THE NORTHSTAR FAMILY RESOURCE CENTER: 2021 PROFILE OF SERVICES AND SUPPORTS

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Introduction

This report summarizes key findings from an analysis of secondary data related to services and supports received by patrons from the NorthStar Family Resource Center (NSFRC) in 2021. The NorthStar Family Resource Center is part of a network of Family Resource Centers (FRC) operated by Partnership for Strong Families (PSF). PSF is the lead Community-Based Care agency for 13 North Central Florida Counties. In 2007, PSF began developing a network of FRCs that emphasize a strengthening families approach while utilizing a Protective Factors Framework to provide prevention services and supports to families. The NSFRC is the newest FRC operated by PSF that began serving the Lake City community in 2021. The PSF Resource Center Model is built upon a multi-system collaborative, focusing on primary prevention that works toward strengthening families with the goal of preventing child maltreatment and reducing entries into foster care.

The NorthStar Family Resource Center

The NorthStar Family Resource Center began formal operations in March of 2021 following a significant planning and development phase and with the support/funding of the Children's Bureau. PSF has long known that Columbia County Florida, the area directly north of Alachua County (where three Gainesville FRCs are located), has needed an increased level of intervention to combat the rising number of shelters and child maltreatment. While the population of the county is relatively low (68,484 individuals compared with Alachua County's 260,000), progressively escalating maltreatment counts in Columbia County began to rival Alachua's. An initial Resource Center Advisory Council was formed (of community partners, stakeholders, and leaders) to advise in the selection of a site in Lake City, FL and the development of resources and supports to provide to targeted neighborhoods. As part of an effort to develop a more comprehensive understanding of the need for the identified target population (as part of implementation plan efforts), a *Community Strengths and Needs Assessment* tool was developed and distributed (in paper form and electronically) by PSF staff and community partners to parents/caregivers in households within the targeted service area as well via select community events sponsored by the NorthStar Resource Center. These efforts and continued engagement with community members led to the identification of a hierarchy of needs that the NSFRC would attempt to respond to in collaboration with a variety of community partners.

NSFRC is one of five Family Resource Centers that the PSF operates that partners with a network of over 75 community partners (across all sites) to provide services that are free of charge and are intended to be responsive to the needs of the surrounding community, as identified by community partners, stakeholders, and community members (referred to as patrons) within the targeted areas. It is this multi-system collaborative, with representation from across the five sectors (public, business, philanthropy, community, and nonprofit), that has allowed a blending of funding, expansion of services to meet the needs of patrons, and enhancement of the community's ability to leverage resources for the benefit of neighborhood and communities, who experienced historically limited access to family support services.

Methods

This report summarizes findings from a descriptive analysis of secondary data obtained from the NorthStar Family Resource Center in 2021. Analysis was conducted on de-identified data and in

accordance with an approved IRB protocol[1] that was also approved by the Florida Department of Children and Families, Office of Child Welfare.

Community Module Data System

When patrons visit the NSFRC, they are asked to sign in using a Getting to Know You (GTKY) form if it's their first visit. All information collected is entered into the Community Module Data System. The GTKY form mimics the electronic system and collects the same patron information. Personal/identifying information collected (by the FRC) includes Name, Date of Birth (DOB), Age, Gender, Race, Veteran Status, Contact Information (including physical address and email), and Neighborhood of Residence. Starting March 16th, 2021, all FRCs started collecting information to identify if patrons are caregivers to children under the age of 18. Once the patron is identified as a repeat visitor, they are asked to sign in using the Resource Center Patrons Sign-in sheet and only asked to fill in a GTKY sheet to provide updates they have, if applicable. Additional information is collected regarding if a child or any other adults are with the patron for the purpose of receiving services. Further, the patron is asked to identify if they have been at the FRC in the past and the reason they are visiting so that NSFRC personnel can properly assist. When patrons visit NSFRC events, they sign in using an Event Log which records Name, Date of Birth (DOB), Gender, Race, Caregiver of a Child under 18 (Y/N), Zip Code, Email/Phone.

Collectively these data would allow NSFRC to track and monitor service utilization trends and expressed needs within the neighborhoods and households served. It is these service trends (secondary data) that are the focus of this report. Following a series of data cleaning efforts, some modifications to the Community Module Data System took place between March and August 2021. These efforts occurred along with additional staff trainings related to intake/sign-in procedures and protocols that would allow for a more effective itemization of service requests and utilization trends, including an unduplicated count of patrons. Data elements/variables that remained consistent (pre-2021 to present) include: Visit ID Number, Visit Date, Resource Center Identifier, Age of Patron Requesting Service/Support, Service Category, Protective Factor Category for Requested Service, if Service/Support was Event-based, and Client ID Number[2]. Gender and Race categories within the Community Module were expanded on March 22, 2021. Gender choice prior to March 22, 2021, included: Female / Male / Unknown. Gender choice since March 22, 2021, includes Female / Male / Transgender / Gender Non-Conforming/ Non-binary / Prefer Not to Answer. Race options prior to March 22, 2021, included: Black/African American, White, Multiracial, Hispanic, Asian, Other, Unknown. Race options since March 22, 2021, currently include: American Indian or Alaska Native / Asian/ Black or African American - non-Hispanic origin / Hispanic, Latino, or Spanish origin / Multiracial / Other / Prefer not to answer / White – non-Hispanic origin. Ethnicity choices added March 22, 2021, include: (Cuban/Mexican, Mexican Am., Chicano/ Other Hispanic, Latino, or Spanish/ Prefer not to answer/ Puerto Rican or Unknown (available when Hispanic, Latino, or Spanish origin is selected), and Asian Indian/ Chinese/ Filipino/ Guamanian or Chamorro/

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[1] Advarra IRB: Children's Bureau, Protocol Number PSF-2021-CB

[2] The Client ID Number is a unique system-generated number for individual patrons. This unique number is utilized for matching service requests over time within the secondary data used for analyses in this report. Specific identifying information related to a patron is not used as a foundation for generating this number; thus, no identifying information can be deduced from the number. The link between this number and any identifying information related to patrons is only known by select/approved RC and PSF staff/employees who manage and utilize the Community Module Data System as part of their job responsibilities. No identifying information (names, addresses, date of birth) of individual patrons was provided for analyses conducted in this report.

Japanese/ Korean/ Native Hawaiian/ Other Asian/ Other Pacific Islander/ Prefer not to answer/ Samoan/ Unknown, or Vietnamese (available when Asian is selected).

Although historically, staff (at other FRCs) report that most services and supports requested are delivered, efforts were made to integrate into the Community Module Data System an indicator of service delivery associated with each service /support request. These enhancements to the module were completed, along with training of staff for documenting "Services Delivered" (new data element/variable) by July 1, 2021. Please note that findings presented in this report are qualified or impacted by the dates for which select data elements started to be collected. Again, no names, dates of birth, and contact information (or other potentially identifying information) known to agency staff were made available or used for analyses in this report.

Classification of Services and Supports by the Protective Factors Framework

PSF's network of FRCs (including NSFRC) are strategically implemented within neighborhoods and communities with families who are experiencing increased risk factors and a disproportionate concentration of past involvement with the child welfare system. Services at these FRCs are structured (and classified) in alignment with a Protective Factors Framework. Protective factors, as constructs, are "…conditions or attributes…" of individuals, families, communities, or the larger society that lessen the risk of maltreatment and promote the healthy development and well-being of children and families (Capacity Building Center for States, 2020b; Child Welfare Information Gateway, 2020). Strengthening and supporting families through services and activities that promote protective factors, it is held, mitigates the impact of and/or decreases the exposure to risk factors correlated with (and subsequently preventing) the likelihood of maltreatment (Administration for Children and Families, 2018; Development Services Group, Inc., & Child Welfare Information Gateway, 2015).

