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TRANSFORMING LIVES: THE UJIMA PROJECT'S IMPACT ON YOUNG PARENTS, CHILDREN, AND COMMUNITIES



Table of Contents

Introduction	5
Project Approach & Methods	7
Project Design & Approach	7
Methods	7
Findings	11
Reaching Parents in Need of Supports	11
Ujima Services Ability to Meet the Needs of Parents	13
Ujima Services Ability to Effectively Support Service Navigation	15
Ujima Services Impact on Positive Parenting Practices	23
Ujima Services System Level Impacts	28
Conclusion	32
Appendix	34
Appendix A: The Ujima Project Logic Model	34
Appendix B: Percentage and Frequency Distribution of Parents' Sociodemographic Background	35
Appendix C: Statistical Significance and Effect Size of Retrospective Pre-Post Survey Items	38
Appendix D: Statistical Significance and Effect Size of Baby Love Survey Items	39

Table of Figures

Figure 1: Sociodemographic profile and primary support needs of Ujima Project participants	12
Figure 2: Parents felt supported and understood by their FN or ELS	13
Figure 3: Referrals were relevant to parents' and children's needs	14
Figure 4: Parents gained confidence in understanding their own and their children's needs	16
Figure 5: Parents gained knowledge of appropriate services and support for themselves and their children	18
Figure 6: Parents' increased connection to support services	19
Figure 7: Parents' became more confident utilizing service providers	21
Figure 8: Parents' strengthened ability to advocate for themselves and their children	22
Figure 9: Baby Love increased parenting knowledge in three areas	24
Figure 10: Parents' learned new knowledge from Baby Love	25
Figure 11: Parents' feel unsure, isolated, and scared about parenting before Ujima	27
Figure 12: Parents' feel confident, happy, and supported in their parenting after Ujima	28
Table 1: Client's age by frequency and percentage	35
Table 2: Client's race/ethnicity by frequency and percentage	35
Table 3: Client's education by frequency and percentage	36
Table 4: Client's primary source of income by frequency and percentage	36
Table 5: Client's primary need of support for themselves	36
Table 6: Client's primary need of support for their child	37
Table 7: Results for the retrospective pre/post test	38
Table 8: Results for the Baby Love pre/post test	39



The Taylor Newberry Consulting head office is located on Between the Lakes (no. 3) Treaty land, the traditional territory of the Mississaugas of the Credit First Nation of the Anishinaabek Peoples. Our organization commits to taking concrete steps in support of truth and reconciliation. Some of the ways we do this is by building genuine partnerships with Indigenous colleagues and communities, practicing ethical and culturally mindful research practices, and by centering the voices of the communities we intend to benefit through participatory action research. We invite you to join us in this ongoing work of learning, unlearning, and acting for justice.

Across many social service and health sectors, our goal is to help organizations and communities generate the information, tools, and resources they need to improve their work and create strategic change.

Introduction

The Ujima Project is an initiative focused on improving the lives of young parents and their children. By combining family navigation, early literacy, and early childhood development, the overarching goal of the project is to improve the physical, emotional, and mental health and well-being of vulnerable and isolated young parents and their children by:

- Improving outcomes for equity-deserving parents (29 years and under) and their children (0-6 years) by supporting their system navigation and early developmental needs.
- Building core competencies across the young parent and infant sector.
- Enhancing sector-wide implementation of evidence-based practices.
- Providing education, training, and support to Ujima staff/young parent and infant sector that facilitates a community of practice, professionalism, leadership and retention for host agencies.

To achieve these goals, the project utilizes evidence-based strategies such as the Baby Love program, Ages and Stages Questionnaires (ASQ), and the expertise of Early Literacy Specialists (ELS) and Family Navigators (FN). These professionals work closely with parents to promote optimal child development and connect families with essential social services. The Ujima Project is also a collaborative effort between the Abiona Centre and the Ontario Association of Young Parent Agencies (OAYPA). It works across the Ontario province with nine Early Childhood Development hubs to carry out these services. These hubs include:

- Fresh Start Support Services
- Abiona Centre (formerly Massey Centre and Humewood House)
- Camino Wellbeing (formerly Monica Place)
- Regina's Place
- Rosalie Hall
- Rose of Sharon
- St. Martin's Manor (dissolved)¹
- Rose of Durham
- St. Mary's Home
- Youville Centre

¹ St. Martin's Manor was originally included at the start of the evaluation but has been dissolved. In the Spring of 2023, Rose of Sharon replaced St. Martin Manor's role in the evaluation.

Taylor Newberry Consulting (TNC) was hired to evaluate the Ujima Project from June 2022 to December 2024. In collaboration with hub leaders, ELSs, FNs, and young parents, TNC developed an evaluation framework and logic model. This framework guided the evaluation of various services and programs standardized across the nine Ujima hubs. The evaluation used multiple tools, including intake data, pre- and post-surveys, Baby Love program surveys, focus groups, and narrative reflections.

The Ujima Project evaluation aimed to assess both the impact on young parents and children, as well as the effectiveness of the program's implementation. TNC has written two final reports, each focusing on one of the aspects of the evaluation. The following report specifically focuses on the outcomes of the Ujima Project services, including the outcomes of the Baby Love program, ELS and FN services, and the organizational/system level impacts of Ujima. This evaluation report aims to explore the following questions:

1. To what extent is the Ujima Project reaching young parents in need of support?
2. To what extent is the Ujima Project addressing the needs of young parents and their children?
3. Are ELS and FN support effectively promoting mother and child outcomes?
4. To what extent do Baby Love groups promote positive outcomes for young parents who participate?
5. What systems change activities are taking place? To what extent did systems change activities lead to increased capacity, collaboration among partners, and awareness of available services?

Following this introduction, this report presents the methodology and approaches for the evaluation. It then shows the findings of several evaluation tools. This report concludes with a summary of the findings as they relate to the evaluation questions.



Project Approach & Methods

Project Design & Approach

Based on several consultations with the Ujima Project team, ELSs and FNS, and young parents, TNC designed the evaluation to follow several design principles that shaped the evaluation methodology and questions. These design principles included:

- **Prioritizing the lived experiences and needs** of young parents and those who worked with them. TNC consulted with Ujima Project hubs and project staff and collected data through various methods, including surveys, focus groups, interviews, and reflections.
- Conducting a **utilization-focused evaluation**. TNC planned and conducted the evaluation to maximize the likelihood that the findings would be accessible and useful to the intended users. The decision-making process was guided by how these users would utilize the evaluation findings.
- Threading an **intersectional, anti-oppressive, and trauma-informed approach** into all aspects of the project processes and outcomes. TNC recognized that young parents may face multiple challenges, such as discrimination, trauma, and poverty, that could impact their ability to participate in the project and the evaluation process. By considering the diverse experiences of participants, the evaluation aimed to create a supportive and inclusive environment that addressed their unique needs.
- Employing **minimally intrusive data collection methods**. The evaluation was designed to offer participants multiple options for sharing their feedback in various formats. TNC utilized a combination of **quantitative and qualitative methods** to ensure diverse perspectives were represented and data was triangulated.

These principles were incorporated into the design of the project's logic model, evaluation tools, data collection procedures, and analysis. These principles were also taken into consideration during the design of the recommendations for this report.

Methods

Following the evaluation design principles, TNC co-developed nine unique evaluation tools to measure both Ujima's implementation and outcomes. The data collection and analysis process for the tools used to report the outcomes of the Ujima Project are detailed in the next several subsections below.

Intake Data

ELs and FNs collect ongoing intake data when parents first arrive at hubs. Intake data captures the sociodemographic profiles of parents and asks for reasons for their visit. Data from the intake form was used in this evaluation to provide a profile of the communities that the Ujima Project serves, and to learn more about what services parents are accessing at the hubs. After cleaning data for blank submissions, TNC received a total of 341 intake data forms across the nine hubs.

Descriptive statistics, such as frequencies and percentages, were used to understand the sociodemographic profile of parents accessing the Ujima Project services, as well as what services they were accessing.

A Retrospective Pre-Post Survey

A retrospective pre-post survey was conducted with young parents who had utilized Ujima Project services provided by ELs and FNs for a minimum of two² months and a maximum of six months. The survey aimed to assess service satisfaction and key outcomes of interest before and after accessing Ujima Project services.

The survey items explored changes in parents' abilities to:

- Identify personal and child(ren)s needs.
- Navigate social services.
- Advocate for self and child.

Most survey items were scored on a 7-point agreement likert scale from 1 (strongly disagree) to 7 (strongly agree). A total of 504 parents had completed the survey, but after cleaning for blank survey submissions and duplicates³ 383 survey responses were included in the analysis.

