discharge data collection continued through early January 2025. This provided a six-month window between intake and discharge to evaluate program outcomes for clients with a reasonable timeframe. The data collection process involved two main sources, the prior service tracking and charting software and the new software system established in fall 2023. Prior chart data was extracted from Regpack (the organization’s previous system) and included nearly 700 archived intake records and individual intake documents in PDF and Word formats, which needed to be extracted into excel format for entering in the statistical software. New chart data was extracted from ShareVision (the organization’s current system) and included more comprehensive intake records (approximately 900 records) and around 450 discharge records, all in Excel format. Some data inconsistencies arose due to evolving forms and variations in how the staff collected and recorded information, often influenced by the communication mode used to connect with clients (phone vs. in-person). Consults with outreach workers helped resolve these discrepancies and refine the data collection framework. All collected data underwent cleaning and was transferred to statistical software SPSS 26. We used descriptive statistics, bivariate analysis and paired-sample t-tests to analyse the outcome measures at intake vs discharge, to evaluate Dan’s Legacy program. The section below provides background information of clients at Dan’s Legacy collected from the intake data.

Overall, the total number of clients in intake forms was 927, with a mean age of 20.4 years. The data collected in the intake forms reflects diversity in terms of gender identity, ethnic background, and living conditions, access to food, and self-identified goals for joining the Dan’s Legacy program.

Profile of Dan’s Legacy’s Clients

Gender Identity and Sexual Orientation

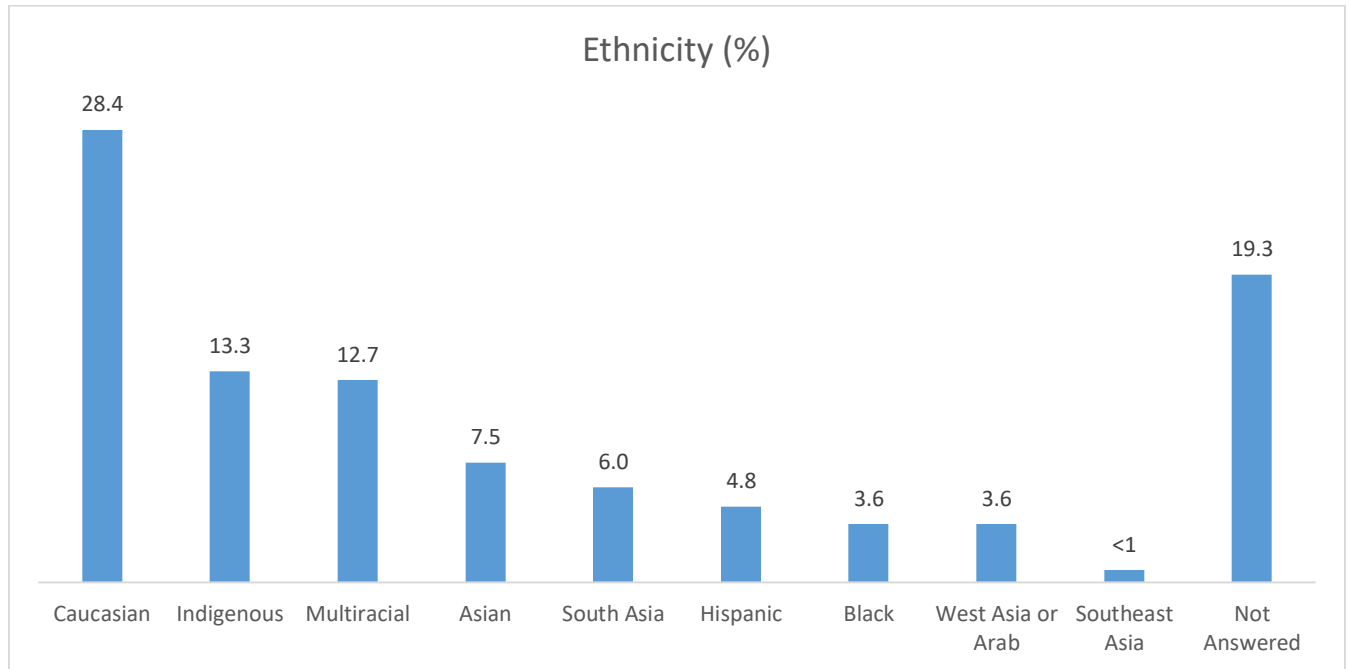
Approximately 45% of the clients identified as female, 26% as male, and 12% as gender-diverse youth, which includes gender fluid, transgender, Two-Spirit, and gender-neutral identities. An additional 17% of clients did not answer to this question or reported they were unsure.



Information about whether individuals identify as LGBTQ2SIA+ was added later to the intake data form. Consequently, out of the 927 intake forms, only around 379 clients could have disclosed their sexual orientation. Of those who disclosed their sexual orientation, about 29% identified as LGBTQ2SIA+, while 1.6% preferred not to say. For approximately 26% of clients, data was not collected.

Ethnicity/Racial Identity

The most common ethnic background that youth identified was Caucasian (28.4%).



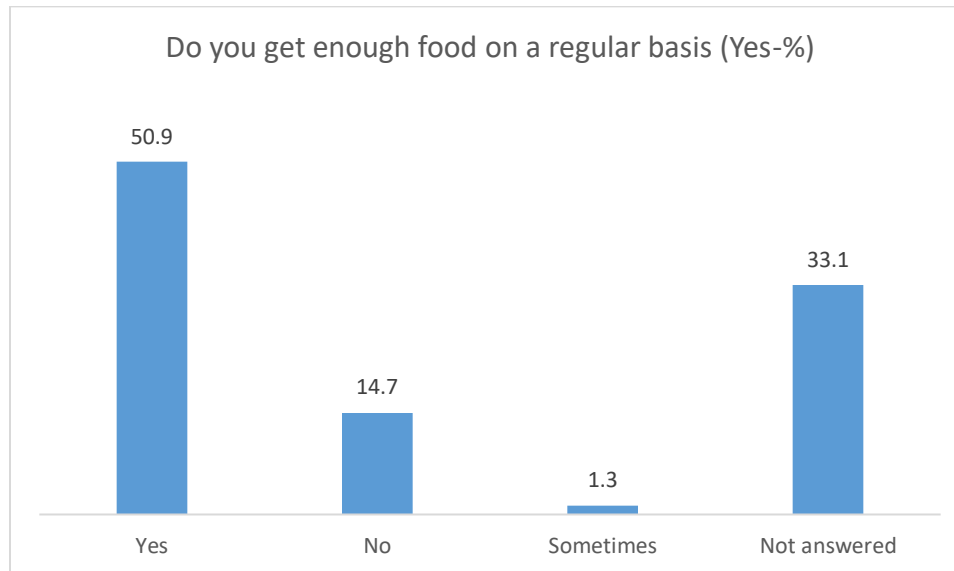
Living Condition/Housing Stability

Youth were asked if they lived with their family; around 4% responded that they lived with their family. They were also asked where they currently resided: 11% reported living alone, 69% indicated living with others, and 21% had missing answers to this question in the intake notes. The intake also collected data on feeling safe or worrying about losing housing.

