

State of Mentoring in Minnesota Survey



The Mentoring Partnership of Minnesota measures the collective impact of the mentoring field in our state by conducting a survey of mentoring programs on a regular basis. The results of this survey provide a snapshot of the State of Mentoring in Minnesota, and are used by multiple stakeholders, such as legislators, funders, educators, researchers and MENTOR, the National Mentoring Partnership. The information collected is particularly valuable in understanding the impact of mentoring on Minnesota youth and increasing support for mentoring organizations.

- Consider each of the questions carefully; many questions ask about your mentoring program activities or outcomes in 2011, or the 2010-11 school year.
- Programs that are registered at www.mpmn.org may have provided some of this information previously. The information you provide on this survey will help the Mentoring Partnership align advocacy efforts and support to programs with current information from the field.
- **Be sure to complete this survey only for one mentoring program.** Gathering information on activities and outcomes for individual programs provides more accurate data on the impact of mentoring for Minnesota youth and communities. If you manage additional mentoring programs, complete separate State of Mentoring surveys for each program - you can use the same link to complete and submit surveys for multiple programs.

This survey should take you approximately 30 minutes to complete. You may need to refer to program data in order to respond to some questions about your program. You can use this PDF to keep track of all your answers before entering responses online (<http://www.theimprovetgroup.com/surveys/MPM/mnstateofmentoring2012.htm>), or you may complete the entire survey on paper and then fax or email to Polly Roach at (612) 370-9195 or polly@mpmn.org.

State of Mentoring survey responses are kept private and confidential. Only aggregate data will be released in public reports. All survey respondents will have access to this aggregate information, as well as suggestions about how to use the data to build awareness of mentoring and your program.

If you have any questions about the survey, please contact Polly Roach at polly@mpmn.org or 612.370.9119

We value the time and effort you put into providing accurate data on your mentoring program for this survey. **In appreciation for your work in providing this critical information, programs completing the survey by the due date of Friday June 29, 2012 will be entered into a drawing for one of eight Target gift cards, worth \$25.** The prize drawing will take place after the final survey due date; winners will be notified by e-mail and through an announcement in our monthly e-newsletter.

Thank you in advance for your assistance in advancing the understanding of mentoring in Minnesota!

Program Overview

- 1. Please enter the address and contact information for your program below. This information will help us to compare overall survey results with those of previous years' Surveys, and to do follow-up if we need to clarify information.**

Organization Name: (or school/district name) _____

Program Name: (if different than above) _____

Address: _____

City: _____

State: _____

Zip Code: _____

Main Phone Number: _____

- 2. Describe the structure of your program. Choose one response.**

- ☐ Independent / stand-alone
- ☐ Embedded within a broader organization (such as a community service agency or school)

- 3. In what year was your mentoring program established?**

Program Description

4. Where do the matches primarily meet for your program? Choose one response.

- ☐ Out in the community
- ☐ At a school
- ☐ At a community-based organization
- ☐ At a business
- ☐ At a church, synagogue, mosque or other faith-based institution
- ☐ In a residential or juvenile justice facility
- ☐ Online (e-mentoring)
- ☐ Other

If other, please describe:

5. Mentors eligible for the program are: Choose one response.

- ☐ Adults only
- ☐ Youth (18 and under)
- ☐ Both adults and youth

6. What is the minimum required length of commitment for mentors and youth? Choose one response.

- ☐ Less than 3 months
- ☐ 3 to 6 months
- ☐ 6 to 9 months
- ☐ 9 to 12 months (or full school or calendar year)
- ☐ 1 to 2 years
- ☐ More than 2 years
- ☐ We don't have established expectations for length of commitment

7. About what percentage of your mentoring matches...? Please make total 100%, mark N/A if you don't know or your program does not track this.

Meet the minimum length of commitment

Exceed the minimum length of commitment

Terminate early

Program Description

8. From the following list, please select the three most common factors associated with early termination of matches in your program.