Median scores were calculated for survey items completed before and after program participation. A Wilcoxon signed-rank test was used to determine if there were significant changes between the pre- and post-program median scores. This test is appropriate for ordinal data, such as responses on a likert scale (e.g., strongly disagree to strongly agree). Two survey questions also asked parents about their satisfaction with the services provided by their EL or FN. These questions were analyzed using frequency and percentage distributions.

2 At the start of the evaluation, parents were asked to participate in the retrospective pre/post after 3 months of services. This was reduced to 2 months due to difficulties with following up with parents.

3 The retrospective pre/post survey was designed to be anonymous. However, to provide participants with a gift card incentive, they were required to complete a separate form. A link was provided to this form after a participant completed the retrospective pre/post survey. Unfortunately, some participants submitted multiple gift card forms, which likely indicated that they also completed the retrospective pre/post survey multiple times. To address this issue, TNC cross-referenced the completion times of both surveys to identify and remove duplicate responses.

The survey also included an open-ended question for parents who indicated their ELSs and FNs were unable to provide a referral that meets their needs. This question gave parents the opportunity to explain why their needs went unmet. The responses to this question were analyzed by identifying and counting the frequency of recurring themes or ideas.

Baby Love Pre and Post Surveys

A pre- and post-program Baby Love survey was administered to young parents during the initial and final sessions of the program. While 93 parents completed the pre-program survey, the post-program survey was only completed by 67 parents. These surveys assessed changes in participants' knowledge of positive parenting practices, satisfaction with the program, and suggestions for improvement. Two survey questions on the post-survey also asked parents to indicate whether they felt they had learned anything new from the program. All survey items were measured on a 5-point likert scale from 1 (strongly disagree) to 5 (strongly agree).

Data analysis involved calculating median scores for pre- and post-program survey items and conducting a Wilcoxon signed-rank test to determine significant changes between parents' knowledge of positive parenting practices between the two time points. Percentages were also calculated for question items that were only asked on the Baby Love post-survey.

Narrative Reflections

A narrative reflection activity invited parents to provide qualitative answers to prompts about how the Ujima Project services impacted their life in any format they wished (i.e., written, images, or audio). Approximately 57 parents who had been accessing Ujima Project services for at least two months completed the activity. All participants but one chose to provide their responses in writing.

A thematic analysis was conducted to analyze parents' responses. A thematic analysis is a qualitative data analysis technique that examines the common patterns that emerged through the data and groups these patterns together to determine their prevalence and relevance to the evaluation questions. In the case of this evaluation, TNC looked for patterns in the ways that the Ujima Project impacted client's parenting styles and gave them access to services and resources.

Focus Groups with Young Parents

In the first year of the evaluation, hub staff conducted their own focus groups with young parents currently receiving services at their hubs. These focus groups explored the process of program delivery and program outcomes. Focus groups were conducted by hub staff because of existing, trusting relationships that may help clients feel more comfortable sharing their experiences. A total of three focus groups were conducted with 2-5 young parents at three of the hubs, totalling approximately nine participants.

Staff either took detailed notes or recorded the focus group session. After the focus group was completed, these notes/recordings were shared with TNC, who conducted a thematic analysis on the notes.

Focus Groups with Family Navigators and Early Literacy Specialists

In year 2 and year 3, two focus groups with ELSs and FNs were conducted by TNC, totaling four focus groups throughout the evaluation. These focus groups explored the successes and challenges of service delivery, barriers facing young parents, community partnerships, and program impact. A total of 4-6 hub staff participated in each focus group.

TNC recorded these focus group conversations and transcribed them. A thematic analysis was then performed to look for similarities and differences in hub staffs' responses, and understand what common patterns emerged through their responses.

Key Informant Interviews with Hub Leadership

In the second year of the evaluation, TNC met with 11 hub leaders (executive directors and managers) to conduct semi-structured interviews. These conversations captured the system-level changes and challenges in delivering the Ujima Project services. The following year, TNC met with hub leaders again to further reflect on the project's impact on the hubs and discuss if any further changes and challenges have arisen over the course of the project. Instead of conducting one-on-one interviews, these conversations took place in a format of two focus groups, with ten participants across the focus groups and one participant meeting one-on-one.

These interviews and focus groups were recorded and transcribed. Findings for both the key informant interviews and focus groups with hub leaders were analyzed by grouping common themes and patterns throughout the data using a thematic analysis technique.

Findings

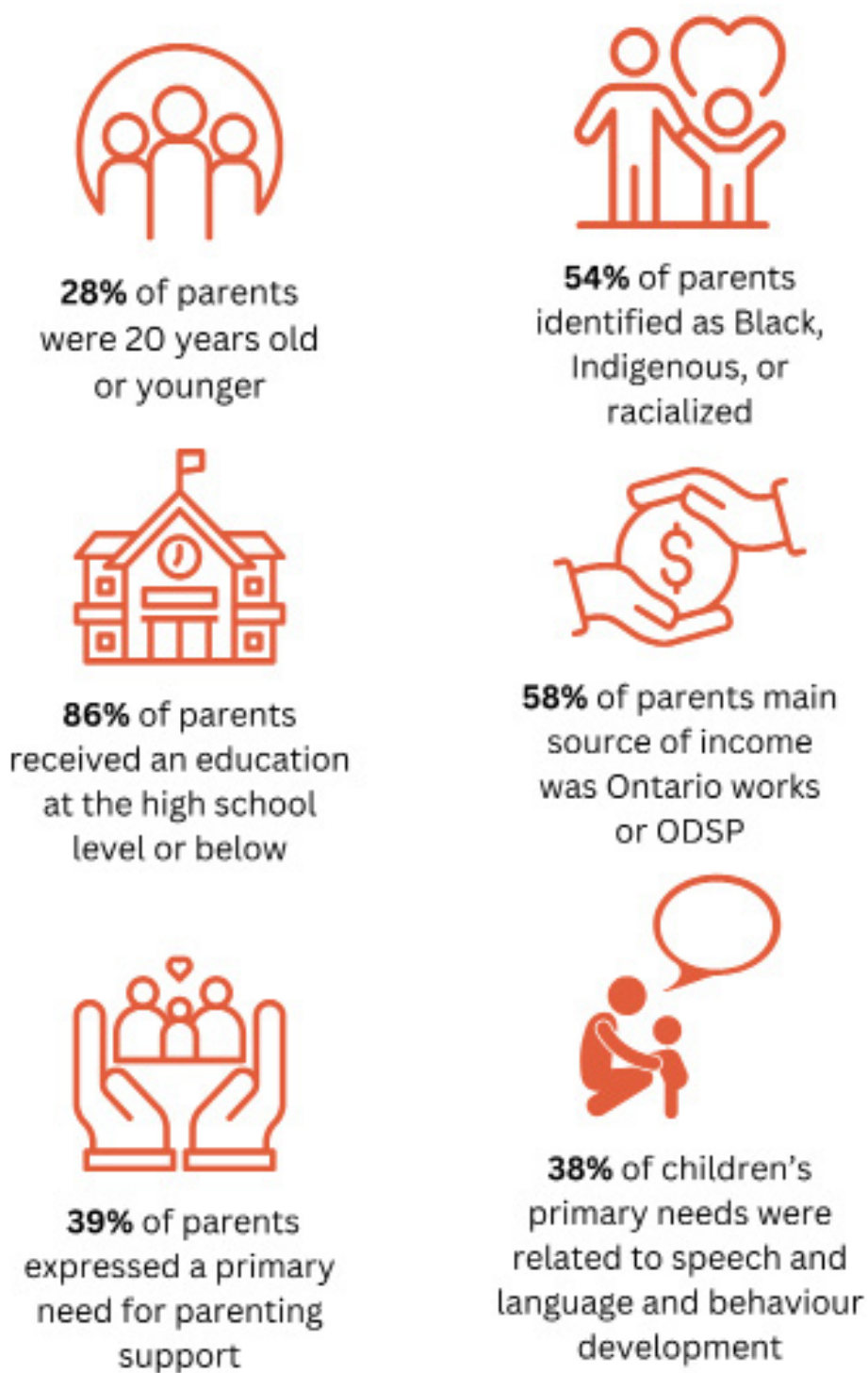
Reaching Parents in Need of Supports

One of the main goals of the evaluation was to learn whether the Ujima Project services were reaching underserved populations - such as young parents living in poverty and parents from racialized communities. As shown in Figure 1, nearly all parents served were under 25 years old, with 28% being adolescents (16-20 years old). About 54% of parents accessing Ujima Project services identified as Indigenous, Black, or racialized, and 58% parents' main source of income is social assistance, like Ontario Works or ODSP. These findings demonstrate that the Ujima Project is effectively reaching its intended population.