Living condition (%)	
Are you concerned about losing your housing? -Yes	3.3%
Do you feel safe in your housing? -Yes	49%

Food Security

The clients were asked whether they received enough food regularly, and half of them reported food security.



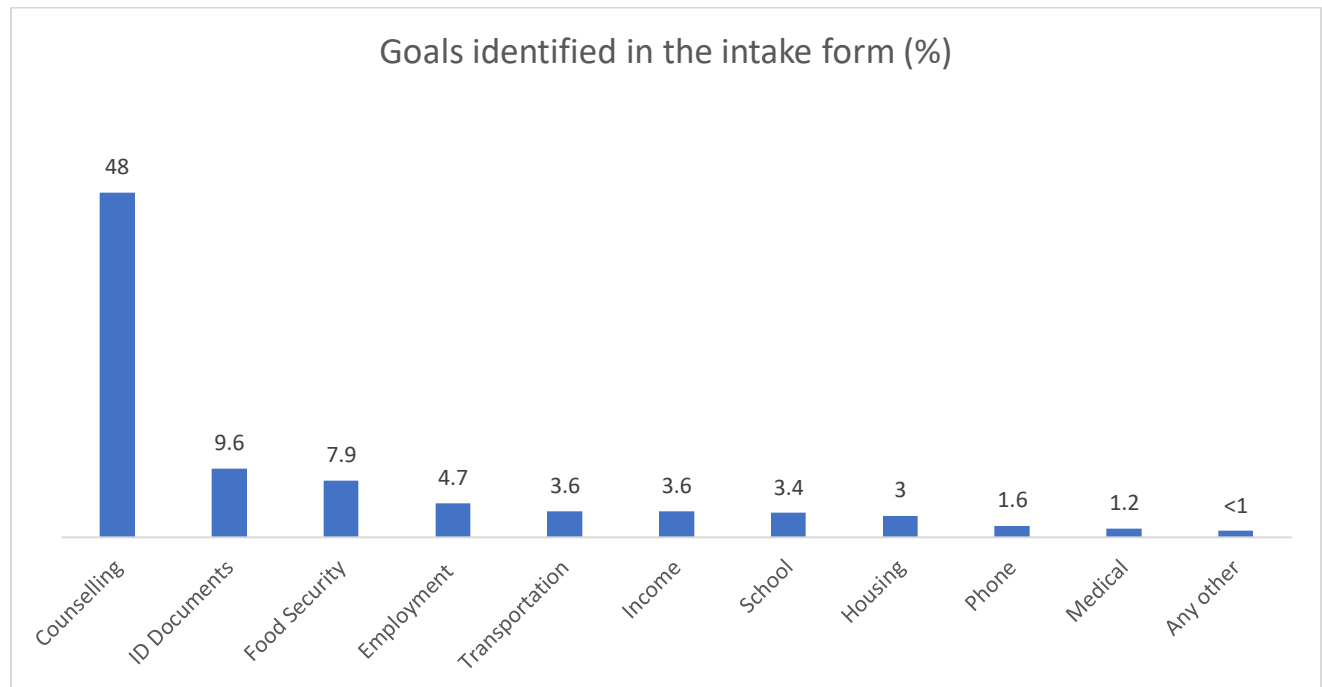
Economic Well-being

Youth were asked about their worries about losing income and their employment status; more than 1 in 4 (27%) reported being employed, and another 1 in 10 (12%) said they were looking for work.

Economic Well-Being (%)	
Worried about losing income? - Yes	2.6%
Employed? - Yes	27.1%
Hoping to return to school? - Yes	20.1%

Goals

A significant aspect of Dan's Legacy's work involves clients identifying their goals, and connecting them to various services that Dan's Legacy offers, which range from housing to food assistance, to help with applications, etc. Below are the goals identified by the clients in the intake form, with the majority indicating counselling as their goal.



Interview Results

The interviews with Dan's Legacy staff and partners identified key strengths, facilitators, and barriers to implementing the program. This helped us understand the program's model. Here are some of the key facilitators and barriers identified by the participants.

Strengths of Dan's Legacy Program

1. Therapeutic model and the 16-session counselling model

A key strength of the program identified by the participants was its well-developed trauma-focused therapeutic model. Unlike other free services that may offer limited group sessions, Dan's Legacy believes that trauma cannot be resolved in a short-term intervention and needs a holistic approach.

"Since I started at Dan's Legacy, the main and the most important thing is the one-on-one therapy. Most organizations only have group therapy, or they have only a few sessions. Our program gives 16 sessions to youth which is wonderful. It's a great way to tackle trauma. Lots of our youth come with different trauma and having only three or four sessions is not going to do anything, it's going to help them to stabilize maybe, self-regulate. But they need to go into the depth of their trauma and how to deal with that, how to cope with that. Provide them with resources and different other experiences." (Idlil, Manager)



Participants also commended Dan's Legacy model of 16 one-on-one therapy sessions:

"We offer 16 sessions which I think is a really great period of time to offer counselling. 'Cause, I think working with this population takes a while. To support folks, to be able to regulate, have some stability." (1dl05, Therapist)

Participants shared the importance of harm prevention which is at the core of the approach at Dan's Legacy:

"Harm prevention is so much more important. Harm reduction is just keeping someone alive in a horrible situation. And that's their choice if they want to stay there. But how many would have followed that path if they had a way out. And what we're trying to do is not be the cure-all. But put, you know, the lifeguard that puts his chair down beside that line of people that are jumping off. And saying, don't jump. I mean, they still might jump. But at least someone's telling them not to jump. So that's kind of Dan's Legacy in a nutshell." (1dl09, Manager)

2. Inclusive and culturally appropriate care

Another strength often highlighted by participants is the program's focus on inclusive and culturally appropriate care. For instance, Dan's Legacy has a gender-diverse and multicultural staff, which recognizes the importance of lived experiences. From a cultural perspective, the program also provides relevant and meaningful programming for youth to engage in.

Participants identified Dan's Legacy program as being culturally appropriate care as they focus on being inclusive for youth from diverse backgrounds, like one participant mentioned:

"The whole program is inclusive and culturally aware. I think it's so important to include everybody, especially those marginalized. Those who feel that they don't belong. It's so important to tell them you do belong. You do have a value. You're important. You're unique and we embrace you." (1dl02, Manager)

They further noted that inclusivity involves having staff and therapists from diverse backgrounds who provide care:

"And actually, we have a couple of our counsellors who are LGBT. So they will be, from my point of view, a very good way to support youth that sometimes need to have a counsellor who can understand them. The other thing is that our whole team is multicultural." (1dl02, Manager)



Therapists at Dan's Legacy believed that with lived experience they bring their experience that helps their clients in an effective and impactful way:

"I'm queer, so that makes a huge difference I find. And I do know that some youth specifically request people with experience with LGBTQ communities and I'll often get referred to those kids. And it makes a huge difference, honestly." (1dl12, Therapist)

