



PARTNERSHIP FOR
**STRONG
FAMILIES**

*Family
Resource Centers*

FINAL REPORT

Community Collaborations to Strengthen and Preserve Families Grant

2019-2024



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Some of the quotes referenced in this report have been lightly edited for clarity, grammar, or punctuation. These edits do not alter the original meaning of the statements. Access to the full, unedited source materials, can be found in reports related to the [Strengthening Families Self-Assessment](#) and [Patron Feedback Group](#).

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List of Acronyms

ACYF - Administration on Children, Youth and Families

CFRC - Columbia Family Resource Council

CPLRC - Cone Park Library Resource Center

CRC - Community Research Coordinator

CSNA - Community Strength and Needs Assessment

CSSP - Center for the Study of Social Policy

DCF - Department of Children and Families

FRC - Family Resource Center

FSFN - Florida Safe Families Network

LPRC - Library Partnership Resource Center

NSFRC - NorthStar Family Resource Center

PSF - Partnership for Strong Families

RCAC - Resource Center Advisory Council

SWAG FRC - SWAG Family Resource Center

Executive Summary: Final Report

Partnership for Strong Families

Community Collaborations to Strengthen and Preserve Families Grant

Project Period: October 1, 2019 – September 29, 2024

Introduction

In 2019, Partnership for Strong Families was one of nine sites chosen throughout the nation to receive the Community Collaborations to Strengthen and Preserve Families grant.

This competitive process presented the perfect opportunity for our team to envision how to strengthen the services provided at our Family Resource Centers (FRCs) through a rigorous evaluation as well as expand our FRC Model to Lake City, Florida; a goal that we had been working toward for several years.

This grant brought \$2.5 million dollars over a five-year period.

The goals of the project were to:

- Evaluate the three existing FRCs in Gainesville
- Utilize the data and information collected in the evaluation activities to refine and improve the FRC model
- Expand the network to develop and implement a new FRC in Lake City that replicates features of the Gainesville FRCs, utilizing the Protective Factors Framework as an organizing principle for service delivery

Project Successes

- **Established the Resource Center Advisory Council (RCAC):** A diverse stakeholder group in Lake City guided the development of services at the new NorthStar Family Resource Center (NSFRC), ensuring they met locally identified needs.
- **Opened the NorthStar Family Resource Center (NSFRC):** Successfully expanded the FRC model to Columbia County. The center provides academic help, job readiness support, internet access, wellness programs, and a food/clothing pantry.
- **Improved Data Infrastructure via System Enhancements:** Upgraded data tracking systems by simplifying data entry, adding demographic fields, and training staff. This led to better service targeting, outcome tracking, and evaluation capabilities.
- **Refined Services Through SFSA and Patron Feedback Groups:** Used the Strengthening Families Self-Assessment and ongoing patron feedback to identify action items for service improvements, fostering continuous quality enhancement.

Utilization of the Protective Factors

In 2021, PSF fully adopted the CSSP Protective Factors as the primary framework for the Family Resource Centers. Developed by the Center for the Study of Social Policy (CSSP, 2015), this framework includes the following protective factors: Concrete Supports in Times of Need, Social Connections, Social and Emotional Competence of Children, Knowledge of Parenting and Child Development, and Parental Resilience.

At PSF, every service offered in our Family Resource Centers is tied to at least one of these five Protective Factors, which when present in families are shown to reduce the likelihood of abuse or neglect.

Refining Practice through Community Based Participatory Research

Prior to opening the NorthStar Family Resource Center, the **Resource Center Advisory Council** helped develop the **Community Strengths and Needs Assessment**, in which community members shared ideas as to what programs and services would be most beneficial.

The **Strengthening Families Self-Assessment** (SFSA) process evaluated our Resource Centers' practices, programs, and services based on the Protective Factors Framework.

- Each Family Resource Center identified unique teams composed of staff members, volunteers, community collaborators from partner organizations, and Community Ambassadors who utilize services and programs at their respective resource center.
- Action items were developed and categorized into key themes determined by each team and updates are provided, via short infographics, at six-month intervals.
- Action items aided in the continuous quality improvement of FRC operations, as well as services and programs offered.

Two **Patron Focus Groups** were completed at each Family Resource Center

- 8 total focus groups were conducted with 28 total participants, addressing 8 questions.
- A content analysis was conducted by the Evaluation Team addressing 1586 content statements across 36 identified themes.

Key Highlights and Outcomes- Process Evaluation Activities

Strengthening Families Self- Assessment

- Alignment with Protective Factors Framework
 - All Family Resource Centers (FRCs) aligned their services with the five protective factors, particularly excelling in Concrete Support in Times of Need and Social Connections.

- Action Items and Continuous Improvement
 - 18 formal action items were developed across the FRCs through the SFSA process and revisited every six months.
 - Updates led to measurable quality improvements and strengthened services.
- Refinement of Programs and Services
 - SFSA reviews drove changes such as increasing co-located services and broadening youth programming and academic support.
- Use of Community Voice and Stakeholder Participation to highlight value of lived experience and community-driven planning.

Focus Groups

- As part of a broader evaluation effort, the utilization of focus groups, consisting of patrons receiving services and supports at each of the project’s family resource centers, was conducted.
- Although initially identified as “focus groups” within the evaluation plan, the phrase “patron feedback groups” was utilized in an effort to better reflect the engaging and inviting nature of this process.
- Highlighted quotes collected from patrons during this activity:
 - *“When I was in a homeless shelter, that's where I found out about this place. [NSFRC] was an integral part of getting out of the homeless shelter because I was able to use the computer and apply for housing... I was able to get back on my feet because I had access to the Internet and a printer and a notary...I could get everything done that I needed to get done...”*
 - *“My butt would be naked, and I'd be starving if it wasn't for you guys, I'm serious.”*
 - *“I've never walked in here and felt like I wasn't welcome. When I talk to them, they act like they've been there. They act like they're peer-to-peer advocates basically, and I know [staff] hasn't been through half the crap I've been through.”*
 - *“Just coming in and the state of mind you [are] in, not knowing which way to go... they definitely give you direction, and give you a sense of hope, you know? [They] lead you in the right direction.”*

Family Resource Center Community Collaborations

- PSF has built a network of over 100 community partners, including the following as examples:
 - Onsite and/or referral-based services- most common and always free and responsive to the needs of the surrounding community
 - In-kind support, including free or low-cost rent, building maintenance, and repairs provided by County government
 - Financial support of our FRC Network including costs related to personnel, rent, and program supplies from our local, tax-based Children's Trust Alliance
 - Assistance/Education from Feeding Florida with planting, growing and harvesting an amazing community garden.
 - Safe, familiar places for children/families to receive services, including free trauma counseling for children
 - In addition to partners with official agreements, many providers deliver one-time events and provide support through sponsorship, co-event planning, and tabling.