Parents' primary reason for accessing Ujima Project services was to receive parenting support (39%). Parents' primary needs for their children were tied between behavioural support (19%) and speech and language (19%), totaling 38% among the two categories. For a full breakdown of the sociodemographic characteristics and needs of parents, see Appendix B of this report.



Figure 1: Sociodemographic profile and primary support needs of Ujima Project participants



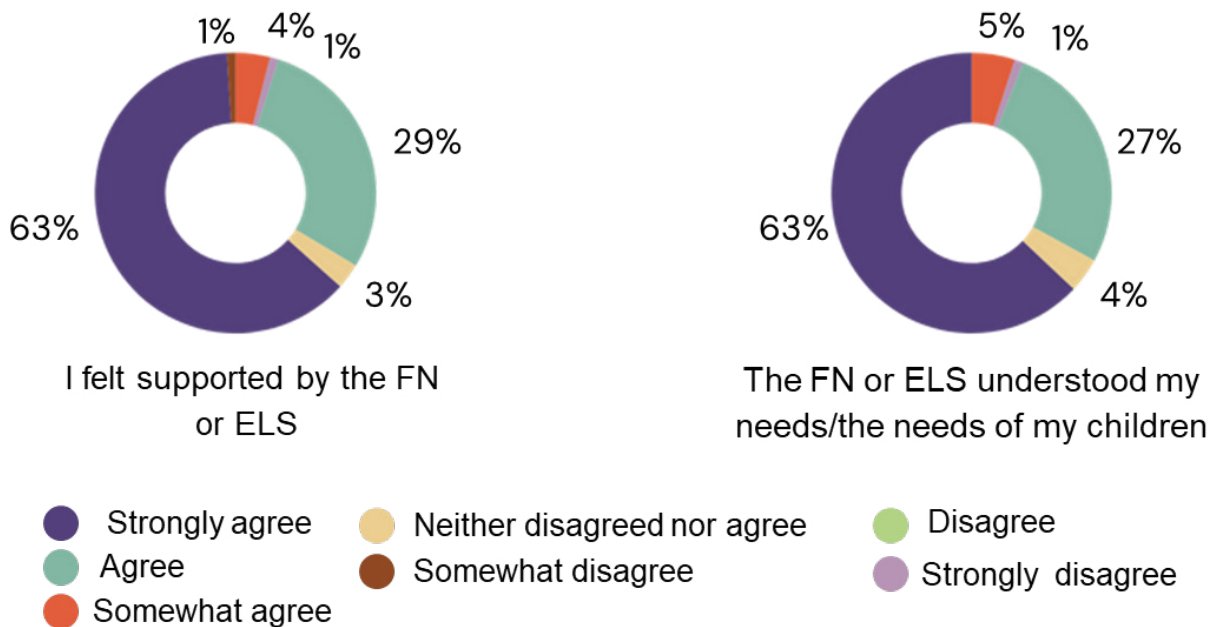
Ujima Services Ability to Meet the Needs of Parents

One of the key goals for this evaluation was to understand to what extent the ELSs or FNs addressed the needs of young parents and their children. The retrospective pre-post survey asked two questions to understand this objective deeper. These questions involved asking parents to rate their agreement (i.e., strongly disagree to strongly agree) with the following statements:

1. I felt supported by the FN/ELS.
2. The FN/ELS understood my needs/the needs of my child(ren).

Nearly all parents who answered these questions agreed to varying extents with the abovementioned statements. About 96% of parents agreed to some extent that they felt supported by their ELS or FN. Around 95% of parents also agreed to some degree that they felt their ELS or FN understood their needs and the needs of their child. For a full breakdown of how parents responded to these questions, see Figure 2 below.

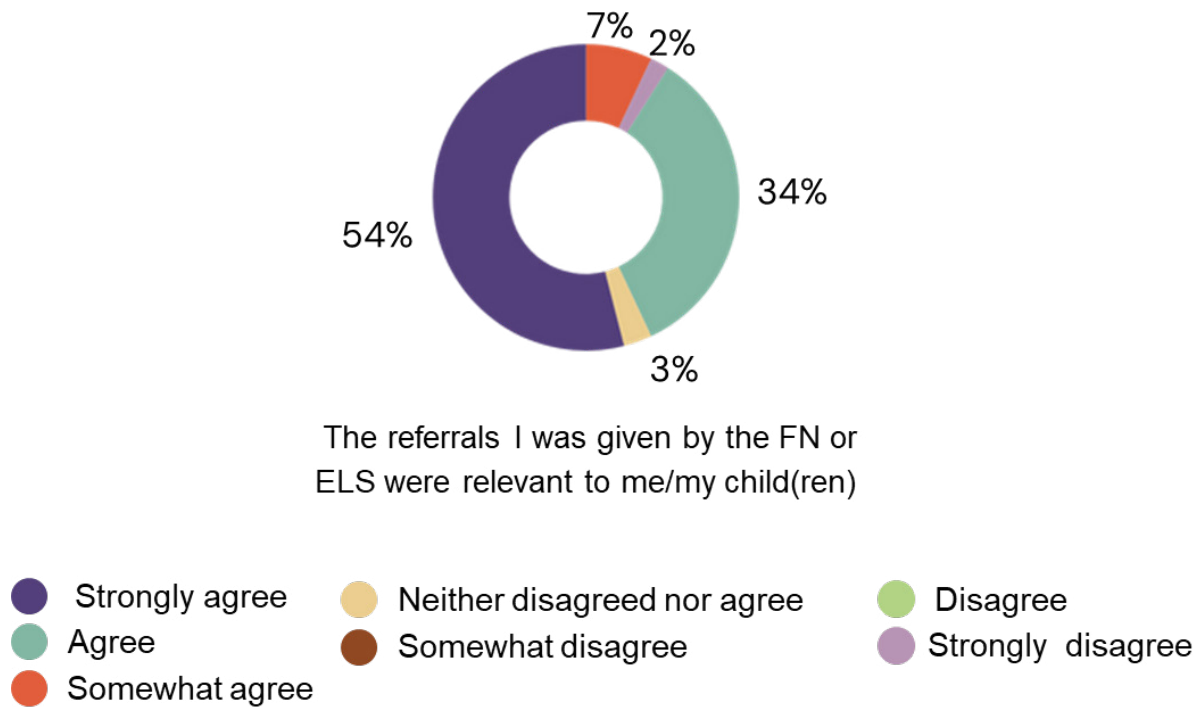
Figure 2: Parents felt supported and understood by their FN or ELS



Note: A total of 383 parents responded to this survey question

A part of the FNs and ELS' role is to provide referrals to other social supports for young parents and their children. For those that received referrals, parents were also asked whether the referrals they received were relevant to their needs or their child's needs. Around 95% of parents agreed to varying degrees that their referral was relevant to their own needs, with over half strongly agreeing (see Figure 3 for a breakdown of parents' responses).

Figure 3: Referrals were relevant to parents' and children's needs



Note: A total of 383 parents responded to this survey question

During the retrospective pre-post survey, parents were offered the opportunity to share why their needs went unmet, if applicable. From those that responded to this question (around ten parents), they frequently discussed having unmet needs regarding housing support, mental health, children's development, daycare services, and family reintegration. However, one participant noted that this is not the failing of the ELS or FN services, but rather a systemic issue caused by daycare shortages and long wait times for services external to the Ujima Project.

"It's not that the Family Navigator didn't address my and my kids' needs. But me and my kids went through domestic violence and right now I'm not working as I can't find a daycare for my 2 and half year old son. So there should be some place for parents to put their kids in daycare when they are going through this kind of condition. If I have to wait for up to 2 years to get the daycare then it'll worsen my condition even from where I'm right now [...]" - Young Parent

Ujima Services Ability to Effectively Support Service Navigation

At the start of the evaluation, TNC worked with Ujima Project leaders, staff, and young parents to develop a logic model. This model helped visualize how the project's services would benefit young parents and children. When drafting the logic model, it was theorized that through FN and ELS services, parents' would improve their confidence and ability to access support services, as well as their skills in identifying their own and their children's needs. For more details on the logic model, please refer to Appendix A. The following sections summarize the extent to which the Ujima Project's ELS and FN services achieved these outcomes.