"And also having counsellors who also identify as someone in this community really helps to help these youth. 'Cause they feel like, 'oh, someone gets me. I don't have to explain things to help you understand.' I feel like that helps." (1dl08) Therapist

Another therapist described how Dan's Legacy creates positive change by using a trauma-informed, gender-affirming, and culturally responsive approach that supports the whole person while recognizing the unique challenges faced by marginalized groups:

"We create positive change because we offer trauma-informed care, and we work from a gender-affirming model of care. We tailor our approaches to whatever's culturally relevant to the client. In terms of some of the bigger pieces to speak to there, I feel like we work within that framework which I think is really wonderful. Working with the whole person but understanding that there's challenges associated with being a member of a cultural group or, you know, being part of LGBT community. As well as understanding their personal challenges.... We're an ally in that sense and I think that's really wonderful." (1dl05, Therapist)

Additionally, managers described intentional organizational efforts to improve culturally responsive care, including staff training and thoughtful hiring practices to reflect the identities of the youth served. These efforts aim to create safer, more affirming therapeutic environments, particularly for equity-deserving groups such as LGBTQ+ and Indigenous youth:

"From that perspective we, also provide our therapists with some training. And, the diversity within our team really helps us because we have people in our team who identify with a certain target population or another. Which also helps us allocate certain clients to them so they can feel a better fit, feel less threatened, feel that they're accepted and feel that someone who has lived experience can work with them." (1dl04, Manager)

"So both of those groups [Indigenous and LGBTQ+] we've developed individual strategies for and with LGBT kids, especially with the trans kids we see now, we've always had, or tried to have, at least one or two queer therapists." (1dl09, Manager)



One therapist even shared the following experience of how they supported a client by creating an inclusive space:

“One of my clients has recently explored their gender identity and they have shifted from he to she. So today I’m going to actually officially put their pronouns-- and I’ll be sending the email to the social worker after this interview. I think it’s very accepting. And because we also have preferred names and other names... we are always sensitized to use their preferred name. Because sometimes the preferred name has a lot to do with their gender identity.... In that way I think it’s very welcoming.” (1dl07, Therapist)

Facilitators to implementing the Dan’s Legacy program

1. Wraparound care

Participants frequently discussed wraparound care as a key facilitator of the program. Wraparound care enables youth to access a wide range of services through a single program, creating a comprehensive support system. At Dan’s Legacy, youth can access counselling, fitness programs, grocery hampers, job skill-building courses, and assistance with housing, documentation, and educational needs. Participants emphasized that this holistic, integrated approach to youth mental health and well-being is both unique and effective.

“We also have the culinary program at Dan’s Legacy where folks can come and learn how to cook if they want to go into that career. Or even just to build upon that life skill for themselves. I think that’s really wonderful. Outreach and social workers provide that bridge to those resources where there might be a gap. Whether it’s healthcare, dental, mental health, like, us too, they connect a lot of folks to us. So really building that bridge where there’s a gap in supports for a lot of youth.” (1dl05, Therapist)

“We try to do our best for the holistic approach. I think this is what makes Dan’s Legacy stand out. Based on Maslow’s pyramid of needs, without ensuring someone has their basic needs covered, there’s absolutely no way that their mental health can improve. This is what makes, again, Dan’s Legacy stand out is that we have a food hampers program. We make sure that someone is eating. We have outreach workers and social workers, they work on any kind of support that the client needs in terms of housing, shelter, financial support and some aspects through PWD or other services. And then comes the fitness program that works on the client’s physical health which is in direct link with their mental health. And lastly our team of therapists they operate on that.” (1dl04, Manager)



Counselling is a key service at the heart of the wraparound program. One therapist shared the following experience with a client:

“When I first met them [the client], they were living with their parents, and it was not a healthy environment. They were not able to move out because they couldn’t afford anything on their own. They couldn’t have survived. They would have been homeless. And so, Dan’s Legacy did it all. It was working with the social worker to get them on income assistance and then PWD. And then the outreach team supported them until they could find them a safe place to live that fell within those income brackets. And throughout that entire time, probably for a year and a half, the client depended on food from Dan’s Legacy... I couldn’t have done the counselling work I did with them. We couldn’t have achieved the goals that we achieved if they hadn’t been able to get into a safe environment where they had a stable foundation to be working from.” (1d106, Therapist)

2. Flexible and adaptable counselling program

The counseling program, while structured around 16 sessions, provides considerable flexibility and adaptability, which has been identified as a significant advantage by participants. For instance, youth have the option to pause or discontinue their sessions at any point, with the encouragement to return when they feel ready to continue. Furthermore, for those who find the 16-session limit insufficient, there is the possibility to discuss an extension with their therapist. This is regarded as a key facilitator of the program's effectiveness.

“We can be flexible in assessing the clients’ needs. What we’re doing now is maybe eight sessions in, we’re reassessing goals and what they need. And then when it comes to sixteen sessions, we can check in again and ask, “Do you feel like you need more support at this time?” and “What else can we support you with here?” I feel like checking in, assessing people’s goals is a way that we can support ourselves through that. And then also being able to extend sessions has been really helpful.” (1d105, Therapist)

“It’s a unique experience; each individual provides us with a direct kind of complaint or a different kind of need. So, one has to have a very flexible approach to counselling. Having said that, our youth are faced with a lot of traumas and a lot of life stressors. A lot of the work that we do with them is focused on first self-regulation. We try to treat the trauma before we do anything else. And from then on, it’s just about providing flexibility. We have a clinical model that allows us to extend the number of sessions that we are supposed to be providing clients. This is what, again, makes us stand out from other models currently being provided,



which is basically a one-session model or six-session model or twelve-session model.” (1dl04, Manager)

Staff at partner sites highlighted how Dan’s Legacy’s approach to counseling has been particularly effective and accessible for youth who may not have benefited from other services in the past. This reinforces the program’s unique contribution and the important role it plays in increasing access to care:

“Their holistic approach of being-- is very beneficial for a lot of the kids that we work with. Sometimes they’ve worked with a lot of counsellors in their younger years and they’re very particular in their ways. And so they, it’s easier for them to be able to go with Dan’s Legacy and get support.” (1dl16, Partner)

“They’ve [Dan’s Legacy] been able to take individuals on and take them on, like, long term and be able to help them out, you know, with their model of 16 weeks and be able to kind of really get through some issues or some things that maybe they might be working on. But I think they also are really good at, like, if that kid isn’t really ready yet which a lot of times they aren’t. They can try things out. They’re able to kind of end the counselling and then come back like a year later, six months later, whenever-- down the road in the year, to go and try again which is really great. And so just kind of seeing that we see successes 'cause we see kids that are, you know, they’re not ready at that time. And then they decide to get ready. (1dl16, Partner)

3. Staff training and development

One of the key factors contributing to the success of the program is the emphasis placed on staff training and development. Participants notably highlighted this aspect as a critical support for the program's effectiveness. Dan's Legacy actively encourages and provides staff with access to ongoing training resources, with the understanding that continuous skill development is essential. For instance, recognizing the importance of effective therapy, particularly when working with vulnerable youth populations, the organization ensures that its therapists receive EMDR training. Furthermore, management at Dan’s Legacy values staff feedback and incorporates it into efforts to enhance services and programming:

“One of the things we’ve been doing for all the counselling team is providing them with EMDR training at our expense. We’re always looking for ways to provide professional development for our team with always the number one goal being how can we better serve our clients.” (1dl15, Manager)

“Maintaining development of our therapists is something we are doing with every month. Whether it’s through training, meetings, sending them to external training



to receive more trauma-informed training. More recently our therapists are receiving EMDR training, DBT training and we have a new set of therapists who will also be sent the next couple of months to receive more training on that.” (1dl04, Manager)

One therapist even shared the following impact of additional training on their therapy practice:

“Dan’s supported me in getting the training, giving me the time off to do it, paying for the course. And then continuing to pay for further consultation in that area. So , just the gift of being able to provide that kind of therapy that you can have a client say, “I live differently now.” And I can provide that kind of service because of the training that Dan supported me in getting is pretty phenomenal in my mind.” (1dl06, Therapist)”

4. Interagency collaboration

Another key factor frequently highlighted is interagency collaboration. According to staff, Dan's Legacy partners with several organizations across the Lower Mainland, which allows both participating programs to overcome barriers and expand their reach, ultimately serving a greater number of clients.

Staff explained that many youth face barriers like not knowing where to go for help or not being able to afford services. In response, Dan’s Legacy actively reached out to community organizations to create partnerships—now totaling 17—to offer counselling where youth already access support. Recent partnerships, like one in Burnaby, are also helping reduce travel barriers for clients living outside core service areas:

“A huge barrier for people out there in accessing services is knowing where to go and then having the funds to pay for it. So, another mitigation strategy is that we realized as we grew with our counselling team we needed to expand more into the community. We started outreaching ourselves to other organizations saying, you have programs for at-risk youth. We do counselling. Would you like to partner? You can be wraparound support and we can do the counseling. And I think we now have 17 partnerships.” (1dl15, Manager)

“Currently, our therapists are in Vancouver, New West, Surrey. So if we have a client from Coquitlam or Burnaby they will have to commute. And then this will be a long distance for them. But the good thing is just recently we are partnered with Burnaby neighbourhood housing.” (1dl13, Outreach Worker)

Similarly, we interviewed individuals at partner sites, and one individual shared the following about their experience working collaboratively with Dan’s Legacy:



“For about nine years I worked pretty closely with [staff member at Dan’s Legacy] in case management and trying to figure out how best to support people who are having a hard time....If you’re having a hard time you could talk to Dan’s Legacy. You can keep coming to us. We’ll help you with your I.D. and we’ll help you with school and we’ll help you employment training and life skills and all that stuff. So it’s not like we’re handing them off to Dan’s Legacy. We’re just giving them another option, someone else they could talk to about that thing.”
(1dl14, Partner)

Client Services and Outcome Results

As mentioned in the interviews, key strengths of Dan’s Legacy include its 16-session counselling model, inclusivity, client-centered approach, and wraparound care. Below is the evaluation of the counseling program, which assessed these strengths and the facilitators of Dan’s Legacy.

Evaluation of their counselling program using the discharge date of this program: Client-centered approach and inclusive services.

There are two scales that were collected from the clients at assessment and discharge: the severity scale and the functionality scale. The severity scale is reported by clients, while the functionality scale is assessed by clinicians or counselors. Both scales are collected during assessment and discharge, enabling us to perform paired sample t-tests to examine significant changes in outcomes before and after the counseling program. The severity scale ranges from 1 to 10 and combines the Clinical Global Impression of Severity (CGI-S) with the Outcome Rating Scale (ORS). The functionality scale corresponds to the Activities of Daily Living scale, which assesses the client's overall functionality. These two variables—the client-reported severity scale and the clinician-reported functionality scale—provide different perspectives for evaluating the program from both the client and clinician. Using the paired sample t-test, we identified a significant reduction in the severity scale (mean change = 1.46) with a medium effect size. Similarly, the functionality scale showed significant improvement (mean change = 1.17), also with a medium effect size. This leads us to conclude the counseling program has contributed to reducing severity and enhancing overall client function. The tests were also conducted separately for female, male and gender-diverse youth. We saw a strong effect size for non-binary youth, where they started with a higher mean severity scale, reported a larger mean change (2.01) and a 1.38 mean improvement for the functionality scale. These results support one of the key strengths identified by the participants, of being inclusive for youth, including gender-diverse youth.

Severity and Functionality Scales, before and after evaluation (Paired Samples T-test).

Variable	Mean at assessment	Mean at discharge	Effect size Cohen's D*	P value
Whole Sample (n=419)				
Self-reported severity scale	6.2	4.76	0.61	<0.001
Clinician reported functionality scale	5.5	6.70	0.61	<0.001
Females (n=187)				
Self-reported severity scale	6.3	4.78	0.62	<0.001
Clinician reported functionality scale	5.7	6.78	0.60	<0.001
Males (n=97)				
Self-reported severity scale	6.0	4.76	0.66	<0.001
Clinician reported functionality scale	5.3	6.34	0.58	<0.001
Non-Binary (n=65)				
Self-reported severity scale	6.5	4.52	0.94	<0.001
Clinician reported functionality scale	5.4	6.78	0.72	<0.001

*interpretation: 0.00<0.20-negligible effect; 0.20<0.50: small effect;0.50<0.8: medium effect; 0.80 or more: large effect

Several other outcomes are collected at discharge through one-on-one conversations between clients and their therapists, based on their approach of being client-centered and collecting most of the outcome measures through direct conversation between the client and their service provider/therapist. The table below reports the proportion of clients reporting improved outcomes.



Clients reported outcomes collected from the counselling program.

Outcome (collected at discharge)	Yes (%)			
	Whole Sample n=419	Female n=187	Male n=97	Gender-Diverse n=65
Enhanced self-esteem and self-efficacy	20	17.1	13.4	30.8
Increased social support	23.4	25.1	20.6	24.6
Improved coping skills	51.6	51.3	44.3	55.4
Improved relationships	30.8	31.6	25.8	30.8
Reduction in initially reported symptoms	34.1	32.6	33	36.9
Reduction in substance abuse behaviour	9.8	7.5	14.4	13.8
Reduction in interpersonal conflicts	24.8	23.5	18.6	30.8

Evaluating the 16-session model of Dan's Legacy Counselling Program

Dan's Legacy aims to implement a 16-session model for its clients. We examined the discharge data to evaluate the effectiveness of this model in improving reported outcomes. On average, clients completed about 14 sessions. Approximately 56% of clients in the counseling program had fewer than 16 sessions, while 42.5% took 16 or more sessions.

	Fewer than 16 sessions (%)	16 or more sessions (%)
Whole sample (n=419)	57.5	42.5
Female (n=187)	61.3	38.7
Male (n=97)	64.6	35.4
Gender-diverse (n=65)	50	50

Clients who attended 16 or more sessions experienced significantly greater improvements in both severity and functionality scales compared to those with fewer sessions, indicating notably better

outcomes for those youths. However, this finding should be interpreted with some caution; those requiring more than 16 sessions may have started with worse initial scores, so they may have more room to improve compared to clients who completed fewer sessions.