Key Highlights and Outcomes- Outcome Evaluation Activities

Participant Information

- Sample Size: 245 consenting patrons participated in outcome evaluations between 2021–2024.
- Engagement: Participants accessed exponentially more services (e.g., 27.24 Concrete Supports vs. 3.35 for non-participants), indicating higher need and greater FRC familiarity.

Process

- Mixed-Methods Approach: Combined quantitative and qualitative tools
- Surveys Administered:
 - Retrospective and Traditional Protective Factors Survey – 2nd Edition
 - Strengths and Difficulties Questionnaire
 - Family Resource Scale
 - Perceived Stress Scale
- Evaluation Timeline: Surveys and follow-ups every 6 months from March 2021 to June 2024
- Design: Pre/post evaluation, including participant-level and community-level designs with some questions using quasi-experimental and time-series designs

Key Outcomes

- Patrons retrospectively reported FRCs improved family functioning, social support, and caregiver relationships.
- Over time, surveys showed few measurable changes in stress, family resources, or child behavior, likely due to:
 - High needs and complexity of study participants
 - Limited sensitivity and availability of accurate survey tools for this population
- Findings may reflect stabilization, not absence of impact. So, with new stressors, families maintain functioning and use skills.
- Other data (SFSA results, Focus Group Feedback, child welfare trends) support the FRCs' positive role in helping families manage stress and adversity.
- Child Welfare History- Of 245 patrons who agreed to take part in the outcome study, 169 also gave permission for the research team to look up their past involvement with the child welfare system in Florida, using the Florida Safe Families Network.
 - Of those 169 people, 76 (or 45%) had been listed as an alleged perpetrator in at least one case. These cases dated back as far as 2006 and as recently as 2023.
 - Outcomes:
 - Abuse Hotline Calls: Reduced by 50%, from an average of 2.59 calls per patron before FRC engagement to 1.30 calls per patron post-engagement
 - Screened-In Hotline Calls: Reduced by 64%, from 2.18 calls per patron to 0.78 calls per patron post-engagement
 - Abuse Hotline Calls: Reduced by 50%, from an average of 2.59 calls per patron before FRC engagement to 1.30 calls per patron post-engagement
 - Screened-In Hotline Calls: Reduced by 64%, from 2.18 calls per patron to 0.78 calls per patron post-engagement

Sustainability

- Diversified Funding to Support Operations
 - The Children's Trust of Alachua County (CTAC) expanded funding in December 2023 to cover most operating costs for the two Gainesville FRCs.

- Additional grants include, but are not limited to:
 - LSF Health Systems Opioid Abatement Grant – \$167,466 (2024–2025) for NSFRC operations and a passenger van
 - United Way of Suwannee Valley – \$15,836 (2024–2025) for emergency financial support
 - CAPP Grant – \$18,237 annually (2024–2027) from Alachua County to support Gainesville FRCs
 - Community Foundation of North Central Florida- \$300,000 (2025-2028) to support the TCCRC (not part of this project but a part of PSF’s Network of FRCs)
 - United Way of North Central Florida- \$40,000 (2025-2026) for emergency financial support
- These diverse funding streams demonstrate our commitment to maintaining the accessibility and quality of its services, with the ability to maintain all FRCs operating post-grant funding.

Recommendations for Future Initiatives

- **Engage Communities Through Trust-Building**
Expansion efforts must be rooted in genuine relationships and deep understanding of local needs.
- **Hire from Within the Community**
Employing local staff enhances cultural responsiveness, credibility, and community alignment.
- **Ensure Strong Financial Oversight**
Tools like expenditure trackers and regular financial reviews help maintain transparency and budget discipline.
- **Vet Partnerships Thoroughly**
Formal collaborations should be evaluated for alignment, risks, and clarity of expectations to avoid resource misallocation.
- **Use Flexible and Inclusive Research Practices**
Community-Based Participatory Research (CBPR) must be adapted to accommodate participant schedules, tech literacy, and confidentiality concerns.
- **Strengthen Data Infrastructure**
Investing in robust data systems and data-sharing agreements is critical for effective program evaluation and continuous improvement.

Conclusion

The Community Collaborations to Strengthen and Preserve Families grant allowed Partnership for Strong Families to strengthen and expand its Family Resource Center (FRC) model, resulting in both improved services and broader community reach. Over five years, PSF evaluated and enhanced its three Gainesville FRCs and successfully launched the NorthStar FRC in Lake City, guided by community input and the Protective Factors Framework.

Through tools like the Strengthening Families Self-Assessment and patron focus groups, PSF implemented meaningful service improvements and supported families. Notably, data collected showed significant declines in abuse hotline calls post FRC- engagement.

Sustainability was ensured through strong partnerships and diversified funding, ensuring that PSF's FRC network will continue to operate beyond the grant period. This initiative demonstrates how data-informed, community-driven approaches can promote family resilience and long-term well-being.

Section 1: Introduction

Partnership for Strong Families (PSF) is the lead community-based care agency under contract with the Florida Department of Children and Families. Since 2003, PSF has provided comprehensive child welfare services across 13 North Central Florida counties and has been leading innovative approaches to strengthen families and increase the presence of protective factors for more than a decade in Alachua County. Beginning in 2007, PSF started developing a network of Family Resource Centers (FRC) that emphasizes a strengthening families approach while utilizing a Protective Factors Framework to provide prevention services and supports to families. 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. Every service provided is free and responsive to the needs of the surrounding community as identified by community partners/stakeholders and parents/household members (referred to as patrons) within the targeted areas.

PSF was awarded a five-year cooperative agreement by The Children's Bureau, an office of the Administration on Children, Youth, and Families (ACYF) in the U.S. Department of Health and Human Services.

This agreement was called the Community Collaborations to Strengthen and Preserve Families (Funding opportunity number: HHS-2018-ACF-ACYF-CA-1351; award number: 90CA1868-01-00).

The total award was approximately \$2.5 million over the five-year project period. The grant

period started on September 30th, 2019, and ended on September 27th, 2024.

The ultimate goals of the project were to 1) **evaluate** the three existing FRCs in Gainesville; 2) utilize the data and information collected in the evaluation activities to **refine** and improve the FRC model; and 3) **expand** the network to develop and implement a new FRC in Lake City that replicates features of the Gainesville FRCs, utilizing the Protective Factors Framework as an organizing principle for service delivery.