Ujima's Services strengthened parents knowledge of needs

Two retrospective pre-post survey items explored parents' knowledge of their own and their children's support needs. The survey asked parents to rate their agreement with the following items, with a specific prompt to reflect on how participants felt after accessing Ujima Project services and prior to accessing Ujima Project services:

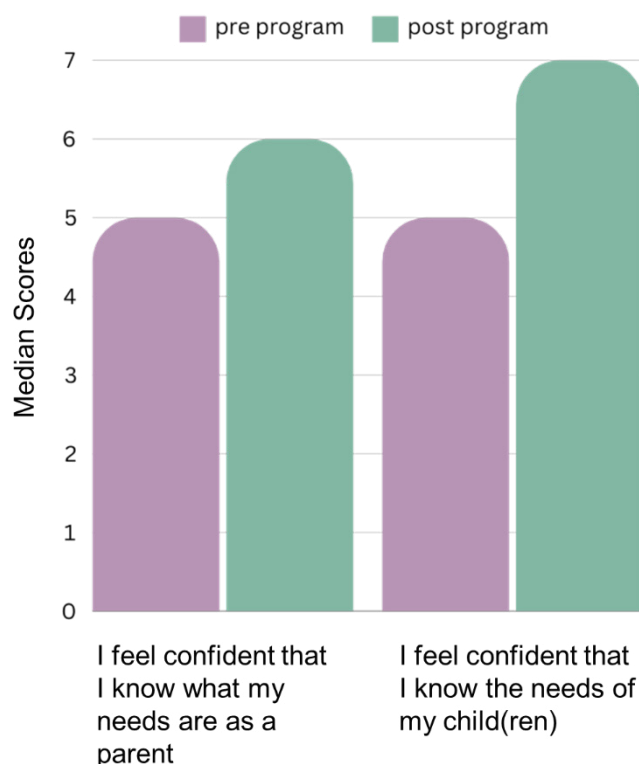
1. I feel confident that I know what my needs are as a parent.
2. I feel confident that I know the needs of my child(ren).

Using a statistical test called the Wilcoxon signed-rank test, the analysis measured the change in medians before and after participants accessed Ujima Project's services. As shown in Figure 4, parents were more likely to agree with the above statements after receiving Ujima Project services (i.e., a median score of 6 and 7). Before receiving services, parents were more likely to indicate that they 'somewhat agree' that they feel confident that they know their own needs and the needs of their children (i.e., a median score of 5). After receiving services, parents were more likely to agree or strongly agree with these statements. This change was statistically significant with a large effect size, meaning that there is a strong difference between responses before and after participating in Ujima (see Appendix C for p-values and effect size).



Photo credit Markus Spiske

Figure 4: Parents gained confidence in understanding their own and their children's needs



Note: Between 381-383 parents responded to each questions

As demonstrated during focus groups with hub staff, ELSs have played a crucial role in supporting parents with identifying their children's developmental needs and connecting them to early childhood services. By conducting one-on-one assessments with parents and children using the ASQ, ELSs have been able to identify potential developmental delays early on. This has allowed for timely referrals to appropriate services, ultimately improving outcomes for young children.

"So we are definitely identifying some children that can get some support in the community earlier than they might have without having our role. And on the other hand, we're also providing that early intervention. And if they're coming out consistently to the programs, I think we're also supporting them in their development. So we may be helping some children to not have to do those services as much later on." - Early Literacy Specialist

While not a common theme throughout the narrative reflections, three parents also shared stories of how the Ujima Project services helped them discover their child's developmental disability and receive access to child developmental services. This is shared by one parent in the passage below:

"I had reached out for help with my oldest son as he and I were really struggling, and I didn't know how to help him. It was within a short time that he seemed to have changed into a different child. We started meeting weekly at [hub name] for one-on-one support meetings and then decided to move forward with ASQ testing. After completing that and scheduling a doctor's appointment to go over the results, we were referred to a child psychiatrist. We just had our appointment this past week and found out that our son is on the spectrum. After so many people telling me that it is typical toddler behavior, it was such a relief finally having someone on my side, trying to help me get to the bottom of things, and advocating for my son with me. Now we can continue to get the right help for me and my child with these answers [...]" - Ujima Parent/Caregiver

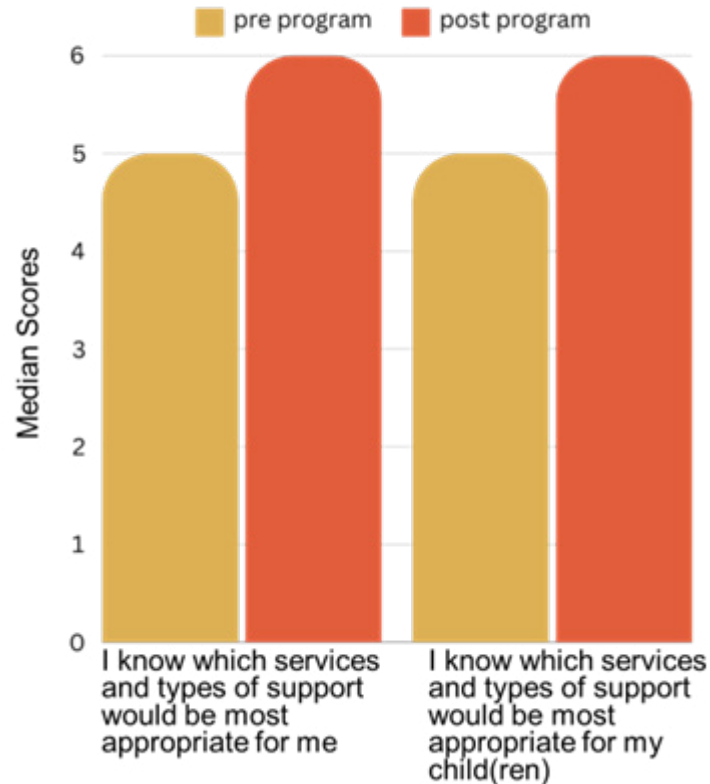
Ujima's Services enhanced parents' knowledge of support services

Two retrospective pre-post survey items explored parents' knowledge of support services they can access to support themselves and their children. These survey items included:

1. I know which services and types of support would be most appropriate for me.
2. I know which services and types of support would be most appropriate for my child(ren).

As shown in Figure 5, parents felt more knowledgeable about available support and services for themselves and their children after participating in the Ujima Project. Before the program, many parents were only somewhat familiar with these resources (i.e., a median score of 5). However, after using the services, more parents reported feeling knowledgeable about the available support (i.e., a median score of 6). For both statements, the change in median scores were significant with a large effect size, meaning that the differences in pre and post scores demonstrated a meaningful change (see Appendix C for details). This significant improvement suggests that the program was effective in helping parents access the information they needed.

Figure 5: Parents gained knowledge of appropriate services and support for themselves and their children



Note: Between 381-383 parents responded to each questions

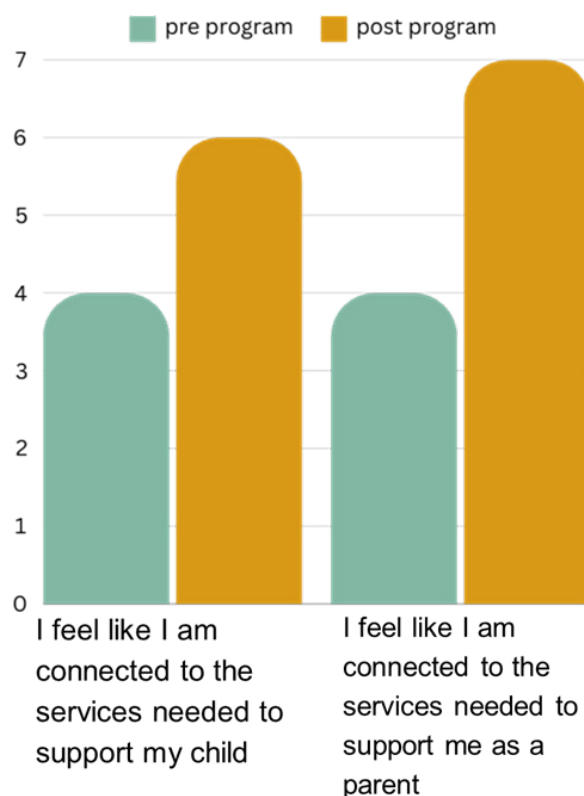
Ujima's services enhanced parents sense of connection to supports

Parents were asked to rate their agreement with several statements about their connection to parenting and social support before and after participating in the Ujima Project. These statements included:

1. I feel like I am connected to the services needed to support my child.
2. I feel like I am connected to the services needed to support me as a parent.

Figure 6, showed a significant and larger improvement in parents' agreement with both statements after receiving services. For both statements, parents were more likely to select that they neither agree nor disagree prior to receiving Ujima Project services (i.e., a median score of 4). After receiving services, parents were more likely to state that they 'agree' that they are connected to services that support their child and more likely to 'strongly agree' that they feel connected to services to support them as parents (i.e., a median score of 6 and 7). The findings suggest that the Ujima Project had a positive impact on parents' sense of connection to support services. For the p-value and effect size of these findings, see Appendix C.