- ☐ Mentor had change in life circumstance (marriage, divorce, job change or loss, move, etc.)
- ☐ Mentee had change in life circumstance (moved out of town, changed schools, left school, etc.)
- ☐ Mentor had unfulfilled and/or unrealistic expectations of the mentoring experience
- ☐ Mentee had unfulfilled and/or unrealistic expectations of the mentoring experience
- ☐ Inability to bridge cultural differences
- ☐ Family interference / lack of support
- ☐ Limited resources to provide adequate match support
- ☐ Unknown (program does not track early termination)
- ☐ Other

If other, please describe:

9. How frequently does your program require mentors to meet with youth? Choose one response.

- ☐ 1 time per month
- ☐ 2 - 3 times per month
- ☐ Weekly
- ☐ Two times per week
- ☐ Three or more times per week
- ☐ We don't have established expectations for how frequently mentors meet with youth.

10. About what percentage of your mentoring matches...? Please make total 100%, mark N/A if you don't know or your program does not track this.

Meet the minimum requirement of meeting frequency

Exceed the minimum requirement of meeting frequency

Meet less than the minimum requirement

11. How are mentees referred to your program? Check all that apply.

- ☐ Self-referral
- ☐ Parent/guardian referral
- ☐ Social worker referral
- ☐ Teacher referral
- ☐ Other professional referral
- ☐ Court-ordered
- ☐ Other

If other, please describe:

Program Description

- 12. Please indicate which, if any of the following subsections of the youth population are represented in the youth who participate as mentees in your program. Please use your best estimation. Mark one response per row.**

	0- 25%	25-75%	76-100%	Don't know / we don't track this
Low-income (eligible for free or reduced lunch)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Single-parent household	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recent immigrant or refugee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Foster, residential, or kinship care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adjudicated/court involved	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gang involved	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Incarcerated parent(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Military parent(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Youth with disabilities or special healthcare needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Youth receiving special education services in school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Academic achievers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Academic risk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Youth who have dropped out of school (currently not in school)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Youth who represent first generation of their family to go to college	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gay, lesbian, bisexual, transgender and/or questioning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pregnant/Young parent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If other, please describe:

Program Description

13. Please select the top three goals that your mentoring program is *designed* to address.

- ☐ My program doesn't track this / I don't know
- ☐ Healthy behaviors/Self-esteem
- ☐ Youth identity/connection to ethnic, religious, social, cultural group
- ☐ Social competence
- ☐ Education/academic support for youth who are academically behind
- ☐ General education/academic support
- ☐ Entrance and retention support for youth in college
- ☐ Job skills/work readiness/career exploration
- ☐ Violence prevention
- ☐ Avoidance of entry or re-entry into juvenile justice system
- ☐ Substance abuse prevention
- ☐ Avoidance of early pregnancy
- ☐ Youth leadership
- ☐ Service learning
- ☐ Other

If other, please describe:

Mapping Youth Mentoring

In order to accurately depict the state of mentoring in Minnesota, MPMN would like to learn more about where the youth mentees participating in your program reside.

14. Please list the counties where your youth mentees reside.

15. If your youth mentees are in the Twin Cities Metro Area, please list the cities in which they live.

Participation in Mentoring

- 16. How many total youth were actively involved in your mentoring program in the 2011 calendar year or 2010-11 school year?**

Male

Female

- 17. What are the age groups of youth participating in your mentoring program** *Check all that apply.*

- ☐ 5 - 10 years
☐ 11 - 14 years
☐ 15 - 18 years
☐ Older than 18 years
☐ Mixed ages - youth and their families

- 18. Please indicate how many youth your mentoring program served through the following mentoring models in the 2011 calendar year or 2010-11 school year. Enter "0" for any mentoring model that your program did not use in 2011. Please do not double-count any youth unless they were involved in more than one type of mentoring relationship.**