To accomplish the first goal the project employed quantitative and qualitative assessments of each of PSF's FRCs. These activities included:

1. Strengthening Families Self-Assessment tool and process
2. Feedback Groups for patrons and providers
3. Review of Service Delivery and Utilization
4. Review of formal Collaborative Agreements
5. Review of Advisory Councils
6. Utilization of participant surveys

To achieve the second goal of refining and improving the FRC model, the project utilized data from both the SFSA process and patron feedback groups. The SFSA process led to the creation of action items for each FRC, which were revisited and updated every six months, resulting in a total of 18 reports over time. In addition, two patron feedback groups were conducted at each FRC, providing a rich collection of qualitative data that helped inform ongoing adjustments and improvements to the FRC model.

To accomplish the third goal an advisory council was established to determine community context and garner support for the creation of a FRC in Columbia County, FL. A Community Strengths and Needs Assessment was deployed to determine community context and needs. With the community's support and assessment results, PSF opened the NorthStar FRC (NSFRC) in Lake City, FL on March 18th, 2021.

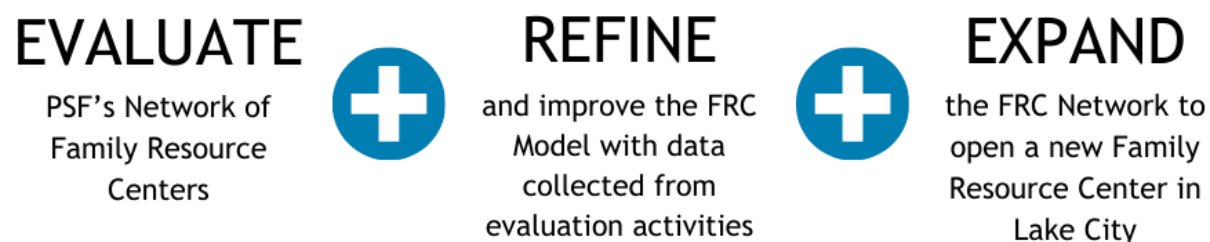
The project aimed to serve patrons accessing services at our FRCs with a focus on caregivers and youth. The FRCs include the Cone Park Library Resource Center (CPLRC), the Library Partnership Resource Center (LPRC), the SWAG Family Resource Center (SWAG FRC), and the NorthStar Family Resource Center (NSFRC). The project's geographic catchment area was the 5 Gainesville, FL zip codes (32601, 32609, 32607, 32608, 32641) and 2 Lake City FL zip codes (32025, 32055).

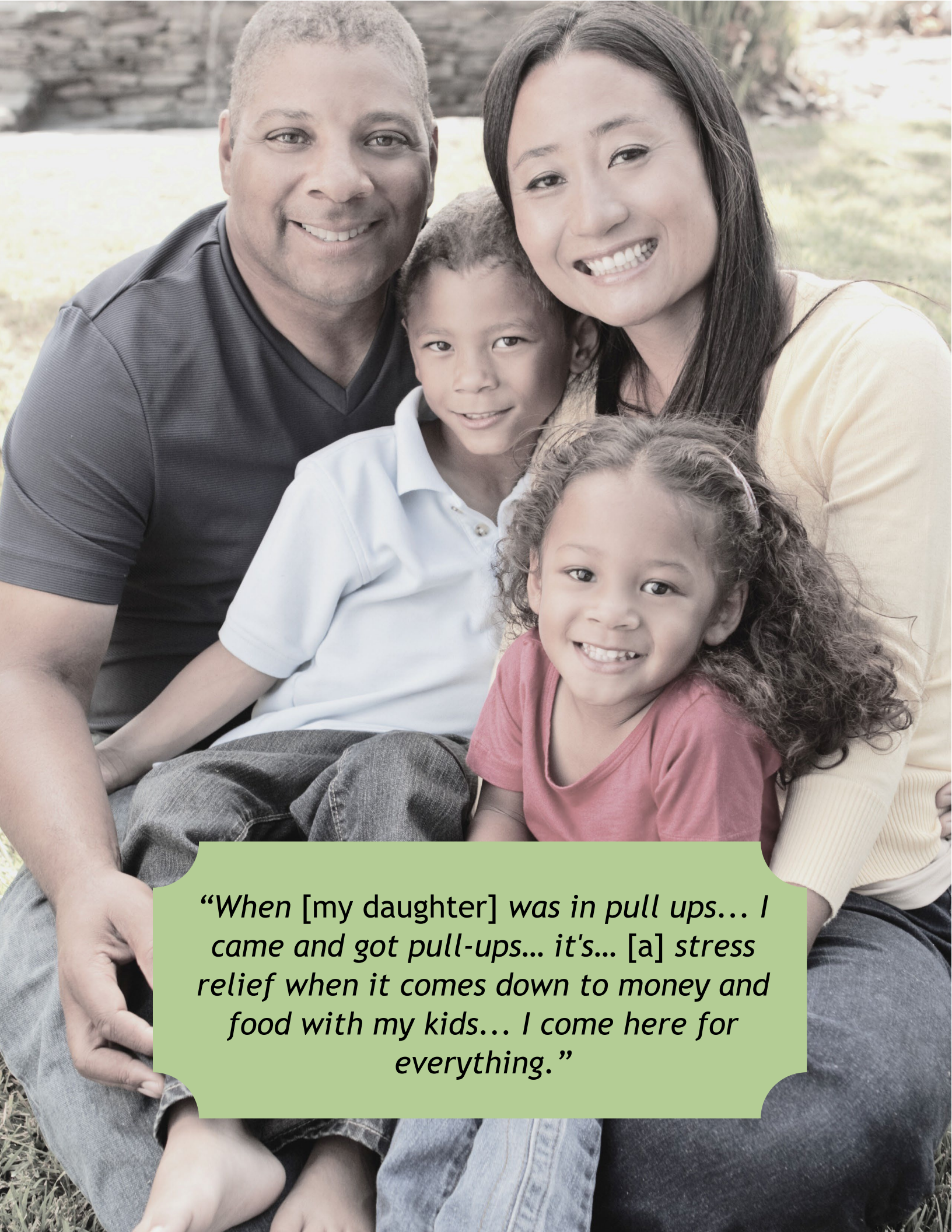
PSF's network of FRCs (including the NSFRC) are strategically implemented within neighborhoods and communities with families who are experiencing increased risk factors and a disproportionate concentration of past involvement with the child welfare system. Services at these FRCs are structured (and classified) in alignment with a Protective Factors Framework.

Community Research Coordinators (CRC) were hired to enroll participants and support patrons at each of these locations.

This report serves to provide a comprehensive summary of the project's key activities, lessons learned, and future plans.