Figure 6: Parents' increased connection to support services



Note: Between 381-383 parents responded to each questions

Complementary to the survey results, narrative reflections completed by parents demonstrate how receiving FN or ELS services helped them access resources they were unaware of or had difficulties accessing in the past. For example, one parent shared that they were near to being unhoused, but that their FN helped them find a housing resource. Another parent also disclosed that the Ujima Project assisted them in fleeing from domestic violence, which in the long-run improved their own and their children's mental well-being.

"I was on the verge of going homeless and was told about a housing resource and got connected with them by [FN's name] and [FN's name] took her time to bring me there and help me." - Ujima Parent

"I was fleeing from an abusive relationship and the resources from the Ujima Project allowed my children and a place to live and helped us secure our new home. It also helped me to maintain my mental health and a free environment for my children. " - Ujima Parent

Echoing these findings, the focus groups with hub staff showed that ELSs and FNs assist parents in accessing resources to help them meet their basic needs. For example, multiple hub staff shared that their agency offers food bank services, along with providing for other needs like clothing and diapers.

We also have on Thursdays a brand-new clothing giveaway. So anyone that's in need of newborn or toddler-age clothing, we also have that [...] It's been pretty successful where we're getting a lot of people coming out to take advantage of the free service. The food one, again, that's a big one. We do our food share program on Thursday nights, and the families—the ones that come to the program—are getting, I think, sometimes between six to eight bags of groceries, which is probably equivalent to the groceries that you or I would be doing maybe on a weekly basis or so.” - Early Literacy Specialist

Together, these findings demonstrate that a prominent impact of the Ujima Project is its ability to find parenting and social support for parents and their children, when needed.

Ujima’s services helped increase parents’ confidence in navigating systems

Three survey items from the retrospective pre/post survey explored changes in parents’ confidence to navigate services before and after receiving Ujima Project services. Parents were asked to rate their agreement with the following survey items:

1. I know about services in the community that I can access to support myself and/or my child(ren), if needed.
2. I feel confident that I could access the services and support for myself (e.g., mental health support, income support, education support), if needed.
3. I feel confident that I can find out about which services may be helpful if I am/my child(ren) is having trouble.

All three items showed a statistically significant improvement and a large effect size (see Figure 7 and Appendix C), suggesting that the Ujima Project helps increase parents’ confidence in navigating systems. Before the program, parents generally expressed some confidence in accessing support for themselves and their children, as well as in learning about available services (i.e., a median score of 5). However, after participating in the program, parents exhibited an increase in confidence (i.e., a median score of 6), meaning that the program increased parents’ ability to navigate these systems.

Figure 7: Parents' became more confident utilizing service providers



Note: Between 381-383 parents responded to each questions

Ujima's services increased advocacy skills among parents

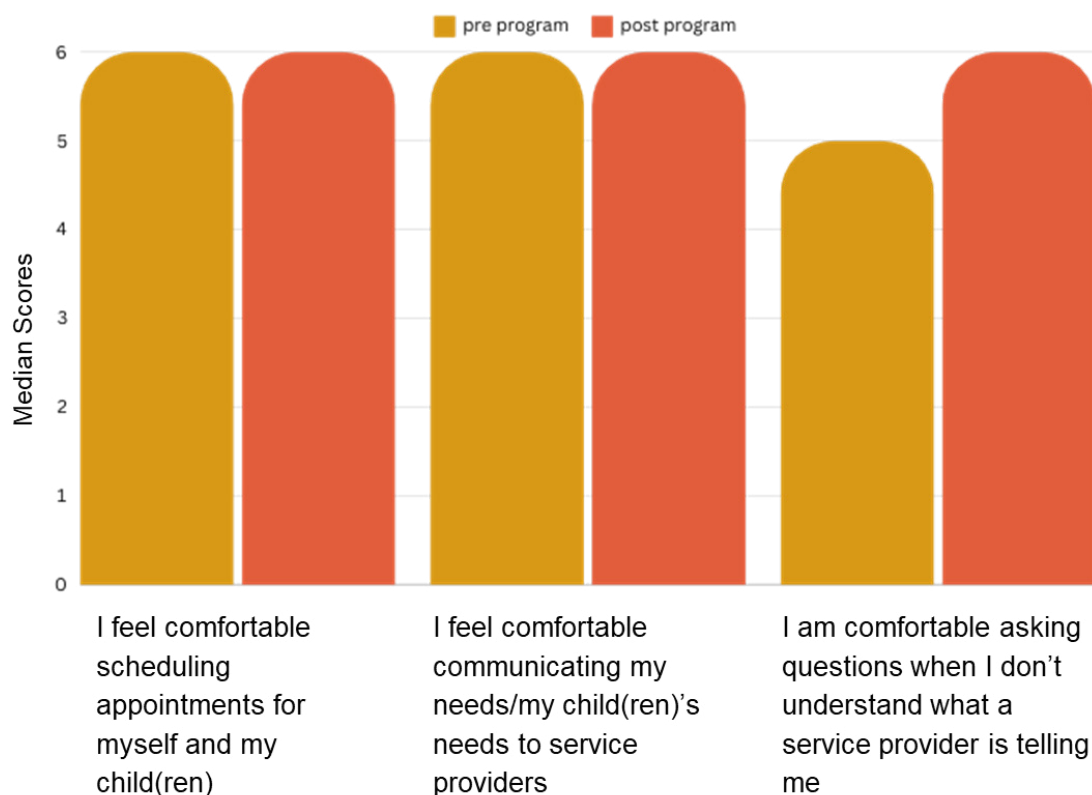
To evaluate changes in parents' confidence in advocating for themselves and their children, they were asked to rate their agreement with three survey items both before and after participating in the Ujima Project:

1. I feel comfortable scheduling appointments for myself and my child(ren).
2. I feel comfortable communicating my needs/my child(ren)'s needs to service providers (e.g., doctors, counsellors, case workers).
3. I am comfortable asking questions when I don't understand what a service provider is telling me.

As shown in Figure 8, parents were most likely to state that they felt somewhat comfortable asking questions to service providers before accessing services. However, after participating in the program, more parents felt comfortable asking questions when they didn't understand something.

While median scores remained the same for how comfortable parents felt scheduling appointments or communicating their needs, further analysis detailed in Appendix C show a meaningful and large improvement in these areas. Together, these findings indicate that parents are more likely to increase their advocacy skills for both themselves and their children as a result of the Ujima Project services.

Figure 8: Parents' strengthened ability to advocate for themselves and their children



Note: Between 381-383 parents responded to each questions

Focus groups with hub staff also revealed that Ujima Project services have empowered parents to advocate for themselves and their children. FNs, in particular, have played a crucial role in building strong relationships with parents, providing guidance, and offering support. By working closely with parents, FNs have helped them develop the confidence and skills to advocate for their children and themselves. This is shared by one FN in the passage below:

"I do think that, as we've mentioned before, having a Family Navigator that they can go to—knowing, 'Okay, I need help with this. I know this person will speak up for me'—has helped them kind of feel more vocal within themselves. They're able to say, 'Okay, I know I can say this. I know that this isn't right; I should be able to get this and this.' So, I think having the role of a Family Navigator helps to give them a little bit more confidence in themselves because they kind of see what they are able to do with the things that they're able to receive." - Family Navigator

Ujima Services Impact on Positive Parenting Practices

The Ujima Project provides several services that help parents improve their parenting skills and form healthy attachment to their children. Firstly, Ujima offers the Baby Love program. This preventive intervention aims to help young parents form secure, healthy attachment relationships with their infants. Baby Love is a core Ujima Project service that was created by Dr. Jean Wittenberg from SickKids. The program was designed to be delivered in a 12-week group-based format⁴, either in-person or virtually, and teaches parents healthy parenting techniques, such as learning healthy responses to their child's cues.

In addition to the Baby Love program, Ujima Project staff also incorporate the Baby Love lessons into their one-on-one sessions with parents. This is to provide these services to parents who may be unable to attend the Baby Love sessions. ELSs and FNs are also trained to provide parenting support and identify children's developmental needs.

The following section summarizes findings from the Baby Love pre and post surveys, narrative reflections, and focus groups with parents and hub staff that speak to the project's ability to foster positive parenting practices.

Baby Love strengthened some positive parenting practices

A Wilcoxon signed-rank test was used to analyze 21 Baby Love survey items, assessing whether the program increased knowledge of positive parenting practices. The analysis compared pre-program and post-program survey responses to see if agreement with these statements changed.

The findings showed no significant change in most cases. Parents generally rated their parenting knowledge quite high before the program, suggesting a "ceiling effect." This means there was not much room for improvement on the post-survey, even if the program was effective. This can happen when survey participants overestimate knowledge before learning something new.