Although there are a number of different protective factors approaches (Child Welfare Information Gateway, 2020; Centers for Disease Control and Prevention, 2020; Center for the Study of Social Policy, 2015a; FRIENDS National Resource Center for Community Based Child Abuse Prevention, 2011; Sege et al., 2017)[3] historically there were two Protective Factors models/frameworks considered as an organizing principle for services at the PSF Family Resource Centers (i.e., services would be implemented to address select protective factors). These included those developed by the Center for the Study of Social Policy (CSSP) and the FRIENDS National Center for Community-Based Child Abuse Prevention (2018, 2011). The Center for the Study of Social Policy (CSSP) focuses upon Parental Resilience, Social

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[3] Although there are different classification frameworks of protective factors that can be used for families and children/youth facing increased risk factors (and other child welfare populations), many of the identified individual factors (and associated indicators) for each model are represented in alternative models referenced. For example, the Social-Ecological Model endorsed by the CDC (which serves as a foundation for their Essentials for Childhood model) classifies protective factors as individual protective factors, family/relationship protective factors, and community or societal protective factors (Centers for Disease Control and Prevention, 2020; Centers for Disease Control and Prevention, Division for Violence Prevention, 2019). Included as individual factors (among others) in this model are stress management, hopefulness, problem-solving skills, and resilience. These individual factors are closely aligned with the Parental Resilience factor/construct as conceptualized by the CSSP model that demarcates resilience as being related to general life stressors and parenting stressors that (collectively) can be influenced by typical events and life changes (e.g. moving, a crying baby), unexpected events (e.g. job loss, medical problems, etc.), individual factors (e.g. substance abuse, traumatic experiences, etc.), social factors (e.g. relationship/martial problems, etc.) and community, societal or environmental factors (generational poverty, crime, racism, etc.) (Center for the Study of Social Policy, 2015; n.d.-c).

Connections, Knowledge of Parenting and Child Development, Concrete Support in Times of Need, and Social and Emotional Competence of Children (2015, n.d.-c). The FRIENDS National Center for Community-Based Child Abuse Prevention identified (initially) parallel protective factors of Family Functioning/Resiliency, Social Emotional Support, Child Development/Knowledge of Parenting, Concrete Support, with Nurturing and Attachment. An itemization of the conceptual definitions, similarities, and differences in these two models is denoted in Table 1.

Table 1: CSSP and FRIENDS Protective Factors Frameworks/Models

CSSP Protective Factor	CSSP Protective Factor Definition	FRIENDS Protective Factor	FRIENDS Protective Factor Definition
Parental Resilience	Managing stress and functioning well when faced with challenges, adversity, and trauma.	**Family Functioning / Resiliency**	Having adaptive skills and strategies to persevere in times of crisis. Family's ability to openly share positive and negative experiences and mobilize to accept, solve, and manage problems.
Social Connections	Positive relationships that provide emotional, informational, instrumental, and spiritual support.	**Social Emotional Support (PFS-1) Social Supports (PFS-2)[4]**	Perceived informal support (from family, friends, and neighbors) that helps provide for emotional needs.
Concrete Support in Times of Need	Access to concrete support and services that address a family's needs and help minimize stress caused by challenges.	**Concrete Support**	Perceived access to tangible goods and services to help families cope with stress, particularly in times of crisis or intensified need.
Knowledge of Parenting and Child Development	Understanding child development and parenting strategies that support physical, cognitive, language, social and emotional development.	**Child Development / Knowledge of Parenting**	Understanding and using effective child management techniques and having age-appropriate expectations for children's abilities.
Social and Emotional Competence of Children	Family and child interactions that help children develop the ability to communicate clearly, recognize and regulate their emotions and establish and maintain relationships.		
		Nurturing and Attachment	The emotional tie along with a pattern of positive interaction between the parent and child that develops over time.

Sources:
Center for the Study of Social Policy (2015). *Core Meanings of the Strengthening Families and Protective Factors*. Washington, DC: Author. Available at: https://cssp.org/resource/core-meanings-of-the-strengthening-families-protective-factors/

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[4] Although the name of the construct changed from *Social Emotional Support* to *Social Supports* from the 1st to 2nd edition of the Protective Factors Survey, the definition/conceptualization of the construct remains the same.

FRIENDS National Resource Center for Community Based Child Abuse Prevention (2011). *The Protective Factors Survey User's Manual.* Chapel Hill, NC: Author.
FRIENDS National Resource Center for Community Based Child Abuse Prevention (2018). *The Protective Factors Survey. 2nd Edition User's Manual.* Chapel Hill, NC: Author.

The historic adoption of a hybrid classification of protective factors (for at-risk and in-risk families) by PSF was reportedly guided by discussions, considerations, and feedback from PSF staff and leadership, community partners and collaborators, and consultation with child welfare specialists. Although initially considering the CSSP model, PSF had utilized the FRIENDS Protective Factors model in past efforts not associated with the Family Resource Centers, including an evaluation of Family Team Conferencing models. A final selection (and associated conceptualization) of protective factors represented those areas that PSF believed services should focus upon within the FRCs given identified community/neighborhood needs and associated risks for child maltreatment and Florida DCF involvement.

PSF adopted the following protective factors as a guide for a service framework for the existing Family Resource Centers between 2016 and 2020: *Concrete Supports* (CSSP and FRIENDS), *Knowledge of Parenting and Child Development* (CSSP and FRIENDS), *Nurturing and Attachment* (FRIENDS), *Social Connections* (CSSP), and *Family Functioning/Resiliency* (FRIENDS). The *Nurturing and Attachment* protective factor is considered a unique construct associated with the FRIENDS Protective Factors model (as measured by the Protective Factors Survey). Although the *Social Connections* and *Family Functioning/Resiliency* protective factors (see above table) are specific to CSSP and FRIENDS classifications (respectively), each organization has parallel/similar classifications/constructs (*Social Emotional Support* and *Parental Resilience,* respectively). Beginning in 2021, PSF aligned its conceptualization of services solely with the CSSP protective factors framework, namely, Concrete Support in Times of Need, Knowledge of Parenting and Child Development, Social Connections, Parental Resilience, and Social and Emotional Competence of Children[5].

The value and importance of the *Nurturing and Attachment* protective factor are reinforced by the Protective Factors framework highlighted by the Children's Bureau, which adds this factor (focusing on six protective factors) to those identified by the Strengthening Families framework developed by CSSP (Child Welfare Information Gateway, 2019). Taken together, four of the six protective factors are primarily focused on parents/caregivers, whereas *Social and Emotional Competence of Children* and *Nurturing and Attachment* "compliment these parent-directed services by focusing on the developmental needs of children and the quality of their primary relationships" (Center for the Study of Social Policy, 2003, p.7)[6].

As services and supports were structured and implemented at each FRC, PSF and FRC administrators classified each in accordance with the protective factor for which it was thought to be primarily associated with, given the intent and focus of the service or support. Interviews and communication with select PSF and FRC administrators (including the Director of Resource Centers, Senior VP of Clinical

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[5] Please note that PSF RCs typically refer to this protective factor as Social and Emotional Competence of Youth, without any change to the defining features of the construct as conceptualized by CSSP. The term "youth" has been substituted, it was thought, to reflect a broader age range of children (infant to eighteen) for whom select services related to their social and emotional competence are targeted.