**Figure 1: Community Collaborations to Strengthen and Preserve Families Project
Main Purpose/Goals**





“When [my daughter] was in pull ups... I came and got pull-ups... it's... [a] stress relief when it comes down to money and food with my kids... I come here for everything.”

Section 2: The Community Collaborations to Strengthen and Preserve Families Grant

The Community Collaborations to Strengthen and Preserve Families plan emphasizes a collaborative, community-based approach to supporting children and families. Similarly, PSF's Resource Center Model is founded on the principle that services offered at our Resource Centers must be tailored to meet the unique needs of the neighborhoods and communities they serve.

The primary goals of this grant are to evaluate the three family resource centers in Gainesville, FL, and to develop and implement a new family resource center in Lake City. PSF has focused on enhancing our network of Resource Centers and successfully launched the NorthStar Family Resource Center in Lake City in March 2021. This center provides families with strength-based services and resources designed to keep every child safe from abuse and neglect. Through the project's implementation and evaluation activities, we identified and applied several improvements, allowing us to further refine and strengthen our service model.

Section 2-1: Target Population

The project aimed to serve individuals and families using a network of FRCs (including the NSFRC) strategically implemented within neighborhoods and communities with families experiencing increased risk factors and a disproportionate concentration of past involvement with the child welfare system. The project's initial geographic catchment area includes the five Gainesville, FL, zip codes (32601, 32609, 32607, 32608, 32641) and two Lake City, FL, zip codes (32025, 32055), as detailed in Table 1 and illustrated in Figure 2.

The first two identified zip code areas of significant concern, identified as "hotspots," are 32601 and 32609. These areas have historically experienced some of the highest levels of child maltreatment and shelter stays in both Alachua County and Florida, particularly affecting the African American and Black population (Casey Family Programs, 2016). In response, and with the collaboration of numerous community partners, a range of potential services was developed to address key needs, initially focusing on job readiness, mental health, physical health, and early childhood education.

**TABLE 1: DEMOGRAPHIC INFORMATION FROM SERVICE CATCHMENT AREA AS OF 2018
(PRIOR TO START OF PROJECT)**

Geographic Area	Population	Unemployment	Poverty Rate	Percent of Families below poverty	Children under 5 in poverty	Incidents of child abuse ⁱ
32601	61,896	8%	29%	48%	23%	17
32609	54,865	7%	25%	48%	27%	218
32607	45,492	5%	17%	35%	23%	146
32608	21,307	6%	14%	30%	34%	168
32641	41,822	10%	34%	59%	24%	200
32025	12,959	9%	21%	40%	33%	266
32055	13,888	9%	24%	47%	33%	177

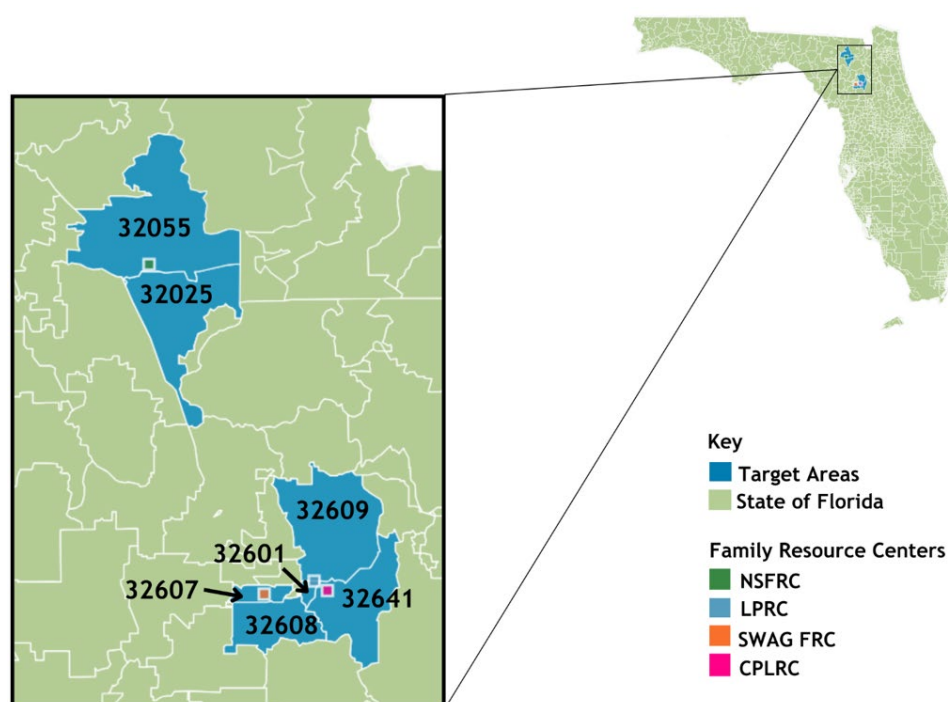
The Library Partnership Resource Center, located within the 32601-zip code, opened its doors to the community in July 2009 and serves as a vital hub for these support services.

The Southwest Advocacy Group was an established entity in the community that had historically worked to improve the lives of residents in southwest Gainesville by conducting needs assessments and advocating with public and private organizations to increase residents' access to resources. They approached PSF about opening a similar center to serve the 32607 and 32608 zip codes. As the area had historically seen high rates of child maltreatment, PSF had a strong interest in strengthening the southwest Gainesville community through collaborative efforts.

With the donation of a building from the Alachua County Board of County Commissioners and tremendous community support, along with financial contributions from various community partners—public and private—including the City of Gainesville, Rotary International, Tower Hill Insurance Agency, Kiwanis, Oelrich Construction, and others, the SWAG Family Resource Center (SWAG FRC) opened its doors to the community in June 2012.

Also in 2012, the Alachua County Library District (ACLD) began planning to open a new branch to serve southeast Gainesville, a historically underserved community. Since southeast Gainesville was considered a “hotspot” due to high rates of reported child maltreatment, PSF eagerly agreed to proceed with this new initiative. The Cone Park Library Resource Center opened part-time in December 2013, and with early indicators of high service utilization, it began operating full-time in May 2014.

Figure 2: Community Collaborations to Strengthen and Preserve Families Geographical Zip Codes



PSF has long recognized the need for increased intervention in Columbia County, the area directly north of Alachua County, to address the rising number of shelters and child maltreatments. While the population of Columbia County is relatively low (68,484 individuals compared to Alachua County's 260,000, according to the Community Opportunity Map (Casey Family Programs, n.d.), progressively increasing maltreatment counts in Columbia County are approaching those of Alachua. The rise in shelter rates in Columbia County is also highly concerning, with a 97% increase over nine years, according to FSFN data. With 120 shelter placements occurring in the 2017-2018 fiscal year, Columbia County had the second-highest number of shelters among the 13 counties served by PSF, trailing Alachua by only 51 shelters.