Number of sessions and Severity and Functionality Scales Mean Change.

Variable	Mean change (< 16 sessions)	Mean change (16+ sessions)	P value
Self-reported severity scale	0.7	2.6	<0.001
Clinician reported functionality scale	0.8	1.8	<0.001

We also cross-tabulated the number of sessions and the one-time collected outcomes using Chi-square analysis to determine if significant differences exist in these outcomes for 16 or more sessions. As reported in the table below, clients who took 16 sessions or more reported significantly more improvement for all outcomes, regardless of gender.

Clients reported outcomes and the number of counselling sessions (Overall Sample)

Variable	<16 sessions (n=234)	16+ sessions (n=173)	p-value
Enhanced self-esteem and self-efficacy	9.8%	35.3%	<0.001
Increased social support	10.3%	42.8%	<0.001
Improved coping skills	27.8%	86.1%	<0.001
Self-regulation function or skills	20.1%	82.7%	<0.001
Improved relationships	15%	53.8%	<0.001
Reduction in initially reported symptoms	15.8%	61.3%	<0.001
Reduction in substance abuse behaviour	2.6%	20.2%	<0.001
Reduction in interpersonal conflicts	8.5%	48.6%	<0.001

Clients reported outcomes and the number of counselling sessions (Females)

Variable	<16 sessions (n=111)	16+ sessions (n=70)	p-value
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Enhanced self-esteem and self-efficacy	9%	31.4%	<0.001
Increased social support	11.7%	48.6%	<0.001
Improved coping skills	32.4%	85.7%	<0.001
Self-regulation function or skills	24.3%	87.1%	<0.001
Improved relationships	18.9%	54.3%	<0.001
Reduction in initially reported symptoms	12.6%	67.1%	<0.001
Reduction in substance abuse behaviour	2.7%	15.7%	0.001
Reduction in interpersonal conflicts	8.1%	50%	<0.001

Clients reported outcomes and the number of counselling sessions (Males)

Variable	< 16 sessions (n=62)	16+ sessions (n=34)	p-value
Enhanced self-esteem and self-efficacy	12.9%	14.7%	0.805
Increased social support	11.3%	38.2%	0.002
Improved coping skills	24.2%	82.4%	<0.001
Self-regulation function or skills	16.1%	85.3%	<0.001
Improved relationships	11.3%	52.9%	<0.001
Reduction in initially reported symptoms	21%	55.9%	<0.001
Reduction in substance abuse behaviour	3.2%	35.3%	<0.001
Reduction in interpersonal conflicts	8.1%	38.2%	<0.001

Clients reported outcomes and the number of counselling sessions (Gender-Diverse)

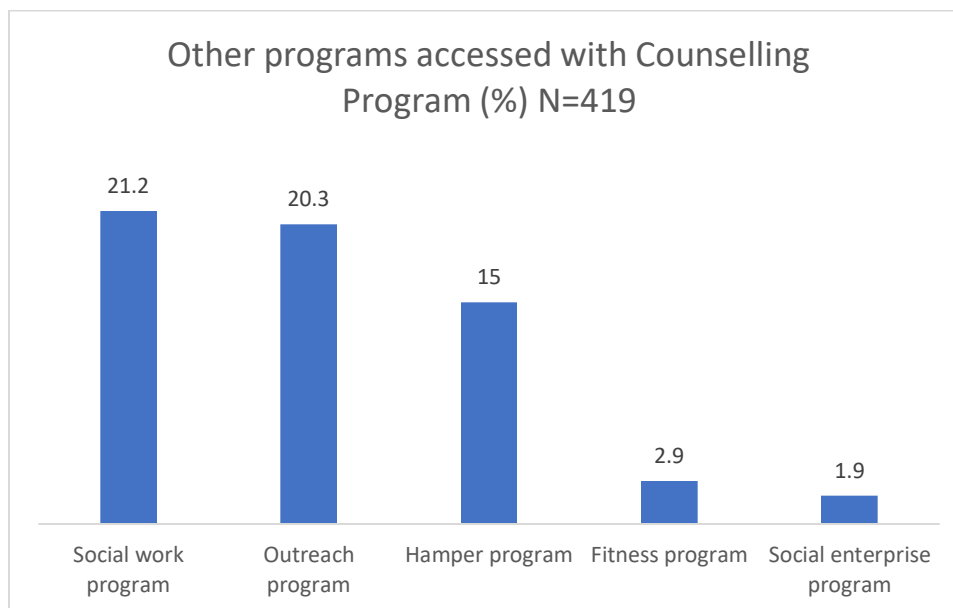
Variable	<16 sessions (n=32)	16+ sessions (n=32)	p-value
Enhanced self-esteem and self-efficacy	9.4%	53.1%	<0.001
Increased social support	3.1%	46.9%	<0.001
Improved coping skills	15.6%	96.9%	<0.001



Self-regulation function or skills	6.3%	81.3%	<0.001
Improved relationships	6.3%	56.3%	<0.001
Reduction in initially reported symptoms	12.5%	62.5%	<0.001
Reduction in substance abuse behaviour	3.1%	25%	0.012
Reduction in interpersonal conflicts	6.3%	56.3%	<0.001

Evaluating the Wrap-around services goal of Dan's Legacy

We were also able to analyze data from clients who enrolled in the counselling program and other programs. Below is the distribution of various programs that clients accessed along with the counselling program. The outreach program and social work program were among the most accessed programs at Dan's Legacy.



We examined the number of programs a client engaged with in conjunction with the counseling program. Consistent patterns emerged across all gender groups, with social work and outreach programs being the most accessed programs. The table below indicates that approximately 37% of clients accessed other programs along with counseling, reinforcing the wrap-around care model that Dan's Legacy aims to establish for their clients.

Number of programs along with counselling program	Whole sample (n=419) %	Female (n=187)	Male (n=97)	Gender- Diverse (n=55)
Only counselling program	63.2	59.4	64.9	41.5
1 additional program	20.8	25.1	16.5	29.2
2 additional programs	9.3	9.6	10.3	16.9
3 additional programs	4.8	4.8	5.2	9.2
4 additional programs	1.9	1.1	3.1	3.1

Interview Results on Implementing Dan's Legacy services

Barriers to implementing Dan's Legacy

1. Limitation of resources

Resource limitations were recognized as a significant barrier, encompassing everything from insufficient office space to high staff turnover. Additionally, there is a desire to expand services to improve the “wraparound” care offered to clients.