[6] See: Center for the Study of Social Policy (2003). *Strengthening Families Through Early Care & Education: Protective Factors Literature Review*. Available at:
https://www.matrixoutcomesmodel.com/EvaluationMenu/Protective_Factors_Literature_Review.pdf

and Community Services, and RC Managers) indicate that these were consensus decisions. Efforts were made to allot distinctive names to select services linked to each protective factor; however, there may have been occasions when select service or support names may be associated/classified with different protective factors, across different years and FRCs, as the specific focus or activity associated with the service or support may have varied.

Service Requests as Unit of Analysis

The first set of analyses focused on individual service requests from all patrons. At NorthStar FRC, there were a total of 1,646 service requests made during 1,463 individual visits by patrons in 2021. As denoted above, formal operations did not begin until the end of March 2021. Excluding March from consideration, there was some variation in the number of service requests for each month, ranging from a low of 62 in April (or 3.8% of total 2021 requests)—the first full month of operations in the community—to a high of 522 (or 31.71% of total 2021 requests) in August (see Figures 1 and 2). In August, NSFRC partnered with a long-standing community backpack giveaway event, which brought in over 375 visitors. This free event included music, backpacks, and school supplies, food, and haircut vouchers from local barbers and hairstylists.

NSFRC was operating during the height of the COVID-19 pandemic. Based on information from the other service providers in the community, the number of in-person visits declined during this period due to the impacts of COVID-19. NSFRC provided in-person services during regular operating hours, although CDC and PSF guidelines were followed as they ebbed and flowed throughout the year, including social distancing, mask requirements, and frequent cleanings of surfaces. NSFRC always has PPE supplies (masks, gloves, hand sanitizer, etc.) available for patrons. No programs were restricted to patrons due to COVID-19; however, for the safety of all young patrons. For instance, sick students were asked not to come to Homework Help, a program designed to help students finish their homework before family time.
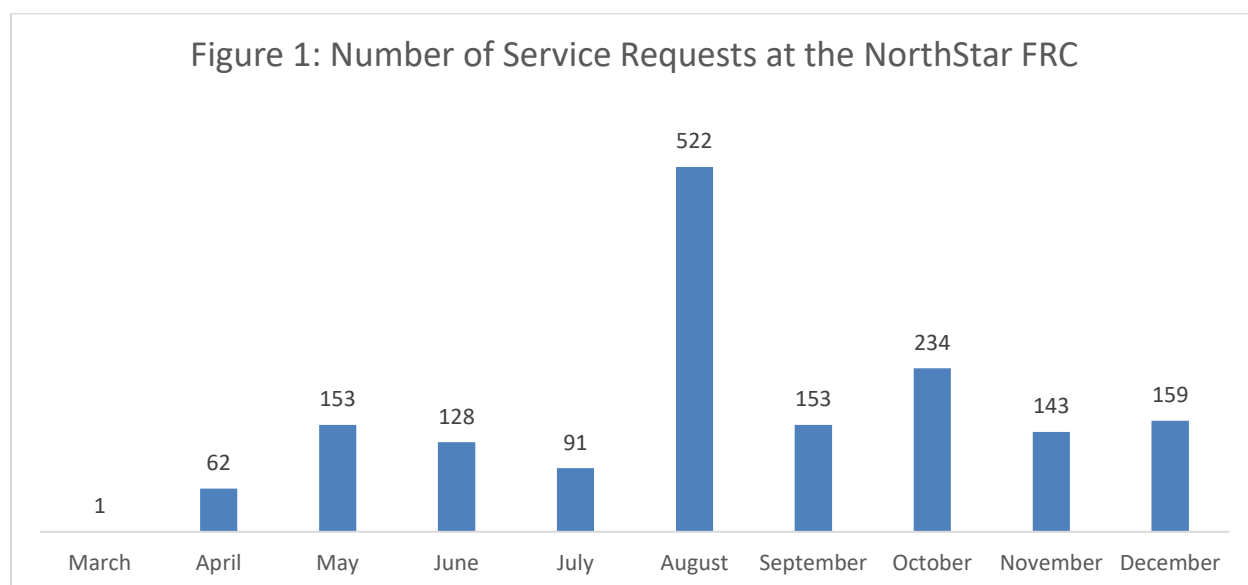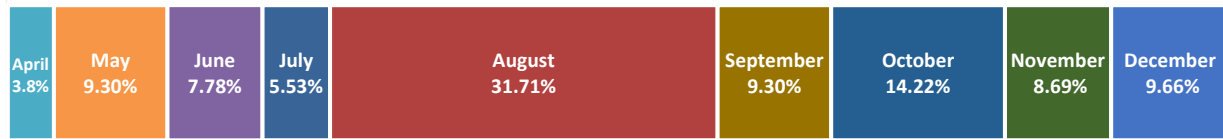

Figure 1: Number of Service Requests at the NorthStar FRC

Figure 2: Monthly Service Requests as Percentage of 2021 Total*

| April 3.8% | May 9.30% | June 7.78% | July 5.53% | August 31.71% | September 9.30% | October 14.22% | November 8.69% | December 9.66% |

*The month of March is not represented in this figure. Only 1 (0.08%) recorded service request for March was documented for the center's opening month.

During 2021, most service requests (n= 966 or 58.7% of all requests) at NSFRC were for concrete supports (see Figures 3 and 4). This was followed by services and supports focused on promoting social connections (n=469 or 28.5% of all requests), and the social and emotional competence of youth (n=163 or 9.9% of all requests). Only 2.8% and 0.12% of service requests focused on family functioning/resiliency and knowledge of parenting and child development protective factors (respectively). Historically, concrete supports have been the most requested service type at all of PSF's Family Resource Centers, including NSFRC. The requests for concrete supports consistently represent more than half of all services requested each month. This trend is to be expected as individuals must meet their own basic needs and those of their children prior to being able to effectively identify and meet other needs.

Throughout the pandemic, requests for concrete supports were even more prevalent as many patrons continued to recover from the financial impacts of the pandemic. Some factors that contributed to an increased need for concrete supports were loss of or decreased income by patrons, termination of available benefits, termination of rent moratoriums, children being home more (due to quarantine guidelines), and closures/limited availability of other community resources.

Figure 3: Number of Service Requests at the NorthStar FRC in 2021 by Protective Factor Categories