The development of an FRC in Lake City, utilizing the model framework (modified according to the unique needs of the Lake City community) implemented at the three Gainesville sites, is a major component of this grant. Following early connections with service provision agreements with providers that covered this area, the creation of the Resource Center Advisory Council (RCAC) and the utilization of a needs assessment at the NorthStar Family Resource Center (NSFRC) opened its doors in March 2021.

Section 2-2: Utilization of Protective Factors

A key component of every FRC is PSF's Family Resource Center Model. The PSF Resource Center model is built upon a multi-system collaborative focusing on primary prevention that works toward the ultimate goal of preventing child maltreatment and reducing entries into foster care.

One of the major strengths of the Resource Center model utilized is its strong focus on community collaborations as a means of addressing identified needs in at-risk neighborhoods.

There is a well-established history of collaboration among Resource Centers in Gainesville, and these general principles have been used to develop similar partnerships at the NSFRC. Over time, a network of more than 75 community partners across all sites has been cultivated. These collaborative efforts have been well-documented in various Resource Center reports (for each FRC and PSF), website and social media posts, pamphlets/infographics, news reports, and select publications.

With the help of these collaborative partnerships every service provided at the FRCs is free and responsive to the needs of the surrounding community as identified by community partners/stakeholders and parents/household 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 to benefit some of Gainesville's most at-risk populations.

The historical review (Bernardin et al., 2022) revealed that between 2009 and 2014, services were organized into general categories, including Family Support & Child Development, Health & Safety, and Self-Sufficiency. Between 2014 and 2020, PSF adopted the following protective factors as a framework for the existing Resource Centers' services.

These factors were developed by the Center for the Study of Social Policy (CSSP) and the FRIENDS National Center for Community-Based Child Abuse Prevention (2015, 2011): 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). The historical adoption of a hybrid classification of protective factors (for at-risk and in-risk families) by PSF was guided by discussions, considerations, and feedback from PSF staff and leadership, community partners and collaborators, and consultation with child welfare specialists.

In 2021, PSF fully adopted the CSSP protective factors as the primary framework for the Family Resource Centers. Developed by the Center for the Study of Social Policy (CSSP, 2015), this framework includes the following protective factors: Concrete Supports in Times of Need, Social Connections, Social and Emotional Competence of Children, Knowledge of Parenting and Child Development, and Parental Resilience.

The change in categorization reflects PSF's ongoing focus on refining their Resource Center Model and demonstrates their commitment to using protective factors as the foundational framework for service delivery.

Section 2-3: Integrate and Strengthen FRC Activities

Efforts were made to refine and integrate the Community Module (management information system) for tracking service utilization, activity participation, client characteristics/data, and

outputs and outcomes related to individual patrons. These efforts also focused on ensuring the use of services aligned with fidelity to the protective factor framework.

Additionally, the goal was to integrate collaborative relationships from other FRCs into a unified network that supports sustainability. This includes strengthening service activities within each FRC that are linked to protective factors, fostering meaningful multi-agency and multi-system community collaborations.

One key opportunity for the NSFRC through this grant was the awarding of a supplemental grant for diversity, equity, and inclusion, which further supported the integration and strengthening of activities.

Section 2-3-1: Diversity, Equity, and Inclusion Supplemental Project

The Youth Leadership Council at NorthStar Family Resource Center was established to support and guide program participants with a strong focus on diversity and inclusion, aiming to further develop leadership among teens and young adults. Funded through this grant's supplemental project, the time-limited Community Leadership/Equity Coordinator role (Nov 2021 - Sept 2022) was created to drive this mission. The coordinator developed and coordinated leadership and equity programming for youth by collaborating with Resource Center staff and professionals to implement a comprehensive leadership curriculum.



The Council held several "Let's Talk" events, offering teens and young adults a safe, judgment-free space to discuss their challenges, aspirations, and needs. To enhance these discussions, we collaborated with The Proximity People, an accredited organization specializing in high-touch training, coaching, consulting, and perception services. Their expertise helped structure these events to foster open dialogue and comfort, empowering participants to share openly.

Youth council members also engaged in themed meetings, including spoken word poetry and vision board creation. The creators of Proximity People also provided an Equity and Inclusion training at the PSF headquarters for staff, reinforcing cultural sensitivity.

In April, the Council began an ongoing food desert project to address limited access to fresh produce in their community. Partnering with local farmers who faced excess crop waste, the youth visited farms to collect and distribute fresh vegetables through the Resource Center, making healthy choices more accessible to local residents.



Recognizing the need for mentorship and peer support across ages, Council members began volunteering in homework assistance and

organizing summer activities for youth who attended NSFRC. This expansion reflects the Council's commitment to community and peer leadership.

The YLC program has helped improve the lives of local teens and young adults by inspiring them to use their voices, giving them an engaging social environment with their peers, and developing their leadership skills.

At the close of the project period, participants were given the opportunity to receive professional headshots and create biographies highlighting who they are, what they learned, and what their future goals are.

Attendance ranged from a low of three participants to a high of 33 at the kickoff event. Across all events, 18 unique attendees engaged, with participation ranging from one to 11 events each, averaging five events per attendee. The Council was predominantly female (67%), with 12 girls and six boys. Racial representation included 12 Black students, four White students, and two biracial students.



"I feel welcome and, my grandkids like it, they have fun too when they come and that's a big deal for a caregiver. Because if the kids aren't happy, the caregiver is stressed, trust me."

Section 3: Changes/Disruptions

Over time, this project encountered several changes and disruptions, including adaptations for outreach, meetings and research activities during the COVID-19 pandemic, the closure of the CPLRC, and significant staff turnover.

Section 3-1: Covid-19 Adaptability

This project, awarded in September 2019, was greatly impacted by the COVID-19 pandemic, which began in March 2020. This resulted in some slowing of evaluation and implementation activities, particularly some face-to-face meetings with stakeholders.

Implementation activities, such as the third site visit to the Bring Up Nebraska program, were postponed. Plans to conduct a Community Strengths and Needs Assessment for Lake City, which required direct contact with local individuals and families, were also postponed.

Meetings that had previously been in person had to be postponed, canceled, or conducted virtually via the Microsoft Teams platform while it was not safe for our staff and community partners to meet in person. The implementation team, including the Principal Investigator, Project Director, and CRCs, also began meeting virtually during the worst of the outbreak.

As the cases of sickness began to decrease PSF slowly went back to in person services. While keeping a close eye on CDC recommendations, more in-person services and project activities occurred with safety measures in place.