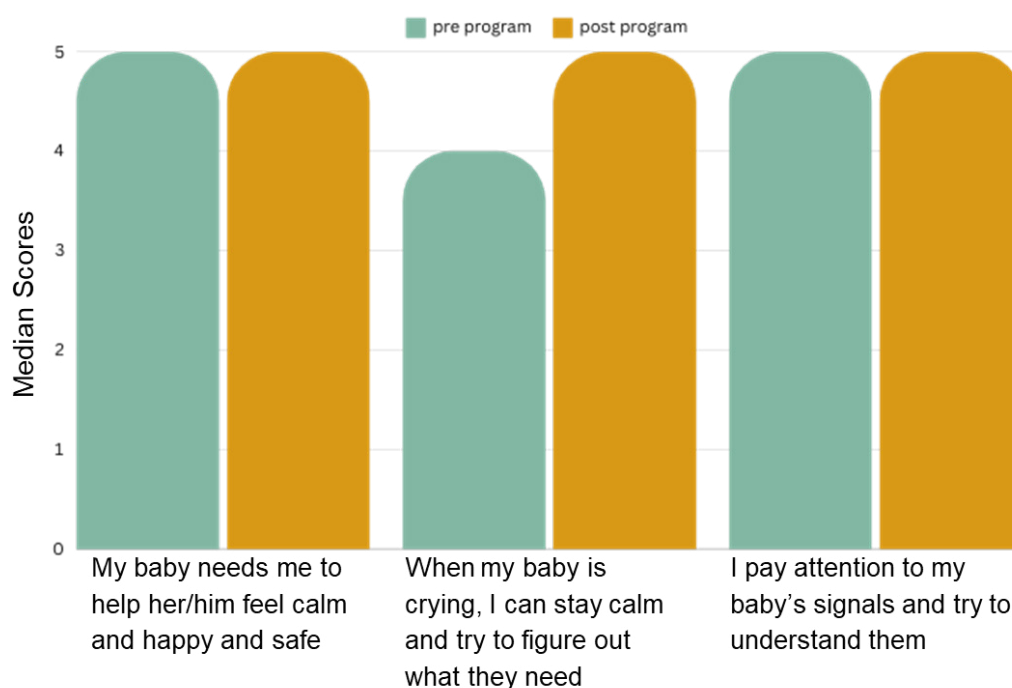
⁴ Based on the feedback that was provided during the last interim report, the program has been adjusted to be shorter in length. Some hubs have adjusted the program to be 7 weeks or 4 weeks in length. Other hubs have chosen to incorporate the Baby Love programming during one-on-one sessions with parents.

Despite many of the findings being insignificant, three survey items showed a significant and positive median change. Parents were more likely to agree with the following statements post-program:

- My baby needs me to help her/him feel calm and happy and safe.
- When my baby is crying, I can stay calm and try to figure out what they need.
- I pay attention to their baby's signals (e.g., crying, sounds, gestures) and try to understand them.

Figure 9 presents the median scores in parents' responses in the pre and post program surveys. For the first and third survey items, the median scores are similar; yet, statistical tests reveal a moderate, but meaningful difference in pre and post survey responses. A detailed overview of these results can be found in Appendix D.

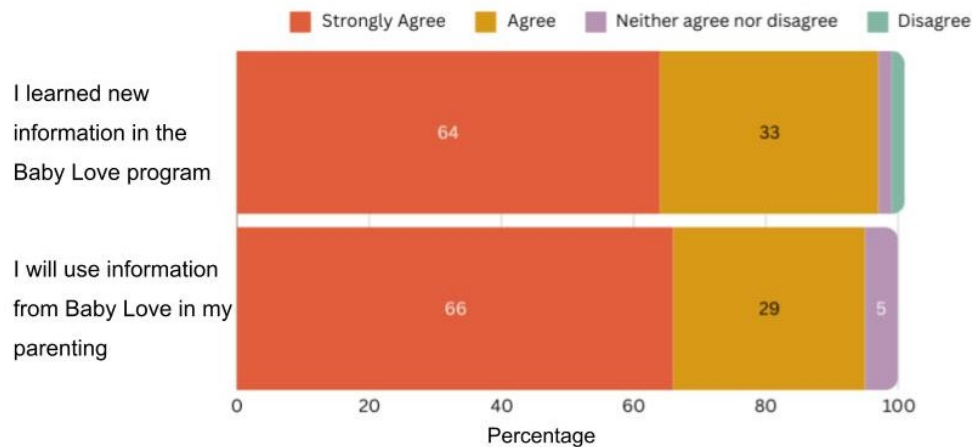
Figure 9: Baby Love increased parenting knowledge in three areas



Note: There are a total of 92 pre-program responses and 67 post-program responses.

While the survey results may not fully reflect the program's impact on parenting knowledge, parents reported learning new information from the Baby Love program. Figure 10 shows that 97% of participants agreed or strongly agreed that they learned new information and 95% intended to apply this knowledge to their parenting practices.

Figure 10: Parents' learned new knowledge from Baby Love



Note: 64 parents responded to the first statement and 65 parents responded to the second statement.

Ujima services inform parents of different parenting styles and techniques

While the Baby Love survey results did not show many significant changes in parenting knowledge, parents who participated in focus groups and narrative reflections reported learning new parenting styles and techniques through the Ujima Project. This newfound knowledge helped them to better understand their own parenting style, adopt more beneficial approaches, and make necessary adjustments to their parenting techniques.

"It changed my view in so many ways by learning different techniques, different ways to communicate with my son, being more patient, having more skills, learning more activities that I can do that benefits him, and the worker that I had was absolutely very sweet and always supportive with me and my son." - Young Parent

"Just, like, learning different things on how to communicate with the babies or how they're feeling. Or different methods, because different methods work for different people". - Young Parent

One of the takeaways from this parenting education is that parents learned how to cope with their own emotions, helping them learn how to respond to their children in a more effective manner during frustrating situations. Parents also remarked on how the Ujima Project services helped them learn how to regulate their child's emotions. As described in the passage below, one way parents learned to do this was by taking stock of their own emotions and finding ways to approach their child in a calm manner.

"When I was running late somewhere and got frustrated it seemed as my daughter got frustrated as well. So I sat down and took a few deep breaths, really focused on being there for my daughter and we both calmed down and felt better afterwards." - Young Parent

Ujima services reduces stress around parenting

Parents remarked on how Ujima Services have led them to feel that parenting their children is less stressful. Their stress is reduced by the ELS' and FNs, as well as the Baby Love program, teaching them parenting techniques that help them parent in a more effective manner and providing them support throughout their parenting journeys. The parenting techniques that parents learned have also improved their ability to identify their child's needs, and respond more intentionally to their children, reducing further strain on the parent-child relationship. This is shared by one parent who completed a narrative reflection:

"Being connected with the Ujima project really helped me look at different ways to manage my son's temper tantrums, which helped me build a secure attachment with him. It also helped me look at his tantrums in a different lens and instead of getting mad finding different techniques to work with him" - Young Parent

Parents also discussed how working with the Ujima Project staff has given them reassurance in their parenting abilities, which has led to increased sense of confidence in their skills, thereby reducing stress and worry.

"Talking to [ELS name] has been very reassuring. She's taken the time to help navigate me to be the best parent I can be and I feel much more confident with my abilities." - Young Parent

The ELSs and FNs also found that by helping parents navigate complex systems and meet their basic needs, they can alleviate significant stress and anxiety. This allows parents to focus more of their time and energy on parenting, leading to improved outcomes for both parents and children. This is illustrated by the passage below:

"I do find when you work with them and reduce some of their stressors and resources out there, that it's really nice to see them concentrate and focus on their parenting finally and make that a priority where if they come into us not housed or going from couch to couch and all the shelters are full and you have to call every day and it takes if you can even get in. So it is nice that when you can reduce their stress, they start to engage more in the parenting piece." - Family Navigator

As part of the narrative reflection activity, TNC asked parents to provide three words describing how parenting felt before and after receiving Ujima Project Services. The following word clouds illustrate the most common responses, with Figure 11 representing feelings before services and Figure 12 representing feelings after services. In each word cloud, the darker and larger the font, the more common the word. For Figure 11, the words 'unsure,' 'isolated/lonely,' and 'scared' were the most common words parents would use to describe parenting prior to Ujima Project services. In Figure 12, the words 'confident,' 'happy,' and 'supported' were among the top three most common words parents used to describe parenting after receiving Ujima Project services.

Figure 12: Parents' feel confident, happy, and supported in their parenting after Ujima



Note: A total of 83 unique words were generated across 52 parent responses.