Concrete supports accounted for 58.7% of all service requests in 2021. N=1,646

966 — Concrete Supports
163 — Social and Emotional Competence of Youth
469 — Social Connections
46 — Family Functioning/Resiliency
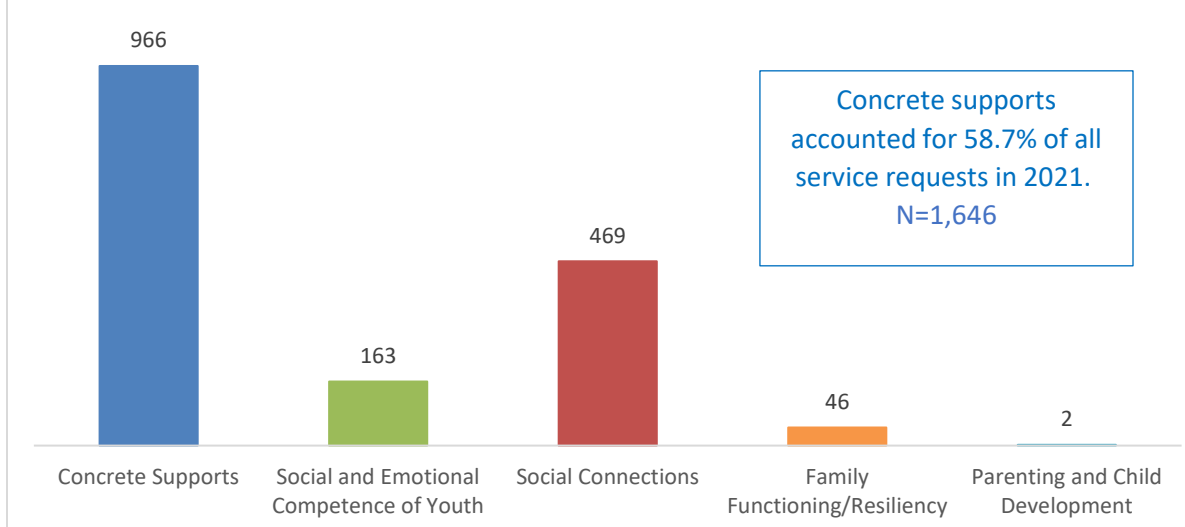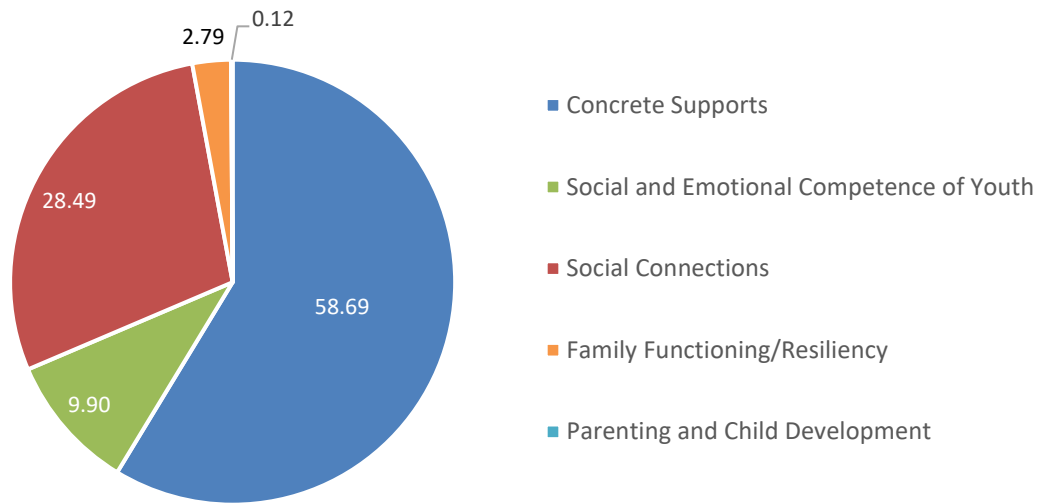2 — Parenting and Child Development

Figure 4: Percent of 2021 Service Requests by Protective Factor

Services and supports can be provided to patrons individually or as part of a specific community event. Table 2 highlights the distribution method of services and supports according to whether they were received as part of an event or provided individually to patrons. Findings suggest that the majority of concrete supports (500 of 966 or 51.8%), specific services and supports linked to promoting the social and emotional competence of youth (131 of 163 or 80.4%) and social connections (466 of 469 or 99.4%) were provided as part of specific events. The majority of family functioning/resiliency supports (43 of 46 or 93.5%) were provided individually to patrons, although a notable number of concrete supports (n=466) were provided individually as well. There were only two reported services/supports liked to promote parenting and child development in 2021; these included the provision of information and referrals to parenting classes within the community. NorthStar FRC did not provide any direct services and supports related to this protective factor in 2021.

Table 2: Method of Distribution (Individual or Event-based) of Services and Supports to Patrons at NorthStar FRC in 2021 Across Protective Factor Categories				
2021		Was Service/Support Received Part of Event?		Total
		No	Yes	
Protective Factor	Concrete Supports	466	500	966
	Family Functioning/Resiliency	43	3	46
	Parenting and Child Development	2	0	2
	Social and Emotional Competence of Youth	32	131	163
	Social Connections	3	466	469
Total		546	1100	1646

Table 3 and 4 provide additional details regarding trends associated with the days of the week select services (whether event-based or not and across protective factor categories) are requested by and/or offered to patrons in 2021. Services and supports are offered throughout the week (including select weekends), with the majority (throughout the year) being event-based (66.8% or 1100 of 1646). Individual-based services and supports are primarily provided during weekdays during regular scheduled hours of operation and are more frequent on Mondays through Wednesdays when they exceed the number of event-based services and supports.

Services and supports provided on weekends were limited to three days during the year (as were the individual supports provided during the scheduled events). The 376 patrons served on Sundays is represented by the School Supply Giveaway event on August 8, 2021. The single service provided on Sunday which was a referral though Mr. Mobley's church, Northside Church of Christ in Lake City, FL. There were two Saturday community events (on May 1st, and October 23rd) that included a May Day celebration and a Community Health and Wellness fair. The May Day celebration was NorthStar's first large community event and had 57 attendees. Families were invited to celebrate spring with music, food, a bounce house for the kids. Community providers lined the baseball field ready to connect their resources to local families. This event highlighted the Social Connections protective factor, welcoming families to mingle freely. In addition to a community dance to "plant the maypole" (a historic dance involving interweaving ribbons attached to the top of a large pole), families enjoyed a classic local treat called a honey dipper made of frozen Kool-Aid. The Community Health and Wellness fair provided Concrete Supports to 77 participants who attended. Of these, 25 participated in the Community Walk that morning which is based on the Social Connections Protective Factor. Asked for by the local retired community the Health and Wellness Fair was a great success that offered several panels on topics such as health, diabetes and surviving cancer. In addition to the morning Community Walk there were activities throughout the day such as food demonstrations and dances to keep participants of all ages involved. The Community Health and Wellness fair was so popular that many participants requested that it happen on a yearly basis. All seven individual services on Saturdays were provided during these two events but were recorded as services separately because patrons requested calendars and enquired about homework help.

Table 3: Distribution of Individual and Event-based Services and Supports Across Days of the Week

Service Request Type	Day of the Week							Total
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
Individual	136	107	146	74	75	7	1	546
Event	102	99	106	180	80	157	376	1100
Total	238	206	252	254	155	164	377	1646

Table 4 findings suggest that, for the most part, services and supports are requested and offered each weekday across all protective factors, with the exception of parenting and child development supports (not a focus at NorthStar FRC during the first year of operations). When weekdays are considered, concrete supports are more frequent (n=511) than services and supports linked to protective factors associated with promoting social connections (n=388), the social and emotional competence of youth (n=158), and family functioning/resiliency (n=46).

Table 4: Distribution of Protective Factor Services and Supports Across Days of the Week

Protective Factor Category	Day of the Week							Total
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
Concrete Supports	113	94	148	89	67	78	377	966
Family Functioning/ Resiliency	8	4	11	15	8	0	0	46
Parenting and Child Development	1	0	1	0	0	0	0	2
Social and Emotional Competence of Youth	41	17	11	89	0	5	0	163
Social Connections	75	91	81	61	80	81	0	469
Total	238	206	252	254	155	164	377	1646

There were a variety of specific services and supports linked to each protective factor. For example, in 2021, there were a total of 25 services and supports provided (that were documented within the Community Module Data System) that were linked to the **concrete support in time of need** protective factors. These included (alphabetically listed): Cash Assistance, Clothing, Clothing Closet, Clothing Closet – EVENT, Community Health – EVENT, Computer Use, Family Planning, Fax, Flyer/Calendar, Food, Food Stamps, Housing Assistance, Infant Care Products, Job Board, Medicaid, Notary Services, Printer / Copier, Rent Assistance, Replacement Identification, School Supplies, School Supply Giveaway, Social Security Benefits, Summer Youth Camp Scholarships, Transportation, and Utility Assistance. This is a plethora of services and supports linked to the concrete support protective factor. Within Table 5, the highest ranked concrete supports and services requested and provided are summarized, including their distribution method (individual or event-based). Unlike other PSF's Family Resource Centers, the provision of food support (not denoted in Table 5) is not a prominent concrete support. In total, the provision of food was provided directly to only 13 individuals, with food stamp assistance provided individually to 6 patrons in 2021. Unlike the Gainesville FRC's, NSFRC does not have a formal agreement with a food bank such as Bread of the Mighty. This decision to not implement a food distribution service in 2021 was made because the need for food is being met through other resources including Catholic Charities and at least three local churches, who regularly host food giveaways within the community.