School-Based One-to-one

School-Based Group mentoring

School-Based Team mentoring

School-Based E-mentoring

School-Based Peer-to-Peer mentoring

Outside-of-School One-to-One

Outside of School Group mentoring

Outside of School Team mentoring

Outside of School E-mentoring

Outside of School Peer-to-Peer mentoring

Other type of mentoring relationship

If other, please describe:

Participation in Mentoring

- 19. How many total mentors were actively involved in your mentoring program in the 2011 calendar year or 2010-11 school year?**

Male

Female

- 20. What is the total number of hours that mentors contributed to your program in the 2011 calendar year? *If you do not track mentor hours, write N/A.***

Waiting List

- 21. How many mentees were on a waiting list for a match, or in process of being matched with a mentor as of December 31, 2011? If you do not know exact numbers, please provide your best approximation.**

Female youth

Male youth

- 22. How many mentors were on a waiting list for a match as of December 31, 2011? If you do not know exact numbers, please provide your best approximation.**

Female mentors

Male mentors

- 23. Based on the 2011 calendar year or 2010-11 school year, please select the average length of time a youth mentee spends on your program's waiting list from initial inquiry to match?**

	1 month or less	2-3 months	4-6 months	More than 6 months	More than 1 year	Don't know/ don't track
Female youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Male youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 24. From the following list, please select the three most common reasons for youth to be on a waiting list for your program.**

- ☐ Mentors not available to be matched
- ☐ Mentors not available to be matched due to gender match criteria
- ☐ Mentors not available to be matched due to geographic match criteria
- ☐ Mentors not available to be matched due to race/ethnic match criteria
- ☐ Mentors not available to be matched due to delay in screening process
- ☐ Program staff not available to support match effectively
- ☐ Other

If other, please describe:

- 25. Do you have a limit for the number of youth that can be on your waiting list? Choose one response.**

- ☐ Yes
- ☐ No

If yes, what is the maximum number of youth that can be on your waiting list?

Program Capacity and Sustainability

26. What are your top three most effective strategies to recruit mentors?

- ☐ Listing on Mentoring Partnership of Minnesota website
- ☐ National Mentoring Month promotions
- ☐ Use current mentors
- ☐ Word of Mouth
- ☐ Volunteer fairs/tabling events
- ☐ Attend community meetings or networking opportunities
- ☐ Partnerships with corporations, affinity groups, and nonprofits
- ☐ Information sessions and open houses
- ☐ Media outreach
- ☐ Paid advertising
- ☐ Donated advertising
- ☐ Social media
- ☐ Online volunteer database
- ☐ Distributing marketing materials to local organizations
- ☐ Other

If other, please describe:

27. Did your mentoring program meet its goals for recruiting mentors in the 2011 calendar year or 2010-11 school year? Choose one response.

- ☐ Yes
- ☐ No
- ☐ I don't know
- ☐ We don't set recruitment goals

Program Capacity and Sustainability

28. Please provide an estimate of your program's annual operating budget for 2011. Choose one response.

- ☐ Under \$5,000
- ☐ \$5,001 - \$25,000
- ☐ \$25,001 - \$50,000
- ☐ \$50,001 - \$100,000
- ☐ \$100,001 - \$250,000
- ☐ \$251,000 - \$500,000
- ☐ Over \$500,000
- ☐ I don't know

29. How does the budget for your mentoring program compare to the budget a year ago? Choose one response.

- ☐ Increased
- ☐ Not been affected
- ☐ Cut by less than 25%
- ☐ Cut by 25% or more

30. How many staff FTEs (Full Time Equivalents) did your program have in 2011?

Paid staff

Unpaid staff

31. Please describe the size of the program staff now compared to a year ago. Choose one response.

- ☐ Number of positions increased
- ☐ Number of positions the same, but hours of positions increased
- ☐ No change
- ☐ Number of positions the same, but hours reduced
- ☐ One or more positions have been cut