Ujima Services System Level Impacts

Being Part of the Ujima Project Built the Capacity of Hubs

A prominent theme throughout the entire three-year evaluation was that the Ujima Project helped build the organizational capacity of the hubs. Ujima has significantly increased the capacity of hubs to serve young parents, allowing for more dedicated one-on-one time with each family. The in-house ELS and FN provide immediate support to parents upon their arrival, and are also able to conduct outreach in their local communities to find clients that might need their support. Additionally, the presence of these extra staff members frees up time for other hub staff, enabling them to allocate more resources and attention to each parent.

“Our ELS is definitely involved in all areas of the agency and the community, supporting community clients and clients of the agency in terms of our early learning and child care center and our live-in treatment program. [...] For family navigation, we kind of tied it closely to intake. So, really thinking about when we’re meeting clients for the first time that have reached out, how do we support them and follow them right in that Family Navigator kind of role as they connect with services whether it’s in [hub’s name] or outside of [hub’s name].” - Hub Leader

Hub leaders also highlighted how the training provided from SickKids for both FNs and ELS has strengthened team relations and standardized practices, which happened in several ways. First, training impacted team dynamics by providing staff with a space to discuss specific client issues, and brainstorm ideas with others across the sector. As a result, FNs and ELSs can share knowledge and bring new ideas to their practices. Second, SickKids training helped standardize the practices and ensure that everyone across the Ujima Project has similar knowledge and skills. Lastly, the training provides a sense of community among the FNs and ELSs.

“I think definitely through all these training that we’ve been having, it’s building capacity. It’s building knowledge for our team. We sit on a lot of different coalitions and whatnot here. So anytime we learn of a new practice or enhance a new practice or are reminded of some practices, like sometimes you’re like, oh yeah, of course. Yeah, we should be, you know, let’s think about that. Let’s bring that back.” - Hub Leader

For some hubs, they also had the ability to expand this training to the rest of their staffing team, which has strengthened their services overall. This is explained by one hub leader in the passage below.

“For us, it was just approach. It was how to encourage people to reach out and come to us and receive our services. And it was also fantastic that we could train all of our staff within the organization, not just staff specific to the Ujima project. Because that increases the outreach opportunities as well, and staff can also assist in starting cases and referring, which has been a real value. It’s a project that is near and dear to our heart.” - Hub Leader

Ujima Project Services Increased Collaboration and Community Partnerships

The Ujima Project helped hub leaders expand their network of social service partners. FNs, a key part of the project, were instrumental in building new connections and attracting more parents to the hubs by developing referral pathways. As one hub leader explained:

"We are partnering with many community partners and have attended many community tables. I feel those really help us to bring the word as well as make valuable connections, where we can, in turn, refer our clients if need be, especially our Family Navigators, who are actually really good at these things." - Hub Leader

Hub leaders also remarked on how the additional funding from Ujima has allowed them to spend more time and resources into conducting community outreach. This was described by one hub leader who explained that additional Ujima funding was used to develop a brochure for hospital staff to provide for young mothers.

With the Ujima money we could produce this little brochure or flyer that is now going totes to all the moms who have their birth at the local hospital. And it's also in the local pediatrician's offices and family doctor's offices and the public health office and the [redacted] public library office - Hub Leader

Over the three-year project, hub leaders formed new partnerships with local organizations like SmartStart Hubs, EarlyON Centres, libraries, community centers, and Child Development Centres across Ontario. Some hubs even reached out to local hospitals, healthcare centers, mental health programs, and legal clinics to connect with parents in need.

Hub leaders identified several benefits to their organization through increasing their collaboration with community partners. These benefits include:

- Enhanced visibility and community presence for their agency in their local communities.
- Deeper understanding of the needs of young parents and their children.
- Expanded referral pathways, leading to improved access to services and reduced wait times for their clients.
- Enhanced outreach to new clients in need of the agency's services.
- Collaborative problem-solving for complex client needs.

While most hub leaders reported that collaboration and partnerships with community-based organizations were strengthening throughout the project, a couple noted a plateau in this momentum throughout the three-year long period. Part of the reason for this decline was that these hubs were located in smaller communities where there are not many organizations to connect and collaborate with. This point was raised by one hub leader, who pointed out that their community's population is quite small in comparison to other hubs involved in the project (see the passage below for details).

"I think the second half of 2021 as well as 2022, we were really really busy and focused on building partnerships. I feel we're almost at a plateau now. I mean, we're not in a multi-million city, right? We're in [name of the city where the hub is located] with maybe a population of 60,000 while the county has probably 90,000." - Hub Leader

The Ujima Project advances evidence-based practices

Participating in the Ujima Project has also enhanced sharing evidence-based practices across the early childhood and youth sector. Hub leaders mentioned that since joining Ujima, they have had more opportunities to attend or present at other community organizations and conferences about the experiences of young parents. A handful of hub leaders also mentioned that they were invited to provide presentations on the needs of young parents and on early childhood development and mental health at other organizations. This is discussed by one hub leader during the KILs who remarked on how her agency continuously gets asked to teach other organizations staff.

"Like there were a lot of people asking can we have a presentation? Can you present it to our staff? So there was a lot of, um, knowledge building here in [city where hub is located within]." - Hub Leader

As a result of sharing knowledge, hub leaders and staff have contributed to building awareness around the experiences of young parents, reducing stigma, and sharing best practices with other service providers.

"I would say it's strengthened. It continues to grow and I think that's what I heard from everybody right there is that there's more awareness. I'm not hearing about the challenges yet, and maybe that's not your question, but I think for the most part it has had a positive impact on our ability to create more partners and to get more support for the clients in the hub and also for other parts of the organization." - Hub Leader

Conclusion



At the outset of this project, TNC and the Ujima Project Team co-designed several evaluation questions to gain a deeper understanding of the outcomes of the project:

1. To what extent is the Ujima Project reaching young parents in need of support?
2. To what extent is the Ujima Project addressing the needs of young parents and their children?
3. Are ELS and FN support effectively promoting mother and child outcomes?
4. To what extent do Baby Love groups promote positive outcomes for young parents who participate?
5. What systems change activities are taking place? To what extent did systems change activities lead to increased capacity, collaboration among partners, and awareness of available services?

The following paragraphs below answer these evaluation questions in detail, helping to summarize the findings.

To what extent is the Ujima Project reaching young parents in need of support?

The findings of this evaluation demonstrate that Ujima is supporting parents that belong to several equity-deserving communities. Findings from the intake data show that Ujima typically serves racialized young parents with high school education or below and who rely on social assistance. This finding suggests that the Ujima Project is reaching parents who fit their target demographic.

To what extent is the Ujima Project addressing the needs of young parents and their children?

Data from the retrospective pre-post survey reveal that the majority of the parents receiving Ujima Project services felt supported and understood by the FN or ELS. The majority of parents also reported that referrals made by the FN or ELS had met their needs. In situations where parents did not have their needs met, systemic factors, such as long wait times and shortages of services, tended to be the main factor.

Are ELS and FN support effectively promoting mother and child outcomes?

Both the retrospective pre-post survey, narrative reflections with parents, and focus groups with parents and staff demonstrate the impact of Ujima on parents' ability to find support, navigate social services, and advocate for themselves and their children. FNs and ELSs have been key in helping parents develop important skills. These skills include understanding their own and their children's needs, and learning about available resources and how to access them. To this end, the Ujima Project is accomplishing several of its objectives laid out in the logic model.

To what extent do Baby Love groups promote positive outcomes for young parents who participate? Overall findings speak to Baby Love's ability to teach some positive parenting techniques to young parents. Specifically, results from the Baby Love pre and post surveys show the program's ability to teach parents emotional regulation skills and to pay attention to their baby's signals (e.g., crying, sounds, gestures). Parents also reported that they learned new parenting skills that they plan on implementing.

What systems change activities are taking place? To what extent did systems change activities lead to increased capacity, collaboration among partners, and awareness of available services? The Ujima Project has helped connect nine different hubs with many other organizations in their communities. These organizations include SmartStart Hubs, EarlyON Centres, libraries, community centers, healthcare centers, mental health programs, legal clinics, and Child Development Centres across Ontario.

These connections have many benefits. For example, they've made it easier for parents to get referred to the right services. They've also helped raise awareness about the needs of young parents and children's mental health. In addition to these connections, the hubs have also improved their skills through training and by having an ELS and FN on their teams.

Overall, the findings highlight several benefits of the Ujima Project services for parents, including increased access and confidence in navigating systems, increased awareness and advocacy of needs, and some improvements in positive parenting techniques. The evaluation also points to the Ujima Project being able to serve vulnerable communities and make valuable system level changes across the early childhood and mental health sector.