However, NorthStar FRC has entered into an arrangement with Panera Bread of Lake City to start distributing bread and pastries one day week in the first quarter of 2022. The provision of school supplies for children and youth within the community served was the most utilized concrete support. Almost all (376 of 388 or 96.9%) of these supports were provided via community events, including a "School Supply Giveaway." NSFRC partnered with the Richardson Community Center's annual family-friendly school supply giveaway event designed to get students off on the right foot in a new school year. This event features free food, music, free backpacks with school supplies and haircuts. Because of the spike in COVID-19 cases the event was structured to minimize the risk of exposure which included social distancing, masks and a grab and go setup to limit lingering. Local barbers, who have been a part of this event from the beginning, provided vouchers for haircuts to come get their hair done at their individual shops. Computer, printer, and copier use by patrons was an individual-based support requested by patrons 118 times in 2021. Clothing assistance was predominantly provided individually (97 of 113 or 85.8% of the time) to patrons; whereas health information and supports were all (108 requests/participants) provided via community events at NSFRC. The next three highest requested services and supports (all provided individually) included fax use (N=56), distribution of flyers and NSFRC service and event calendars (N=52), followed by housing and rent assistance services and supports (N=48) in 2021.

The following represents a list of specific services and supports offered (on-site or by collaborative partners) in response to requests from patrons during 2021 that were linked to the **family functioning and resiliency** protective factor: CRC Visit, GED Classes, Health Info, Job Searching, Money Management/Budgeting, Resume / Job Application Assistance, Tutoring for Adult, and Unemployment Benefits- Assistance. As denoted in Table 2, there were 46 documented service and support requests affiliated with this protective factor. The majority (24 or 52.2%) of these requests were for individual-based job and employment assistance (this included services classified as "Job Searching" and "Resume / Job Application Assistance"). These requests were followed by the provision of health/medical information (N=6), unemployment benefits assistance (N=4), and tutoring (N=3) for adults, all of which were provided individually.

As denoted earlier, NorthStar FRC did not provide any direct services and supports that were classified as associated with the **family functioning and resiliency** protective factor. The two reported services/supports liked to this protective factor involved isolated individual referrals to classes for parents with children 0-4 and 5 and older with community resources and partners.

The following service requests associated with the **social and emotional competence of youth** protective factor: After School Enrichment, Counseling for Child, Family Counseling, Homework Help, Summer Program, Teen Activity and Tutoring for Child. Among the 163 services and supports requested, 75 (46%) were associated with structured teen activities/events. These Teen Activity events are meetings of the Youth Equity Council which was developed from the Community Leadership and Equity grant. Partnering with Proximity People, students between 15 and 25 years old worked on personal and community development activities such as community food deserts, littering, and personal bios. Homework help was provided in event/group settings 45 times, followed by individual tutoring of student patrons (N=17), the provision of counseling to families (N=13), and summer program participation (N=8). There were isolated provisions of after school enrichment activity events (N=3) and individual counseling for a child (N=2, not highlighted in Table 5).

Table 5 details the three service activities requested and delivered in 2021 associated with the **social connections** protective factor. These include the Community Walk (n=394 participants; represents

duplicate patron count as walks are frequent throughout the year), community events (n=56 participants), and activities for families (n=3). The Community Walk is a daily walk open to all patrons to join a leisurely walk-through nearby neighborhood. One of the largest community events was our Mayday Celebration. This event featured free food, community vendors, a Maypole activity, and a bounce house.

Table 5: Distribution of Services and Supports to Individual Patrons (Individual or Event-based) at NorthStar FRC in 2021				
Protective Factor and Services		Service Receipt Method		Total
		Individual	Event	
Concrete Supports	School Supplies	12	376	388
	Computer/Printer/Copier Use	118	0	118
	Clothing Assistance	97	16	113
	Health Events	0	108	108
	Fax Use	56	0	56
	Flyer/Calendar	52	0	52
	Housing/Rent Assistance	48	0	48
Family Functioning / Resiliency	Job/Employment Assistance	24	0	24
	Health/Medical Information	6	0	6
	Unemployment Benefits-Assistance	4	0	4
	Tutoring for Adult	3	0	3
	GED Classes	0	3	3
Parenting and Child Development	0-4 Parenting Classes / Information	1	0	1
	5 and Up Parenting Classes / Information	1	0	1
Social and Emotional Competence of Youth	Teen Activity	0	75	75
	Homework Help	0	45	45
	Tutoring for Child	17	0	17
	Family Counseling	13	0	13
	Summer Program	0	8	8
	After School Enrichment	0	3	3
Social Connections	Community Walk	0	394	394
	Community Events	0	56	56
	Community Meeting	0	16	16
	Activities for Families	3	0	3

Service Delivery and Providers

As denoted earlier, revisions to the Community Module Data System were made in 2021 to aid (in part) with a more effective and detailed itemization of service delivery and provider indicators associated with each service request. These changes were made in July with accompanying training of staff at NSFRC associated with data entry and management functions. Given that these data elements/variables were created more than halfway through the calendar year, a review of findings from existing data is not fully representative of summary trends for 2021.

For example, for the 1,646 service requests, information related to whether requested services and supports were delivered exists for 1,197 requests (or 72.7% of 2021 service requests). Regardless, the delivery rate for the 1,197 requests (with available valid data)[7] was 99.6% (n=1,192) (provision of service on-site and/or action taken to secure the service or support from partner providers). There were only 5 instances of service requests that were documented as not delivered because the patron did not meet requirements for the requested service (n=1), service was not available (n=1), and "other" reasons (n=3).

Among the 1,192 delivered services/supports, 1,141 (95.7%) were provided on-site by NSFRC staff or community partners, 33 involved the provision of information/resources, with an additional 12 active referrals to community partners off-site; 8 of which were to the United Way of Suwannee Valley and the remainder to Meridian Behavioral Health Care, and Columbia County Housing Authority.

NSFRC does not yet have many partners that come onsite each month, although this is a recognized opportunity for growth and improvement to provide more in-person, onsite services, and programming. Staff from Lake Shore Hospital Authority did provide onsite presence for some time during clothing closet giveaways but staffing restraints within their organization made this no longer possible. Staff from Tobacco Free Florida have also set up a table with smoking cessation materials on display for a week. Due to the fact that many of NSFRC's partners worked remotely because of COIVD-19 concerns, there was not many opportunities to create a significant on-site offering of services/ programming at NSFRC. NSFRC's community support is seen clearly through providers showing up to table or teach at community events. Most events have at least 5, but some over 20 providers available to share resources with the community. The Columbia County Health Department, Lake City Police Department, Three Rivers Legal Services, United Way of Suwannee Valley, Meridian Behavior Healthcare, UF IFAS, Tobacco Free Florida, Lake Shore Hospital Authority, State Farm Insurance, First Federal, Pregnancy Care Center and Florida Blue are just some of the names that have provided ongoing support for community events.