32. Does your mentoring program pay mentors for their participation in your program? Choose one response.

- ☐ Yes
- ☐ No

33. In which of the following ways are mentors paid in your program? Choose all that apply

- ☐ Stipend
- ☐ Salary - for mentoring only
- ☐ Salary - included with other organizational duties
- ☐ Other

If other, please describe:

Resource Utilization

34. Are you and/or your organization familiar with the Elements of Effective Practice for Mentoring™? *Choose one response.*

- ☐ Yes
☐ No

35. From which organizations has your mentoring program accessed resources in 2011? *Check all that apply.*

- ☐ Mentoring Partnership of Minnesota
☐ MENTOR / National Mentoring Partnership
☐ Education Northwest: National Mentoring Center
☐ America's Promise: The Alliance for Youth
☐ Friends for Youth
☐ U.S. Department of Education Mentoring Resource Center - edmentoring.org
☐ Search Institute
☐ Kinship, Inc.
☐ Big Brothers Big Sisters of America
☐ Other
☐ None, we did not access resources from any external organizations in 2011.

If other, please describe:

Resource Utilization

- 36. Mentoring Partnership of Minnesota offers many resources for support and training to mentoring organizations. For each of the following resources, please tell us which ones you accessed in 2011 or currently access, or are interested in accessing in the future. Choose all that apply.**

	Accessed in 2011 or currently access	Would like to access in the future
Resources (online and printed)	<input type="checkbox"/>	<input type="checkbox"/>
Quality Mentoring Assessment Path (QMAP)	<input type="checkbox"/>	<input type="checkbox"/>
Program consultation or technical assistance	<input type="checkbox"/>	<input type="checkbox"/>
Training Webinars	<input type="checkbox"/>	<input type="checkbox"/>
Training for staff	<input type="checkbox"/>	<input type="checkbox"/>
Training for mentors	<input type="checkbox"/>	<input type="checkbox"/>
Training for mentees	<input type="checkbox"/>	<input type="checkbox"/>
Minnesota Mentoring Conference	<input type="checkbox"/>	<input type="checkbox"/>
E-Newsletters	<input type="checkbox"/>	<input type="checkbox"/>
Website listing for mentoring program	<input type="checkbox"/>	<input type="checkbox"/>
Tools to support recruitment and public awareness campaigns	<input type="checkbox"/>	<input type="checkbox"/>
Grant writing assistance / Letters of support for funding proposals	<input type="checkbox"/>	<input type="checkbox"/>
Referrals to funding opportunities	<input type="checkbox"/>	<input type="checkbox"/>
Alerts about upcoming legislation or public policy activities	<input type="checkbox"/>	<input type="checkbox"/>
Opportunities to network with other mentoring organizations	<input type="checkbox"/>	<input type="checkbox"/>

- 37. Of the Mentoring Partnership of Minnesota resources you have accessed in 2011, or are currently accessing, which have been the most valuable or had the most impact for your organization, and why?**

- 38. Do you have ideas for other types of assistance that Mentoring Partnership of Minnesota could provide? How would this benefit your program/organization?**

39. Is your mentoring program currently registered at www.mpmn.org? Choose one response.

- ☐ Yes
☐ No
☐ I'm not sure

40. If no, would you like to become a registered program at www.mpmn.org? Choose one response. Please visit <http://www.mpmn.org/ProgramInformation.aspx> for information about the benefits of becoming a registered program at www.mpmn.org.

- ☐ Yes
☐ No

41. If you are interested in becoming a registered program at www.mpmn.org, please provide a contact name and email for follow-up by Mentoring Partnership of Minnesota staff.

Contact name for registration _____

Contact email for registration _____

42. Additional Comments: Please feel free to use the space below to add any additional information you would like us to know about your mentoring program.

Thank you for completing the 2012 State of Mentoring Survey! Click on "Submit" below to have your responses recorded and to be entered into the drawing for one of eight \$25 Target gift cards.

For more information and resources on mentoring, or to register your program if you haven't already, please visit www.mpmn.org.