These measures included routine cleaning, maintaining a six-foot distance, requiring face masks for some events, and asking that sick participants not attend. Several meetings were offered in hybrid format for those who felt attending an in person meeting as too much of a health risk.

Section 3-2: CPLRC Closure

During this project, the implementation target area shifted somewhat following the closure of the Cone Park Library Resource Center (CPLRC) on August 11, 2023. This decision, part of a budget reduction plan by PSF, was driven primarily by unprecedented costs associated with out-of-home care for children. PSF leadership made this decision thoughtfully, with a strong commitment to minimizing impacts on patrons.

In Gainesville, PSF has continued its operations through the Library Partnership Resource Center (LPRC) and SWAG Family Resource Center (SWAG FRC), while services remain uninterrupted in Lake City through the NorthStar Family Resource Center (FRC).

Although the closure did not impact our grant budget or grant-funded staff, it required adjustments to our project's evaluation approach. The CPLRC closure raised questions about the continuity of outcome data analysis for that site. To address these, the Community Research Coordinator (CRC) engaged with all consenting participants before and after the closure to discuss its impact and confirm their willingness to continue with the evaluation.

All evaluation activities completed prior to August 11 are included in our analysis. Although no new process evaluation activities were conducted at CPLRC post-closure, patrons already enrolled in the outcome evaluation were offered the opportunity to continue completing follow-up instruments at six-month intervals. Those who chose to continue could meet with a CRC at the co-located Cone Park Library or receive services and complete follow-ups at the nearby Library Partnership Resource Center, located 2.7 miles away on a direct bus route from CPLRC.

Of the 40 CPLRC patrons, 28 completed at least one follow-up instrument, with 19 (48%) of these follow-ups occurring after the CPLRC closure. Among the post-closure follow-ups, three patrons completed follow-ups at Cone Park Library: one continued receiving services at LPRC, while the other two did not seek further support at any of our agency's Resource Centers. The remainder of the follow ups took place at the LPRC.

The closure also impacted the CPLRC Community Research Advisory Team, an active group originally formed from the Cone Park Library Resource Center SFSA Team. This team met as needed, with ongoing email communication, to follow up on action items, provide feedback, and recommend additional evaluation projects.

Service usage among these patrons varied based on whether they accessed services following the CPLRC closure. Of the 40 patrons, 14 did not record any services post-closure. Six patrons accessed services at both LPRC and SWAG FRC; one patron used services through the Community Resource Navigation program (a program which utilizes shared space, within communities not currently served by our FRCs to meet in person with families and individuals and provide a variety of family support services, programs, and special events), LPRC, and SWAG; and the remaining 19 patrons received services exclusively at LPRC. While most of these patrons had previously visited these sites, six patrons accessed services at a new Family Resource Center for the first time following CPLRC's closure.

Section 3-3: Staff Turnover

Throughout the study period, PSF experienced significant staff turnover among Community Research Coordinators (CRCs), hiring three new CRCs while seeing the departure of four. After the last CRC left in June 2023, PSF opted to

leave the position vacant, which added additional responsibility to the two remaining CRCs as they managed patron follow-ups and research duties. This turnover, coupled with frequent staff changes at the LPRC and SWAG FRC, at times led to data entry errors, necessitating extensive checks, corrections, and reanalysis. However, these rigorous quality control measures ultimately yielded a clean, robust dataset, particularly in service utilization data. Although staffing has reportedly stabilized at the LPRC, enrollment numbers at the Library Partnership Family Resource Center remain low.



“They really help support my family.”

Section 4: Evaluation Methods

The project's evaluation was led by Dr. Robin Perry. The evaluation plan was approved by the funder on January 25th, 2021. As a comprehensive mixed-methods approach, several strategies were employed to answer key evaluation questions. These included a Strengthening Families self-assessment process, patron feedback groups, a historical analysis of the RCAC and its feedback group, outcome surveys, a service provider agreement review, and various community-based participatory research methods. The specific methods implemented are discussed in detail in this section and received IRB approval (Advarra IRB: Children's Bureau, Protocol Number PSF-2021-CB).

As part of the evaluation plan, the team developed two sets of research questions: one for the process evaluation and one for the outcome evaluation. The status of each research question is detailed in Sections 5 ("Process Evaluation") and 6 ("Outcome Evaluation").

Process Evaluation Research Questions

The following research questions are specific to the proposed process evaluation for this project. These questions are stratified by their focus on fidelity, reach, and implementation drivers, solutions, and barriers.

Fidelity Questions

Building and Sustaining Community Collaborations

F-1: *To what extent were the project's key activities linked to building and sustaining community collaborations implemented with fidelity?*

F-2: *To what extent are services offered/integrated at all Family Resource Center sites implemented with fidelity in keeping with the Protective Factors Framework?*

F-3: *Are the provision of services/activities across each Protective Factor classification (at each Family Resource Center) responsive to the perceived and expressed need (by patrons) for each type of service/activity?*

Reach Questions

R-1: *To what extent have meaningful and functional relationships been developed and maintained between each of the Family Resource Centers and collaborative partners (multi-agency/ multi-system) for the provision of needed services and supports to patrons? — System Level*

R-2: *To what extent is the membership of the Resource Center Advisory Council for each Family Resource Center active, engaged, and responsive to implementation, organization, and patron needs? — System and Community Level*

R-3: *To what extent do those patrons that access Family Resource Center services and supports represent those living in households within the targeted geo spatial areas (zip codes, Census Tracts and Blocks) where need is greatest? — Community Level*

Reach Questions (Continued)

R-4: *What are the patrons' perceived value and utility of each of the core services/ activities (linked to each protective factor) offered across each Family Resource Center? — Participant Level*

R-5: *Among those families successfully engaged with and utilizing services and supports provided or referred to by Gainesville and Lake City how many were previously unknown to the child welfare system. — Community Level*

Process Evaluation Research Questions (continued)

Implementation Drivers, Solutions, and Barriers Questions

I-1: *What factors or actions contributed to any perceived success in developing and implementing the NorthStar Family Resource Center in Lake City and the continued operation of the three Gainesville Family Resource Centers?*

I-2: *Were there any challenges and/or barriers associated with the development and implementation of the Family Resource Center in Lake City and the continued operation of the three Gainesville Family Resource Centers?*

I-3: *Are services provided in a manner that is supportive and non-stigmatizing for patrons (especially marginalized and minority populations)?*

I-4: *To what extent does a qualitative/psychological sense of community amongst patrons relate to their response to—or is changed by—engagement and participation in Family Resource Center services/ activities?*

Outcome evaluation research questions

The outcome evaluation questions focus on individual/participant-level and community-level units of analyses and employ pre-post and quasi experimental designs for different research questions.