Individual Patrons as Unit of Analysis

As denoted earlier, each individual patron is provided a unique "ClientID" number within the Community Module Data System upon making their first service/support request. Patrons are asked to sign in upon subsequent visits; this is a voluntary activity that assists the NSFRC in identifying service trends and associated needs of individual patrons, select households, and the community at large. However, services and supports are provided to patrons regardless of their willingness to identify themselves during the sign-in process when making each service request. Additionally, patrons are not given a ClientID if their account is not considered "complete", including First Name, Last Name, Date of Birth, Gender, Race & Ethnicity, and Zip Code. Subsequently, there may not be a ClientID number affiliated with every service request documented within the Community Module Data System. For example, in 2021, among the 1,646 service requests, "ClientID" numbers are not affiliated with 417 of these requests[8]. Regardless, "ClientID" numbers exist for 74.7% of all service requests for 2021 at the NSFRC.

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[7] There were 344 requests made when service/support delivery was not being documented in the Community Module System. There was additional missing data on delivery status associated with 105 requests.
[8] It is unknown if the patrons affiliated with these service requests are among those identified with other service requests and, subsequently how many non-duplicated counts of patrons are represented by these 417 requests. Should this number of patrons parallel the non-duplicated rate affiliated with data with known Client IDs (where the ratio of known non-duplicated count of patrons to their service requests is 456/1,229 or .371), then it might be

These data allow for the analyses of service trends for a subgroup of a non-duplicated count of patrons. The remaining findings relate to a non-duplicated count of patrons with ClientID's linked to 1,229 service requests. In sum, 1,229 service requests were made by 456 individual patrons with ClientID's (non-duplicated count); these patrons represent approximately 75% of all service requests received by NSFRC in 2021.

Table 6: Number and Percentage of Patrons Making Select Service Requests in 2021		
Annual Service Requests	Number of Patrons	Percent of Patrons
1	327	71.7
2	48	10.5
3	26	5.7
4	16	3.5
5	6	1.3
6 to 10	18	3.9
11 to 15	6	1.3
16 to 20	2	0.4
21 to 30	4	0.9
31 to 50	1	0.2
51 to 100	0	0.0
100 +	2	0.4
Total	456	100

The number of service requests across this subgroup of patrons ranged from a low of 1 to a high of 127 during the year with an average of 2.7 service requests per patron. In total, 71.7% (n=327) patrons made 1 service request during 2021, with an additional 16.2% (n=74) making 2 or 3 requests (see Table 6) with 96.7% of all patrons making between 1 and 10 service and support requests in 2021.

A summary of the average and range of service requests across protective factor categories for the total number of patrons (n=456) is denoted in Table 7. Although patrons on average make 2.7 service requests this first year, this average is influenced by the need and utilization of concrete supports and services offered at NSFRC. On average, patrons made 1.51 requests for **concrete services and supports** in 2021 (see Table 7) with 87.9% of all patrons making at least one request for concrete services and supports (see Table 8). In total, 66.9% (n= 305) of all patrons made one request for concrete services and supports, 17.1% (n=78) made between 2 and 5 requests, 2.6% (n=12) made between 6 and 10 requests, and 1.3% (n=6) made more than 10 requests (between 11 and 28) in 2021.

On average, patrons made 0.27 service requests in 2021 for services related to promotion of the **social and emotional competence of youth** (see Table 7), 83.3% of all patrons did not make any request for services for this protective factor (see Table 8). It is important to note only 9.2% (n=42) of the unduplicated patron count are eligible to receive services that promote the **social and emotional**

conjectured that an additional 155 patrons are possibly represented by these 417 service requests (where 417 x .371=155). This is a potential notable amount, findings in this section of the report are qualified by this fact.

competence of youth as these services are intended for children. However, caregivers can request these services for their children.

The low average annual rates per patron for services linked to the **family functioning/resiliency** (0.09 requests) and the **parenting and child development** (0.004 requests) protective factors in 2021 are impacted by the percentage of patrons that did not make any requests for these services (94.1% and 99.6%, respectively) (see Table 8). There were only 27 and 2 patrons that requested services associated with family functioning/resiliency and the parenting and child development (respectively). There were 28 (6.1% of all) patrons that sought services associated with promoting **social connections** of which 17 sought these services once in 2021 (see Table 8). The average number of social connection services and supports across all patrons (Average=0.82 requests, see Table 7) is skewed given select outliers. For example, one patron is documented to have 99 social connection service requests and another 121 in 2021. For each of these patrons, they participated in community walks on 98 and 120 occasions (respectively).

Table 7: Average Number of Service Requests —Total and Across Protective Factor Categories

Service Category	Average	Grouped Median	Range	Std. Deviation
Total Service Requests	2.700	1.34	1-127	8.38
Concrete Services and Supports	1.510	1.12	0-28	2.18
Family Functioning/Resiliency	0.090	0.06	0-5	0.43
Parenting and Child Development	0.004	0.00	0-1	0.07
Social and Emotional Competence of Youth	0.270	0.17	0-15	1.09
Social Connections	0.820	0.06	0-121	7.83

Table 8: Number and Percentage of All Patrons (N=456) Making Select Service Requests in 2021 Across Protective Factor Categories

Annual Service Requests	All Protective Factors	Concrete Services and Supports	Family Functioning / Resiliency	Parenting and Child Development	Social and Emotional Competence of Youth	Social Connections
0	0 (0.0%)	55 (12.1%)	429 (94.1%)	454 (99.6%)	380 (83.3%)	428 (93.9%)
1	327 (71.7%)	305 (66.9%)	19 (4.2%)	2 (0.4%)	61 (13.4%)	17 (3.7%)
2	48 (10.5%)	48 (10.5%)	4 (0.9%)	0 (0.0%)	7 (1.5%)	2 (0.4%)
3	26 (5.7%)	15 (3.3%)	3 (0.7%)	0 (0.0%)	5 (1.1%)	1 (0.2%)
4	16 (3.5%)	10 (2.2%)	1 (0.2%)	0 (0.0%)	1 (0.2%)	0 (0.0%)
5	6 (1.3%)	5 (1.1%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.2%)
6 to 10	18 (3.9%)	12 (2.6%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.2%)
11 to 15	6 (1.3%)	5 (1.1%)	0 (0.0%)	0 (0.0%)	2 (0.4%)	0 (0.0%)
16 to 20	2 (0.4%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
21 to 30	4 (0.9%)	1 (0.2%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (0.7%)
31 to 50	1 (0.2%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.2%)
51 to 100	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.2%)
100 +	2 (0.4%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (0.2%)

Patron Demographics

When demographic characteristics are observed (see Figure 5), the age group most represented (the modal group) are those aged 5 through 17 (n=191 or 42.7%)[9]. Within this group of patrons, the average age is 10.9 years with 62.3% aged 10 through 17. In contrast with other PSF Resource Centers, the NSFRC has a larger proportion of patrons that are children and youths. The modal group represented at three Gainesville sites are patrons aged 18 through 45 (Perry et al, 2022a, 2022b, & 2022c). However, this distribution is impacted, in part, by one well attended event that targeted this age group. As noted earlier, the School Supply Giveaway event on August 8, 2021, attracted 376 patrons of whom 236 patrons provided information that allowed them to be documented as part of a non-duplicated count of patrons. Another 140 patrons received supports without identifying themselves. Among the 236 patrons, 136 were between the age of 5 and 17 for whom this event was the only service or support received in 2021 for 125 children/youth. Thus, of the unique 191 patrons 5-17 served in 2021 (see Figure 5), 125 (65.4%) attended this one event.

