

the reading agency

Evaluating outcomes 7-10

Using this form

You can use this form as the basis of a discussion with young people in order to identify whether they have met outcomes 7-10 of the Lottery evaluation data. The form should be used on a one-to-one basis after a sustained period of involvement by the young person and should be filled in by a project worker. Young people should not be expected to fill it in. A simple answer of yes or no should give you the data you need but the most interesting element of the discussion will be the young person's comments. These can be used to provide advocacy for your project. The discussion should be informal and centred on the needs of the young person. Hopefully it will enable them to reflect on their own learning and help them to think about their future direction in addition to providing you with the data that you need.



Name		
Outcomes	Prompts and examples	Young person's comments
Outcome 7 Do you think you've learned anything while you've been involved in HeadSpace? Yes / No	What kind of things? <ul style="list-style-type: none"> ● Knowledge e.g. how libraries or publishers work, facts from books, information to do with issues such as racism, the environment ● Skills e.g. reading, writing, designing, speaking, negotiating, organising events ● Understanding e.g. working with others, issues such as racism 	
Outcome 8 Do you think it's changed the way you think or feel about yourself at all? Yes / No	For instance: <ul style="list-style-type: none"> ● Do you feel more confident? ● Do you feel proud of what you've done? 	

<p>Has it changed the way you think or feel about other people?</p> <p>Yes / No</p>	<p>For instance:</p> <ul style="list-style-type: none"> ● Do you like some people more now than you did at the beginning? ● Do you understand more about where other people are coming from? ● Did you have to think about who else might use the space and what books they might like? 	
<p>Outcome 9</p> <p>Do you think your behaviour's changed at all while you've been at HeadSpace?</p> <p>Yes / No</p>	<p>For instance:</p> <ul style="list-style-type: none"> ● Are you less shy? Less angry? Better behaved in the library? ● Can you think of an example of where you've handled a situation better than you used to? ● Have other people noticed you behaving differently? 	
<p>Has being involved in HeadSpace given you ideas about what you want to do next?</p> <p>Yes / No</p>	<p>For instance:</p> <ul style="list-style-type: none"> ● Are you taking on new volunteering roles? ● Do you have plans for new courses or hobbies? ● Do you have any new career plans? 	

<p>Outcome 10 Have you tried anything new that you've enjoyed while you've been here?</p> <p>Yes / No</p>	<ul style="list-style-type: none">● What things have you enjoyed?● What new things have you done?	
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