Four participant-level research questions focused on short-term and intermediate outcomes linked to changes in family resources, perceived level of stress among parents/caregivers, social-emotional symptomology of children and youth, and family protective factors (all measured with standardized tools and procedures), pre-post designs and trend analyses that employ baseline and repeated measurement every six months over the course of the project/study.

Analyses included a comparison in trends within (stratified by protective factor service categories) and across FRC sites, as well as exploration of the contributing factors (patron and service-based) impacting variation in observed trends.

Participant-Level Research Questions

Confirmatory

P-1: *Do parents and caregivers that utilize the services at the three Gainesville and the Lake City Family Resource Center sites demonstrate a significant increase in their reported formal and informal family resources and supports as compared to before they began services.*

P-2: *Do parents and caregivers that utilize the services at the three Gainesville and the Lake City Family Resource Center sites demonstrate a significant decrease in their level of stress as compared to before they began services.*

P-3: *Do children and youth utilizing services—that are linked to Social and Emotional Competence protective factor—at (or referred to partners by) the three Gainesville and the Lake City Family Resource Center sites demonstrate a significant reduction in social, behavioral, and emotional symptomology (of concern) as compared to before they began services.*

Participant-Level Research Questions

Exploratory

P-4: *To what extent does the utilization of services provided by the three Gainesville and the Lake City Family Resource Center sites impact or improve the protective factors among families served as compared to before they began services.*

P-5: *To what extent do changes in family resources, perceived stress of parents/caregivers, and social, behavioral, and emotional symptomology of children and youth in households have an influence on the protective factors associated with family functioning/resiliency, knowledge of parenting and child development, social connections, and concrete supports among families over the time of involvement with project Family Resource Centers.*

Community-Level Research Questions

Community-level research questions utilized a series of interrupted time-series designs including some that employ a comparison group(s). Confirmatory community-level research questions employ a modified interrupted time series design where historical data and established trends (for at least five years prior to project commencement) related to measures of child welfare system involvement (i.e. number and rate of calls to the child abuse hotline, number and rate of verified maltreatment cases, and number of children entering foster care) in Columbia County—and the service catchment area for the Lake City FRC—are contrasted to any changes/variation in trends (whether instantaneous or lagged, if any) in these same geospatial areas following the commencement and continued operation of the Lake City FRC.

Similar trends (using secondary data) for all FRC service areas were additionally contrasted (in response to exploratory questions) against identified trends for these outcome measures for the comparison area/geographic region(s) not served by project FRCs including: matched counties (for demographic, select social determinant, and child welfare outcome measures) in Florida, geographic areas not served by FRCs but under the auspices of PSF, and statewide trends. To learn more about these analysis findings see Section 6 (Outcome Evaluation Findings).

Community-Level Research Questions

Confirmatory

C-1: Does the community served by the Lake City Family Resource Center demonstrate a reduction in child maltreatment referrals as compared to before the Lake City Family Resource Center began services.

C-2: Does the community served by the Lake City Family Resource Center demonstrate a reduction in child maltreatment as compared to before the Lake City Family Resource Center began services.

C-3: Does the community served by the Lake City Family Resource Center demonstrate a reduction in foster care entry as compared to before the Lake City Family Resource Center began services.

Community-Level Research Questions

Exploratory

C-4: Does the FRC in Lake City/ Columbia County reduce child abuse referrals among the communities they serve compared to comparable communities in Florida not served by FRCs.

C-5: Does the FRC in Lake City/ Columbia County reduce child maltreatment among the communities they serve compared to comparable communities in Florida not served by FRCs.

C-6: Does the FRC in Lake City/ Columbia County reduce foster care entries among the communities they serve compared to comparable communities in Florida not served by FRCs.

Section 4-1: SFSA Process

The Strengthening Families Self-Assessment (SFSA) Tool for Community-Based Programs and associated protocols were developed by the Center for the Study of Social Policy (CSSP). This is a comprehensive, research-informed approach (based on national studies) aided in assessing the extent to which each of the FRCs have implemented services/activities to engage and strengthen families with respect to each of the protective factors (CSSP; Harnar and Tarr, n.d.). The assessment criteria and protocol for self-assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Family Resource Center has implemented services/activities in alignment with core strategies for building each of the protective factors.

There are five main sections of the Strengthening Families Self-Assessment process (one for each Protective Factor). Protocols require the establishment and utilization of a Self-Assessment Team that includes at a minimum: Administrative Staff and/or Program Director, Direct Service Staff, and Parents who participated in the program/received services (or whose children participated in service activities). For this project, it was deemed important to also include collaborative partners and other stakeholders in the process (as informed parties/members). There is one team per project Family Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) administrative and direct service staff/volunteers, community collaborators, and at least three parents/patrons who have been active participants in the program (or whose children participate in the program).

Team members received an orientation to the CSSP Protective Factors Framework, its relationship to the Family Resource Center service model, and the Strengthening Families

Self-Assessment Tool for Community-Based Programs and its associated protocol. Individual members had the choice of completing paper or electronic versions of the Strengthening Families Self-Assessment Tool. Since the completion of the tool requires an investment of time (60-90 minutes) and reflection, individual members could decide if they wanted to complete the tool at one time or in sections. To accommodate these preferences, electronic versions of the tool were stratified by section/protective factor. For the electronic versions, each Team member was provided a unique (and secure) web link and a QR code, providing them with two electronic link options for responding to the survey (a preference/option desired by Team members) but informed to respond only once. Although the names of members/respondents were known to all team members and the evaluation team, only their role on the team was requested as identifying information and recorded in the database. If a team member completed a paper version of the tool, that tool was submitted to the Community Research Coordinator for data entry into a system that would combine that respondent's scores with any electronically submitted responses from other members. The Community Research Coordinator was available on site and via e-mail and the Lead Evaluator was available via phone and e-mail to field any questions related to the tool and associated processes and address any technical issues associated with tool/survey completion.

After individual team members completed their scores, these data were shared via a written summary report highlighting the distribution of responses by Team members for each item. Efforts were made through critical discussion and dialog to arrive at a consensus assessment for each item and indicator (if such was possible) so that a collective assessment could lead to a structured action plan to address any fidelity concerns and program needs. Although the specific process for moving toward consensus is

not itemized in the tool protocols (it is left to the Team), the Lead Evaluator suggested some processes and the team made initial decisions regarding how to proceed.