The next age group most represented are adults between 18 and 45 (n=131, 28.8%), those 46 through 64 (n=76 or 16.7%), followed by seniors 65 and older (n=38, 8.4%), and children 4 and under (n=19, 4.2%). Figure 5 does not include 1 patron who did not identify their age (i.e., missing data).

Figure 5: Total Number of Patrons Across Age Groups (N=455, Non-Duplicate)
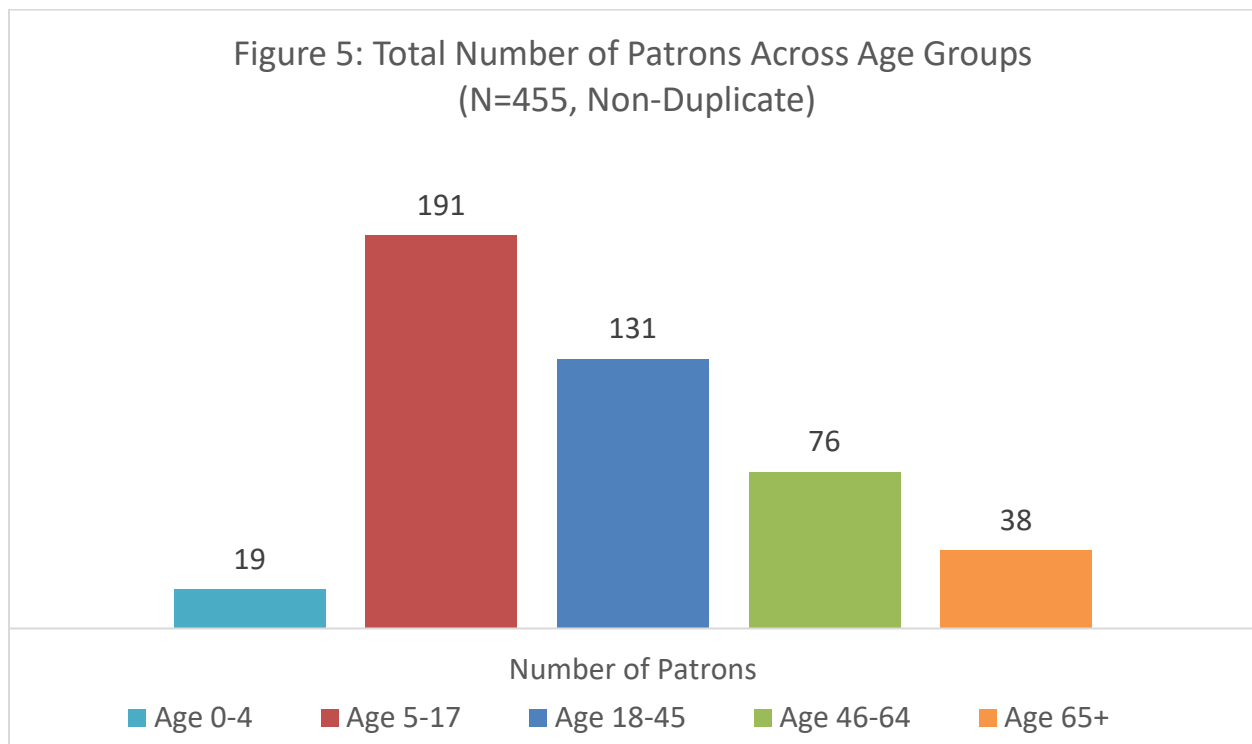
Supplemental analyses explored the number of unique/individual visits associated with patrons within each age group and the likelihood of these patrons returning to the NSFRC for services and supports after a first visit during 2021.

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[9] Please note that since the age of a patron may change over the course of the year and time frame for which they requested services, the age used for this analysis was the patrons' age at time of the first service request in 2021.

Findings in Table 9 identify patrons within the 46-64 age group to have the highest average number of unique/individual visits (5.87) to the NorthStar FRC, followed by patrons aged 65 and over (average = 2.29), 18-45 (average = 2.16), 5-17 (average = 1.31), and those between 0-4 years of age (average = 1.00). The high average number of return visits of those 46-64 is skewed by select outliers of patrons with high visit counts, hence the large standard deviation (SD = 319.14) in the distribution of average number of revisits/returns to the NSFRC. Many of the daily walkers at NorthStar FRC are retired, placing them at the top of frequent visitors to the center. When the percentage of patrons that make at least one return visit to NSFRC is examined in 2021 (see Table 9), the highest percentage of patrons revisiting NSFRC are among those 65 and older (42.1%), followed by those aged 18-45 (30.5%), those aged 46-64 (26.3%), those 5-17 (12.0%), and those 0-4 years of age (0.0%). In total, 21.8% of all patrons (identified non-duplicated count) returned at least once to NorthStar FRC for services and supports in 2021. A series of analyses revealed statistically significant differences in the average number of unique/individual visits and the distribution of number/percentage of those patrons likely to return to NSFRC in 2021[10].

Table 9: Average Number of Unique Visits and Percentage of Patrons Returning to NorthStar FRC Across Age Groups in 2021 (N=455)

Age Group	N	Mean / Average	Std. Deviation	Std. Error	Minimum Visits	Maximum Visits	Number (%) Returning
Age 0-4	19	1.00	0.00	0.00	1	1	0 (0.0%)
Age 5-17	191	1.31	1.49	0.11	1	15	23 (12.0%)
Age 18-45	131	2.16	3.61	0.32	1	28	40 (30.5%)
Age 46-64	76	5.87	19.14	2.20	1	127	20 (26.3%)
Age 65+	38	2.29	2.31	0.38	1	11	16 (42.1%)
Total	455	2.39	8.26	0.39	1	127	99 (21.8%)

Given the number of age groups (5) and variation in average visits (and their standard error) and likelihood (percentage) to return NSFRC in 2021, differences between each age group were more closely examined (see Table 10)[11]. Findings in Table 10 suggest that observed differences in the average number of revisits/returns to NSFRC are statistically significant between those aged 0-4 and two other age groups, those between 18-45 (Tests Statistic= -68.68, p=.032) and those 65 and older (Tests Statistic= -96.18, p=.003). Although more patrons aged 5-17 were served in 2021 than any other age group, the average number of visits by this age group (1.31, See Table 9) was significantly lower (see Table 10;

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[10] Initial ANOVA models (fixed and random effects) were run examining the average number of unique/individual visits to the NSFRC across age groups. Although the result was statistically significant (F=4.47, df=4, p=.001), the sample was unbalanced with a violation of the homogeneity assumption (Levene Statistic=14.61, p<.001). Given such, a parallel non-parametric test was done (Independent-Samples Kruskal-Wallis Test) that proved significant (Test Statistic=33.08, df=4, p<.001, asymptotic 2-sided test), suggesting the observed distribution in the average number of unique visits across age groups is significantly different.