One of the resource limitations identified by participants was limited office spaces or not enough offices to do the counselling program, as mentioned by participants below:

“I think spacing is a big issue, having more space for funds and space for, you know, we have a cooking program. We have the food hampers but, everything is tight and limited in space. You’ve seen the office. We are just working within what we have.” (1dl10, Manager)

“Space is an issue that we’re having right now. Although we can accommodate three clients at the same time in our offices in New West, and we have partner sites, we always need more space which can definitely be helpful.” (1dl04, Manager)

To mitigate this barrier, Dan's Legacy partners with organizations. However, this challenge isn't completely overcome, as shared by a staff member below:

“I know some of the challenges we have with the partner sites is we try to, I mean, they provide us with an office so the counsellor can provide a service to the clients. The challenge is, let's say we need more office space. So let's say the



clients-- the partner sites provide us one day a week. And ideally they will need two or three in those areas because we know there's more clients and it's an area where we have more demand, let's say, Vancouver or Surrey." (1dl11, Manager)

Another significant resource constraint highlighted by participants is staff turnover and the challenges associated with hiring qualified staff. Staff turnover is particularly problematic given that Dan's Legacy invests in the ongoing education and development of its employees. Additionally, participants noted that partner organizations also face similar turnover issues, which leads to shared challenges and negatively impacts the program. Regarding hiring, participants expressed concerns about the difficulty in recruiting qualified staff, particularly for specialized roles, which further limits the program's capacity to meet its needs.

"There are definitely resource constraints. One of the main resources that we need is we need to build out our administration team. In particular, and most exceptionally, we need to bring somebody on board who can be in charge of our fundraising. And that position's usually called either a fund development manager or, you know, a fundraiser.... And I find that my time is really split trying to do the best.... If we had someone who was focused entirely on fundraising we could really expand our network of supporters and it would help significantly with risk management." (1dl15, Manager)

"I think it's a barrier for Dan's Legacy but it's also been—we also had a lot of staff turnover. So being able to have our staff, like, we might tell our staff the process at the time for Dan's Legacy. And some of them may, you know, over a month, our staff might move on. Their staff might move on. And then we're kind of at that point again where staff don't really know the process and then what to do. So trying to keep up with their staff, our staff and keep that going. 'Cause I've had tons of staff being, like, what's happening again? I'm, like, okay, hold on or, like, what is there? And so, it's been on both sides, for sure. But it is definitely a barrier for keeping the flow going." (1dl16, Partner)

Some participants who engage with clients on a clinical level, identified a gap in care, particularly around further medical support.

"We've made presentations to Doctors of B.C. There's a lot of interest in this. But with the political landscape right now with, you know, forced incarceration and safe supply where many physicians feel like they're going to go to jail for being drug pushers. All the rest of the people not understanding what this really means, there's a lot of hesitation in this area right now." (1dl15, Manager)



“Yeah, yeah, like a wraparound team. Like, I think that can be helpful, because, you know, it's sometimes our clients can't get family doctors. So like having that sort of wraparound team. Like of primary healthcare, Psychiatry, even crisis counseling. Even though we do counseling. Sometimes we have clients where maybe they can't do the long term therapy, but that does that better option that like, if we can have that as part of that other resource. It'd be nice to have a really strong relationship with that kind of service provider to support the work that we do. And also support the clients in sort of where they're at and what they need. That would be for me something that I think would be incredible.” (1dl05, Therapist)

Finally, participants shared that some of the most helpful programs were ones where youth could connect with staff in relaxed, informal settings—like weekend lunch drop-ins (i.e. Sunday Haven) or small group nights for specific communities (i.e. Queer Drop-In). These programs helped build trust and often encouraged youth to explore other supports, like counseling. What stood out in the interviews was that these kinds of programs worked well because staff across roles collaborated closely, and because they had the resources to do so. However, many of these initiatives were reduced or ended due to lack of manpower and funding:

“So the idea is that you're trying to provide support to kids who aren't getting support. It's roughly equivalent to what their parented peers get. And what that often means for the workers is that you kind of just need to do whatever to support people. For a while doing whatever meant coming in on Sundays and helping [staff at Dan's Legacy] with his Sunday Haven meal program... The real benefit at the time for that was just that when you're doing goal setting and case management in a sort of formal way, they kind of clam up or they're intimidated. But if you're just sitting with someone preparing food, you're just chatting with them, they disclose a lot of things to you. And it creates a really convivial sort of atmosphere and really makes it easy to share and support. Because people are just much more open then. So I really-- I actually-- I miss those times, actually, 'cause I haven't done that for a while.” (1dl14, Partner)

“And we've had-- what's called a queer drop in for-- right up till COVID. It never really started again because we-- those therapists are no longer with us and the new therapists haven't really had time.” (1dl09, Manager)

Staff emphasized that to keep offering these meaningful, low-barrier supports, consistent and adequate funding is essential. Without it, the programs that truly reach marginalized youth in effective ways become difficult to sustain.

2. Client behaviours and engagement



The final, yet significant barrier identified by participants is client behavior. While staff are dedicated to effectively implementing the program, challenges arise when the program is not fully engaged or received by the clients. However, this barrier is somewhat mitigated by the program's flexibility and willingness to adapt to the needs of the youth it serves. Despite this, some accommodations, such as meeting with clients outside of regular office hours, remain difficult to manage.

"But in terms of clients, like, sometimes the client maybe they will not be patient or they will not give you some time. They always will ask for help in the last minute. And sometimes it's difficult to do some action. I would say that's a barrier from the client part." (1dl13, Outreach)

"There's also barriers in terms of sometimes we spend a lot of time chasing people down and that's kind of just part of the gig is making sure they show up. And that doesn't always fit within nine to five. You get things from people at certain hours and you try to-- you're setting the therapeutic boundary but you also want to be aware that people are living really hectic lives and want to catch them at the right moment. So sometimes you're responding to texts or you're making a call at a later time 'cause the person's in the hospital or things like that." (1dl12, Therapist)

Partners also shared their experiences about how Dan's Legacy tries to understand and mitigate this barrier. The organization focusses on care that is client-centered and overall, less intimidating. Dan's Legacy also understands that counselling is a commitment for youth and requires flexibility from both sides:

"They [Dan's Legacy] understand that the harder you are to deal with, the more help you probably need. You probably do need our help. And a lot of other counselling services tend to shy away from the hard cases.... We try to take everybody. And it's challenging, but our organization and Dan's Legacy are sort of aligned that way. If someone needs help you just, try to help them. And I really appreciate that 'cause I know that other counselling services are like well, "It's a 9 to 5 organization and you weren't here on time," and "So, we're going to have to cut this short" and its very admin-y and professional. Which makes sense too. But it's not really of benefit to the youth who aren't particularly punctual. They're not particularly committed. They sleep through things and, you know, they don't make themselves very help-able. But Dan's Legacy tries to help anyways.... You don't want to scare the youth off. You want to let them come in their own time. It's all client centered." (1dl14, Partner)

Positive Impacts of Dan's Legacy Program



When asked about the impact of the program, participants generally provided positive insights, with none identifying any negative effects. Many participants highlighted the positive outcomes, particularly in relation to the vulnerable youth they work with. They shared that their experiences have been valuable both personally and professionally and expressed a sense of fulfillment in being part of the youth's journey. Participants also discussed the long-term impact of their work, emphasizing that the youth they support will ultimately thrive and be in a position to help others in the future. Additionally, working with youth was seen as an effective method of harm prevention, benefiting the youth in meaningful ways.