Appendix

Appendix A: The Ujima Project Logic Model

Ujima Project Logic Model

Hub & other OAYPA Site Activities & Outcomes

Build community of practice around Baby Love workshops

Provide training on ASQ and Baby Love to hub staff

Participate in sector-wide evaluation work

For OAYPA Sites

Increased use of standardized screening tools
Better articulation of family outcomes
Improved assessment of client and family needs
Increased tracking of client & family outcomes

Existing OAYPA services are enhanced

Client-Facing Activities & Outcomes

OAYPA Sites Deliver Baby Love Groups and individual sessions

Early Literacy Specialist

Intake meeting & follow up
Conduct ASQ-2/3 screening & create developmental support plan
Facilitate early literacy groups
Referrals for speech and language services

Family Navigator Case Management

Intake meeting & follow up
Develop service plan based on social determinants of health
Provide one-on-one support
Provide referrals
Advocating for families and teaching self-advocacy skill to families

For Young Parents

Increased knowledge of positive parenting skills
Increased emotional regulation skills
Increased parental sensitivity to child needs

Increased safe engagement with adults for children
Increased confidence in parenting ability for parents

Increased secure attachment between parent-child

Increased identification of developmental delays in children
Increased access to child dev. services for parents

Optimized child developmental trajectories
Increased social-emotional skills
Increased speech & communication skills
Increased cognitive function
Increased motor skills

Increased literacy and school readiness among children

For Young Parents

Increased access to parenting & social support (e.g., housing, education, income)
Increased self-/child-advocacy skills
Increased knowledge of support needs within SDH framework
Increased confidence in systems navigation

For Young Parents

Increased self-esteem
Increased social connection
Improved social determinants of health

Improved health and well-being of vulnerable and isolated young parents and their children

Systems Change Activities & Outcomes

Early Literacy Specialist

Create awareness and referral pathways among SLPs
Partner with libraries, museums, young parenting programs, Health Babies Healthy Children, Family Nurse Partnerships
Initiate community forums of early literacy practitioners

Family Navigator

Create awareness and sharing information with community partners
Provide agency tours
Partner with community tables
Create family education/resource centre

For Early Childhood Development Specialist Partners

Increased collaboration among ECD workforce
Increased awareness of available ECD programming
Increased awareness of the needs of adolescent-led families
Increased capacity to deliver evidence-based interventions

Decreased barriers for adolescent-led families to access ECD programs
Improved system capacity of early childhood development services

Improved health and well-being of vulnerable and isolated young parents and their children

Appendix B: Percentage and Frequency Distribution of Parents' Sociodemographic Background

Table 1: Client's age by frequency and percentage

Client's Age	Total	Percentage
16-20 years of age	105	28%
21-25 years of age	171	46%
26-30 years of age	86	23%
31-35 years of age	5	1%
36-40 years of age	5	1%
	N = 372	n/a

Table 2: Client's race/ethnicity by frequency and percentage

Client's Race/Ethnicity	Total	Percentage
Black (African, African Canadian, Black Canadian, Afro Caribbean)	95	26%
East/South Asian (East Indian, Pakistani, Bangladeshi, Sri Lanka)	30	8%
Indigenous/First Nations/Metis/Inuit	26	7%
Latin American (Costa Rican, Brazilian, Columbian, etc.)	28	8%
Middle Eastern (Saudi Arabian, Iranian, Egyptian, etc.)	7	2%
Mixed Race/Ethnicity (See examples below table)	4	1%
White/European	168	46%
Other/Prefer not to say/Unsure	10	3%
	N = 368	n/a

Table 3: Client's education by frequency and percentage

Client's Education (Highest Level Completed)	Total	Percentage
Grade 8	8	2%
Grade 9	10	3%
Grade 10	31	9%
Grade 11	72	22%
Grade 12	160	49%
College/University	46	14%
	N = 327	n/a

Table 4: Client's primary source of income by frequency and percentage

Income Source(s)	Total	Percentage
Ontario Works	154	44%
ODSP	50	14%
Part-time employment (under 30 hours per week)	54	15%
Full-time employment (more than 30 hours per week)	33	9%
Financial support provided by a partner or family member	63	18%
	N = 354	n/a

Table 5: Client's primary need of support for themselves

Primary Need of Support (For Parent)	Yes (Percentage)	No (Percentage)
Parenting Support	131	39%
Housing	81	24%
Food	64	19%
Mental Health Resources	58	17%
	N = 334	n/a

Table 6: Client's primary need of support for their child

Primary Need of Support (For Child)	Yes (Percentage)	No (Percentage)
Speech and Language	92	19%
Behaviour	94	19%
Sleep	54	11%
Eating	48	10%
Play	25	5%
Toileting	22	5%
General Development	153	31%
	N = 488	n/a

Appendix C: Statistical Significance and Effect Size of Retrospective Pre-Post Survey Items

Table 7: Results for the retrospective pre/post test

Question	z	p	Effect Size (r)
I feel confident that I know what my needs are as a parent	-12.559	< .001	.89
I feel confident that I know the needs of my child(ren)	-12.540	< .001	.90
I know which services and types of support would be most appropriate for me	-13.085	< .001	.90
I know which services and types of support would be most appropriate for my child(ren)	-13.246	< .001	.91
I feel like I am connected to the services needed to support my child	-14.114	< .001	.96
I feel like I am connected to the services needed to support me as a parent	-13.702	< .001	.92
I know about services in the community that I can access to support myself and/or my child(ren), if needed	-12.817	< .001	.87
I feel confident that I could access the services and supports for myself, if needed	-12.074	< .001	.85
I feel confident that I could access services and supports for my child(ren)), if needed	-12.406	< .001	.88
I feel comfortable scheduling appointments for myself and my child(ren)	-9.721	< .001	.75
I feel comfortable communicating my needs/my child(ren)'s needs to service providers	-10.006	< .001	.76
I feel confident that I can find out about which services may be helpful if I am/my child(ren) is having trouble	-12.579	< .001	.89
I am comfortable asking questions when I don't understand what a service provider is telling me	-10.949	< .001	.81

Note: This is a Wilcoxon signed-rank test. According to Cohen (1988), effect sizes (r) can be interpreted as no effect / very small effect (< 0.1), small effect (0.1), medium effect (0.3), and large effect (0.5). Bracketed numbers below the effect size represent the lower and upper 95% confidence interval around the effect size.

** All survey items are significant at a p-value of <0.05.*

Appendix D: Statistical Significance and Effect Size of Baby Love Survey Items

Table 8: Results for the Baby Love pre/post test

Question	z	p	Effect Size (r)
Babies can tell the difference between a happy voice and an angry, sad or scared voice.	-0.363	0.706	.08
Babies get scared if they hear a quarrel or fight going on.	-1.748	0.052	.35
My baby needs to know that I will always be there for her/him.	-0.170	0.878	.05
You can spoil a baby by picking her/him up when she/he cries.	1.330	0.178	.23
It is OK to leave a baby with anyone who is over the age of 12 years because the law allows it.	0.040	0.972	.01
Most of the time I pick up my baby when she/he is upset.	-0.524	0.582	.10
My baby needs me to help her/him feel calm and happy and safe.	-2.086	0.024	.49
When I am feeling upset, I go to my baby to calm me down or make me feel better.	-0.046	0.967	.01
When I feel upset, I wait to feel better before I go to my baby unless she/he needs me right away.	-1.179	0.225	.21
There is no way to understand why a baby is crying.	0.732	0.440	.14
My baby cries just to make me mad.	0.174	0.876	.05
When my baby cries, I don't let her/him see me; that way she/he will settle down faster.	-1.540	0.118	.27
Babies are too young to be affected by tension in people around them.	1.144	0.233	.23
I want to see how someone acts with my baby before I leave my baby in their care.	-0.926	0.322	.24
When my baby makes me frustrated, I show the baby what I am feeling so he/she will learn to stop.	-0.618	0.526	.11
I know that my crying and being upset will upset my baby.	-0.138	0.889	.03
Although I do not like to see my baby cry, I am able to tolerate it because I know that it's part of growing up.	-0.231	0.814	.04

When my baby is crying, I can stay calm and try to figure out what they need.	-2.120	0.025	.40
I pay attention to my baby's signals and try to understand them.	-1.714	0.052	.39
I respond to my baby immediately when he/she shows me that they need something	-0.112	0.911	.02
When my baby signals that he/she needs something, I am able to correctly figure out what they need most of the time.	-2.660	0.004	.57

Note: This is a Wilcoxon signed-rank test. According to Cohen (1988), effect sizes (r) can be interpreted as no effect / very small effect (< 0.1), small effect (0.1), medium effect (0.3), and large effect (0.5). Bracketed numbers below the effect size represent the lower and upper 95% confidence interval around the effect size.

** Survey items that have a p -value of <0.05 are bolded.*