[11] The Kruskal-Wallis Test with Pairwise Comparisons was computed using asymptotic significances (2-sided tests) and significance levels of .05 for hypotheses testing. Each row in Table 8 summarizes a test of the null hypothesis that the Sample 1 and Sample 2 distributions are the same. Adjusted significant tests should be used where the adjusted p<.05 would require a rejection of the null hypothesis.

using adjusted significance with the Bonferroni correction) than the average number of visits by those age 18-45 (Mean= 2.16, Tests Statistic= -42.49, p=.001), 46-64 , (Mean= 5.87, Tests Statistic= -37.88, p=.032) and those 65 and older (Mean= 2.29, Tests Statistic= -70.00, p<.001).[12]

Table 10: Pairwise Comparisons of Age Groups in Terms of Number of Unique Visits/Revisits to NorthStar FRC in 2021 (N=455)

| Sample 1 | Sample 2	Test Statistic	Std. Error	Std. Test Statistic	Sig.	Adj. Sig.*
Age 0-4 | Age 5-17	-26.19	22.81	-1.15	0.251	1
Age 0-4 | Age 46-64	-64.07	24.32	-2.63	0.008	0.084
Age 0-4 | Age 18-45	-68.68	23.28	-2.95	0.003	0.032
Age 0-4 | Age 65+	-96.18	26.64	-3.61	<.001	0.003
Age 5-17 | Age 46-64	-37.88	12.86	-2.95	0.003	0.032
Age 5-17 | Age 18-45	-42.49	10.76	-3.95	<.001	0.001
Age 5-17 | Age 65+	-70.00	16.84	-4.16	<.001	<.001
Age 46-64 | Age 18-45	4.61	13.67	0.34	0.736	1
Age 46-64 | Age 65+	-32.12	18.84	-1.70	0.088	0.882
Age 18-45 | Age 65+	-27.51	17.47	-1.57	0.115	1

* Significance values have been adjusted by the Bonferroni correction for multiple tests.
Highlighted findings indicate statistically significant differences in average number of visits between compared age groups.

When the gender of patrons requesting services in 2021 is examined (see Figure 6), the majority self-identify as female (n= 260, 57.0%) followed by males (n= 194, 42.5%). There were two patrons that preferred not to answer this question.

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[12] **Understanding Statistical Significance**: In evaluation and research studies, statistical analyses are frequently done to objectively understand the distribution and relationship among and between different variables of interest and/or populations and/or subgroups. Different statistic tests/models exist for different hypotheses and for different types of variables and given assumptions and knowledge about how the data were collected and how representative the data is of specific populations or subgroups. Most statistical tests are structured to help determine whether a null hypothesis should be accepted or rejected. A null hypothesis is an assertion that there are no significant differences, effects, and/or relationships between select variables and/or populations under study (using available/observed data). A p-value (or probability-value associated with each statistical test) aids in decisions about whether to accept or reject a null hypothesis and is, thus, a measure of statistical significance. The p-value represents the probability that observed results (or those more extreme/greater) would happen if the null hypothesis was true. Research and scientific norms typically use a p-value < .05 as a threshold standard for rejecting the null hypothesis for a specific statistical test, thus accepting an alternative hypothesis related to what is being studied making the finding statistically significant.

Figure 6: Gender of Patrons (Non-duplicate) requesting Services from NorthStar FRC in 2021 (n=456)
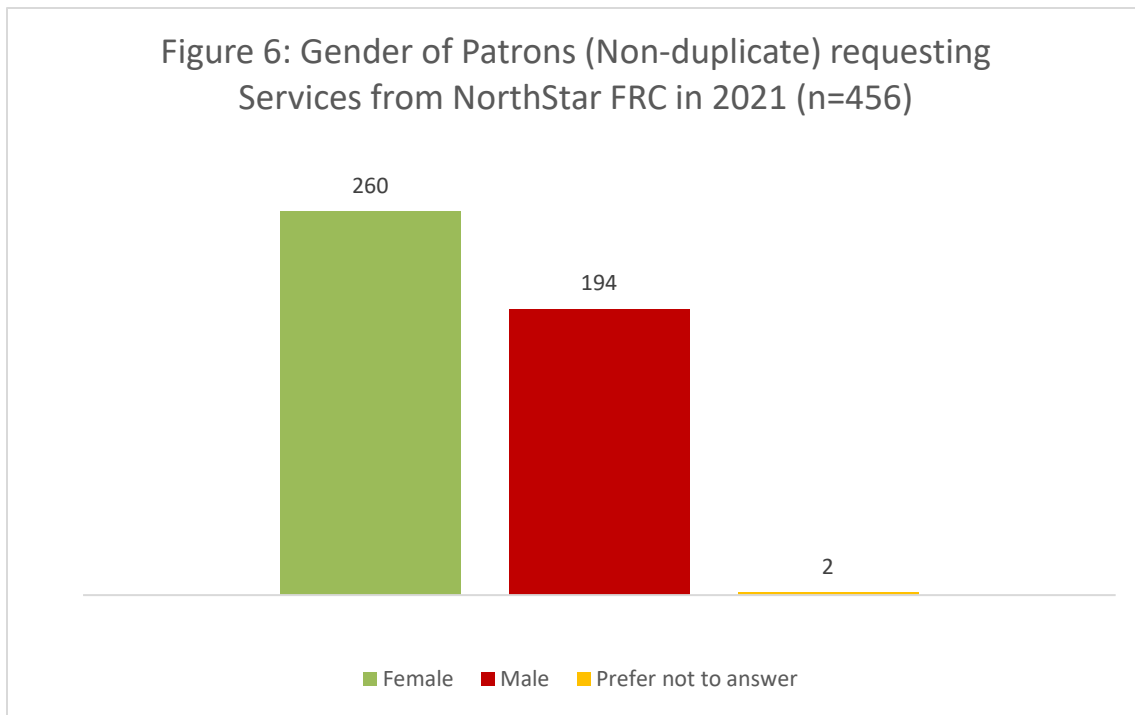
Black or African American (Non-Hispanic) patrons represented 66.4% of the total patrons seeking services in 2021 (see Table 11). An additional 124 (27.2%) patrons were White (Non-Hispanic origin) followed by 15 (3.3%) self-identified as Hispanic, Latino, or Spanish origin. NorthStar FRC is in the 32055 zip code. This was the preliminary area of focus for the NorthStar FRC when the site was first considered; however, speculation suggested that the geospatial area would be more focused as formal implementation of activities unfolded in the first year. Should zip code data from the Census Bureau be considered[13], the ethnic/racial distribution of the population in the 32055 zip code is 63.4% White (non-Hispanic origin), 30.6% Black or African American (non-Hispanic origin) and 3.6% Hispanic, Latino, or Spanish origin perhaps suggesting an underrepresentation of White patrons requesting service at NSFRC and potential over representation of Black or African American (Non-Hispanic) patrons. However, caution needs to be exercised prior to making such an assertion. The geospatial area served is a broad estimate based on limited data related to the addresses of intended patrons that would seek offered services and respond to initiatives promoted by NorthStar FRC during its first year of operations. It is hoped the planned utilization by PSF and its Resource Centers (beginning in late 2022) of geo-spatial software to help better identify community need and service utilization trends, more valid estimates of the representative nature of patrons requesting service (and variation of need) across demographic characteristics can be made.

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[13] 2020 American Community Survey 5-Year Estimates Data Profile; available at: https://api.census.gov/data/2020/acs/acs5/profile

Table 11: Race and Ethnicity of Patrons (N=456) Requesting Services at
NorthStar FRC in 2021

Race/Ethnicity	Number of Patrons	Percent of Patrons
American Indian or Alaska Native	3	0.7
Asian	3	0.7
Black or African American - Non-Hispanic	289	63.4
Hispanic, Latino, or Spanish origin	15	3.3
White - Non-Hispanic origin	124	27.2
Multiracial	6	1.3
Other	5	1.1
Prefer not to answer	11	2.4
Missing	0	0.0
Total	456	100

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Suggested Citation: Perry, R., Lancaster, C., Mobley, P., Merritt, S., Spoliansky, S., & Edelman, P. (2022). *The NorthStar Family Resource Center: 2021 Profile of Services and Supports.* Tallahassee: Institute for Child and Family Services Research.