"But I think that's what's exciting is knowing that I've been able to be part of really changing the direction of a person's life. And the privilege of catching them at such a young age and providing that long-term counselling, yeah, it's quite a miracle. It's a gift, yeah." (1dl06, Therapist)

"So I think the impact is great. Because imagine if we don't support these youth, who are going to be the future of our community, where does the communities going to go? We need the youth. We need them to continue what we have in our communities, right. And you often hear stories of people who, for example, they are survivors of trauma, abuse. But they are right now doing great work to support others." (1dl02, Manager)

Participants emphasized the importance of Dan's Legacy's low-barrier, free-of-cost services, particularly for marginalized youth. They noted that these services have a significant positive impact by ensuring that youth receive the support they need. The range of services offered, from long-term counselling to legal aid, was highlighted as particularly beneficial. The impact of these programs is consistently positive, addressing various needs and helping youth work towards becoming independent.

"I don't think there's any other organization like this. It's such a privilege to work for them because these youth would never be able to afford counselling. And most organizations only provide short term support. And from my experience the clients I have supported all have experienced very significant trauma that needs long-term counselling to make a difference. So it's just such an honour to-- I think of one client that comes to mind immediately that I started with who was not in school. She'd finished high school but she was at such a state of depression that she couldn't work, couldn't go to school, was not functioning well, physically, mentally, emotionally. And today she's living on her own. Second year of university. It's just-- it's so exciting. And that's because she was able to get long-term counselling." (1dl06, Therapist)

The impact of Dan's Legacy is evident even beyond the agency itself. Through partnerships with various organizations, Dan's Legacy provides services across multiple communities, helping to reduce barriers for youth and leaving a positive impact. Partner organizations have noted that



their services either complement or align with those of Dan's Legacy, and together, these efforts have a positive and effective impact on the youth they serve.

"I've started to understand that there's a lot of ways that things can go wrong for people. And because it's kind of an unforgiving environment that we find ourselves in there's no room for error. And so if you've got any little thing going wrong in your life, one little shortcoming, it can be-- it can just mean the end of you. And it's really unfair and it's unfortunate and as long as there's organizations like Dan's Legacy to come and support then maybe people can figure out a way through. And some of them have. They really have." (1dl14, Partner)

"Well, the sheer number of people who require support is astonishing....It's about 400 people that we're supporting this fiscal year and probably 75 to 80 percent of them have mental health challenges that they could use some help with. They don't all request help. That's a lot of people. And the nice thing about Dan's Legacy and the way they intake them is that they're pretty low barrier." (1dl14, Partner)

"I think they're providing a really valuable service and I think in concert, the two organizations together, it's always been really beneficial. There's been times that, you know, I've gone to Surrey Memorial Hospital and we're supporting-- and I met someone from Dan's Legacy. We'd go together supporting a youth who's having a hard time. That's happened a bunch of times. And I feel like the youth appreciate it." (1dl14, Partner)

In the context of the opioid crisis, this participant from a partner site continued on to express how Dan's Legacy has remained a dependable resource, especially for youth in crisis.

"We know there's an opioid crisis, a pandemic. We've lost people. We just lost someone recently who was known to both programs. And it is a-- we don't have numbers. But we do know it's a thing and we've always appreciated that Dan's Legacy was someone we could rely on for people who are having a hard time." (1dl14, Partner)

Additionally, partners continued to emphasize how having Dan's Legacy staff on-site in the community helps build trust with youth over time and encourages them to explore counselling at their own pace. In particular, the flexibility of Dan's Legacy's programming, its low-barrier and free services, and the familiarity of shared spaces were seen as key factors in reaching youth who may otherwise disengage from support. Partners also noted that Dan's Legacy complements their own services, stepping in with alternative options when youth need something different or more tailored to their evolving needs:

"We really hit our mental health with Dan's Legacy. We have a lot of similar programs with wraparound. So, it depends on the individual. A lot of times they will really be seeking-- they might have gone through the systems with us and maybe not been as successful or gotten to a certain point and now they need something different. And Dan's



Legacy's really stepped in to be able to take on those other aspects, like, different training programs or at different times that maybe we're not offering. Which has really helped the individual's kind of get to that next step and being able to kind of keep going in their ever-changing goals in life." (1dl16, Partner)

"It's [Dan's Legacy's program] helped give access to a lot of to our participants. Having them [Dan's Legacy staff] kind of on the ground or in our building brings down those barriers for individuals to get to know that there's counselling around. Being able to access those services. Sometimes it takes youth a while to warm up to the idea of something. So when you have people in the building there's a lot of access." (1dl16, Partner) *"Dan's Legacy has helped marginalized youth in providing a low-barrier option for mental health services. And a free one which is hard to find. And then I think specifically for Dan's Legacy in BYRC it's that participants here don't even have to go anywhere else. It removes a barrier of having to go to another place that maybe they're uncertain about or they've never been to before. I think it's been a very flexible service that's been able to support youth that don't feel comfortable trying new things. Or feel safe in a space or feel safe with certain staff. And then we can actually refer directly and show them a friendly face right at the get-go. I think additionally being able to offer a counselling service within a drop-in centre is really valuable....So it removes all barriers to accessing mental health supports." (1dl17, Partner)*

Conclusion

Our evaluation of Dan's Legacy program through this mixed-methods analysis has provided insights into its effectiveness and areas for improvement. The qualitative data gathered from interviews with program staff and partners highlighted the fundamental strengths of the program, particularly the 16-session counseling model, which is noted for its inclusivity and client-centered approach. These qualitative findings laid the groundwork for our quantitative analyses, further validating the contributions of the Dan's Legacy model in promoting positive client outcomes. The quantitative results documented statistically significant changes, particularly in key outcomes such as the client-rated severity of symptoms, and therapist-assessed functionality, which were critical in measuring client progress over time. The medium-to-strong effect sizes were particularly noteworthy among gender-diverse youth, suggesting the program is addressing the needs of the 2SLGBTQ+ community. This aspect aligns with the program's commitment to inclusivity, as articulated by its staff, who emphasized the importance of creating a welcoming environment for all youth. Our analyses confirms the perception that Dan's Legacy is not only delivering therapeutic support but also serves as a safe space for marginalized populations.

However, despite these promising results, challenges remain that could be addressed to enhance the program's delivery. The identified barriers, including limited office space, staff turnover, and requests for even more comprehensive wraparound care highlight key opportunities for further development. Dan's Legacy program demonstrates a promising model for providing services to vulnerable youth, leading to significant positive change among its clients.

There are also strengths and limitations to be considered in this evaluation. One strength is the new services software, which allowed clients to be more effectively tracked over their time in the program, and easier data extraction to assess services received, goals met, and improvements in symptoms and functional status among clients. At the same time, with the challenges in their lives and potential caution about disclosing issues at intake when they are just beginning to develop trust, some clients are missing key demographic information and follow-up data. This is not unexpected, but missing data does slightly reduce certainty of the findings.

Recommendations

Recommendations from participants

1. *Increase outreach and awareness*

Staff at Dan's Legacy emphasized the importance of expanding outreach and raising awareness to reach a larger number of youth. Many communities, as well as other non-profit organizations, are not fully aware of the program's long-term counselling services, unique wraparound support, and other available resources. Additionally, the program could benefit from utilizing a variety of communication channels to ensure broader access. Increasing outreach and awareness would enable more youth to access these valuable services.

"So those are the expansions that I think-- the other expansion is doing more outreach. We need to let people out there know that Dan's Legacy exists. So if we have, for example, presentations at the public libraries, at the high schools, to know-- or out there in the community, non-profits where they know that Dan's Legacy exists and what we do. So they know where to get some" (1dl02, Manager)

"Well, I mean, it's mostly a question of capacity. It's a question of funding. A lot of times when you make-- when you try to-- so one thing that a lot of organizations do is they have little teams of outreach patrols who go on the SkyTrain and talk to people and stuff. Which is fine. It's good to make those kind of connections outside an organization, outside of place." (1dl14, Partner)

One participant described a previous program run by Dan's Legacy at a partner site (Sunday Haven), which offered youth an opportunity to engage with counseling staff in



an informal, interactive and low-barrier environment. Although there had been discussions about bringing this program back, it has not been reinstated due to funding limitations. Addressing this gap could strengthen outreach efforts, improve awareness of available supports, and enhance connections with youth in the community—particularly through partner sites—while also fostering stronger inter-agency collaboration.

“The idea, two managers ago, was that once Dan’s Legacy got their counsellors hired, we would sit back down at the table and talk about what could we do to kind of bring something. Not necessarily that program [Sunday Haven] back. But something to where Dan’s Legacy can come back in the building.... To have them do something for an hour or two that was engaging for the kids... And we just haven’t gotten there yet because of our staff, their staffing. Our changing funding and stuff like that. Long story short the answer to that question is bringing in some sort of programming from Dan’s Legacy that’s really entry level, that is just there so that they can get to know Dan’s Legacy. It could be an art program or a - sort of a training program or something that the kids could just come in and sit for an hour or two and get to know who Dan’s Legacy is and what they’re all about.” (1dl16, Partner)

2. Staff training and hiring

Staff training and hiring were identified as key areas for improvement. Staff at Dan’s Legacy suggested that further development of training programs could enhance the application of diverse therapeutic methods, better supporting youth with varying needs.

“I would say obviously a staff increase. More people. Because as our therapy team grows we need to grow in parallel from an outreach perspective, on a social work perspective. I would say social work’s even more.” (1dl04, Manager)

“I mean, there is more things to do, for example, I can speak about the counselling team. Right now, we are working into some of the areas that needed to be improved, right. In order for us to continue growing we are actually-- we’re going to hire more counsellors.... The Lower Mainland is growing. More people are coming. Some people are coming from other cultures. They’re coming as refugees. They already experienced trauma in their countries, right, so we really need to support those youth. To say listen, I know coming from another country that perhaps you didn’t even imagine you have to come just because in your country there are problems.” (1dl02, Manager)

3. Need for additional resources, more support and increase in partnerships to serve more youth



As Dan's Legacy continues to grow and evolve, participants noted the need for additional support to adapt to ongoing changes. Partnerships also play a key role in helping the program reach more youth. Participants recommended further development and strengthening of these partnerships. Suggestions included increasing expanding collaborative programming, access to more resources, and establishing new partnerships that offer specialized resources, all of which could enhance the program's impact.

We interviewed partners from various sites, and they shared that bringing their youth to Dan's Legacy for activities or tours, offering extra programs like life skills, or more staff available for informal conversations/consultations at partner sites could help youth feel more connected and supported.

"Just having more counsellors in the building. Having some kind of side programming on, like, some sort of life skills. And then there would be probably some opportunity, some crossover of some kind of like info sessions or, bringing our kids down there [to Dan's Legacy's physical site] to see a tour or something. Some sort of opportunity or one day where they can go down and do something at Dan's Legacy. We've done that a lot with partnerships where we've gone over and used, you know, their gym or something out of their space to be able to have kids go over and cross over." (1dl16, Partner)

And then I think, yeah, just communication of counsellors too maybe. Sometimes if they're-- they have free time, it's nice when they come out and hang out in the space and just chat with people. So as long as, yeah, they can feel comfortable in the spaces they're in too then I think it's beneficial for everyone so-- yeah." (1dl17, Partner)

One partner also mentioned that the partnership approach and Dan's Legacy's program mandate is well developed and could be beneficial for other organizations to follow:

"I think just having clarity of the resources available is always important and availability if there's any problems and understanding on both sides too of program mandates. So I think, like, as long as they keep those values moving forward I think they could be really successful in other partner sites no problem." (1dl17, Partner)

One therapist suggested that having streamlined connections with places that offer access to specialized service providers could make it easier and faster for vulnerable youth to get the basic care they need:



“It would be nice to have a relationship with a service provider that offers psychiatry support. I don't know if that's even possible. But more of a, you know, because we do referrals psychiatry with clients. But to strengthen a relationship with a service provider that the office that would be, I think, would be great. Whether that's even the foundry, because I know the foundry locations across low mainland, and we work in a lot of locations across the lower mainland. But I think that would be helpful. For us and for our clients.” (1dl05, Therapist)

One outreach worker shared that while Dan's Legacy is growing and changing for the better, it still brings a lot of big and small shifts. Giving staff more support to keep up with these changes would help them do their jobs even better, especially when facing challenges.

“I think since we started there was a lot of change happening either in our system or in management. But it was in a good way like to improve our work, I would say. So, you need to adapt and then adapt again and adapt again. But because it was for good, so I was welcome to these changes. So yeah, I would say changes-- we've been through a-- at least two or three big, major changes maybe since I was started with Dan's. We changed the whole system and then a lot of big changes in our management.” (1dl13, Outreach)

Recommendations from SARAVYC

Our mixed methods approach to evaluating Dan's Legacy program suggests several opportunities to enhance future evaluations.

- The methods used by Dan's Legacy to collect client outcome data has the potential for some bias. Specifically, since counselors are responsible for obtaining feedback from their clients, this could lead to overestimated improvement by clients due to their existing rapport—clients may not want to disappoint their therapist. To mitigate this potential issue, we recommend discharge outcome data be collected by someone who is not directly engaged with the client's progress. We also would suggest that evaluation measures and discharge outcomes could include more validated measures that would allow for enhanced tracking and comparability over time.
- The interview data was predominantly derived from internal staff and a small number of partner organizations. Expanding the array of interview participants to include a broader range of external partners could provide even greater understanding of program effectiveness. Engaging these individuals will help with diverse perspectives and enhance



the program's evaluative depth. Interviews with a purposive sample of clients (including some who have completed the services) would also provide important further insights.

- The timing of data collection presented challenges, as Dan's Legacy was transitioning to a new software system along with other internal changes. These hindered our capacity for more in-depth analyses, particularly regarding the integration of new variables, such analyses among 2SLGBTQ+ youth, since that measure was introduced later in the data collection, giving us a limited sample, which does not allow for a robust analysis. Given these changes with their implications for data consistency, we recommend additional evaluation to confirm the stability of these findings, now that the intake and discharge data has fully transitioned in the new system.

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