Each question and associated items were reviewed collectively and then as individual items. For many items, established consensus and agreement was evident, especially for select items and questions identified as observed strengths of the FRCs. These strengths were noted with expanded discussion (at times) highlighting examples of how strengths were manifested. Given the robustness of discussion and shared ideas, concentrated focus addressed those items where there was variation in the level and type of statement/item agreement (including by role of the respondent as a stratum) and/or the weighted mean score for a select item was below 4.0 (the threshold of agreement). If an item was identified as an area(s) of difference/variation of assessment, open discussion ensued to clarify the source and reasons of these differences, and a collective decision was made regarding whether an action item was needed or should be considered. The team engaged in facilitated brainstorming to identify potential recommendations for action items. Although action items were identified (some more immediate than others) for select items/questions, any structured plan for action item implementation followed the completion of all discussions related to self-assessment findings linked to each protective factor. However, if modifications to select supports and services (i.e., recommended action items) were feasible and could be made concurrent with the SFSA process, such would happen and be reported on in subsequent meetings.

Following the SFSA initial meetings the developed action items were brought back to their respective FRC every six months for updates. Recent events and updates from the FRC's manager would be compiled into action

item updates which were then made available SFSA group participants and FRC patrons. These action item updates became a means then for accountability to the original group and impetus for continuous quality improvement within the FRCs. During the evaluation there were a total of 18 action item updates created, three at CPLRC, five at LPRC, four at NSFRC, and five at SWAG FRC (Bernardin, Tenerelli, & Nichols, 2023; David-John & Nichols, 2022; Lancaster, 2023; Lancaster, Mobley, & Perry, 2023, 2024a, 2024b, 2024c; Lancaster & Reed, 2023a, 2023b; Lancaster, Reed, & David-John, 2022; Pegram & Hoopaugh, 2024; Pegram & Nichols, 2023, 2024a, 2024b; Pegram, Nichols, & Bell, 2023; Pegram & Tenerelli, 2023a, 2023b; Snow, Kelly, & David-John, 2022). More information on collaboration during the SFSA process is discussed in 5.2.1 and findings from the SFSA process are discussed in 5.2.4 and 5.3.3.

Section 4-2: Patron Feedback Groups

As part of a broader evaluation effort, the utilization of focus groups of patrons receiving services and supports at each of the project FRCs was proposed to help answer general questions related to fidelity of services and supports to the protective factor model, the reach of FRCs' efforts, and implementation drivers, solutions, and barriers. Please note, although initially identified as "focus groups" within the evaluation plan, the phrase "patron feedback groups" was substituted for these efforts following consultation with evaluation team members and advisory groups (that included patrons) that suggested the revised group reference would be more engaging and inviting for prospective members.

Detailed information related to the methodology guiding the sample selection of patrons to participate and other procedures and limitations associated with the evaluation design can be found in a separate brief (see Perry, Lancaster, & Pegram, 2024). Further, a separate guide was

produced that highlighted in detail the processes and protocols utilized in forming and facilitating the patron feedback groups and the structure for the content analysis, results of which are detailed in this report (see Institute for Child and Family Services Research, 2023). In sum, patron participants were randomly sampled to participate from a sampling frame of patrons that consented to participate in the formal evaluation. The selection was stratified across PSF Family Resource Centers with two groups per FRC. Efforts were made to secure between 6 and 10 participants per group with 75% of participants serving as caregivers of children (an additional stratum for selection) given that one of the objectives (among others) of the evaluation is to assess the effect of FRCs in their capacity to prevent maltreatment and family involvement with child welfare systems. Although focused patron feedback groups were FRC specific (and analyses was stratified by FRC), patrons at each were asked the same questions. Some commonalities of perspective across FRC feedback groups were identified that permitted an aggregation of findings (and identification of an aggregate content saturation level) in select analyses denoted in this and other reports.

The generation and final selection of questions to be asked with each feedback group was multifaceted and involved a few iterations. First, draft questions were constructed in consultation and brainstorming with other project staff, project implementation team members, and select PSF and FRC administrators.

Following refinements to these questions, feedback, edits, and question suggestions were solicited via survey methods from key stakeholders that have been a source of information and consultation for other process evaluation activities. These individuals included program managers at each FRC, as well as members of each FRC Strengthening Family Self-Assessment (SFSA) teams (which include

patrons/community ambassadors, key program staff and volunteers, and collaborative partners from the community). Although the survey was made available in electronic format, it was also available in paper form, upon request. One group of respondents—members of the Cone Park Research Advisory Council —met in-person as a group to discuss each question and provide feedback on the content and structure of select questions. The responses from surveyed stakeholders were reviewed, tallied, and summarized. At least one question originally aligned with each protective factor was chosen for inclusion for feedback group procedures deemed to be of highest rated value to “...best understanding patrons' experiences at, and the impact of, each family resource center.” (Perry, Lancaster, & Pegram, 2024). More information can be found on findings for the patron feedback groups can be found in section 5.1.2 and 5.2.4.



The final set of Patron Feedback Group questions (and associated sub-questions)

1. *How does [FRC name] assist individuals and families with immediate needs?*
2. *What resources and supports do they provide? Have they been helpful?*
3. *Were the activities and programs welcoming and inclusive?*
 - a. *Did they make families feel comfortable interacting with others and participating in activities?*
4. *When interacting with staff, are you listened to and supported?*
 - a. *Do you think program staff are willing to work collaboratively with you to support your child(ren)'s development?*
5. *When thinking about yourself or other caregivers in the community, did the services and events at the resource center help manage stress?*
 - a. *Did these services help you to better deal with the demands of parenting during stressful times?*
6. *What additional services do you need as a caregiver to better cope with everyday stressors?*
 - a. *What additional services do you need to cope with the stressors in your community?*
7. *Do program activities support your children's social and emotional development?*
8. *Do you think that [FRC name] resources have helped caregivers in the community from being involved with the child welfare system?*
9. *Is there anything else you would like to say about your experiences with [FRC name]?*

Section 4-3: RCAC Feedback Group

As part of the process evaluation, the utilization of a Resource Center Advisory Council (RCAC) feedback group was proposed to explore the extent of RCAC activity, engagement, and responsiveness to implementation, organization, and patron needs. Like the patron feedback groups, this group was originally labeled as a "focus group" in the evaluation plan and follows focus group methods. After consulting with the evaluation team, the term "feedback group" was adopted to make the session more engaging and inviting for participants.

Although the original plan was to hold this group annually, the COVID-19 pandemic required adjustments to the evaluation plan in 2021 for safety reasons. Additionally, the number of attendees available who regularly attended the RCAC limited the number of feedback groups to one. As a result, one RCAC feedback group was planned as part of the process evaluation on May 22nd, 2024, from 11:45am to 1:45pm.

RCAC participants were selected from their attendance as listed within minutes spanning from January 16th, 2020, to the last day the RCAC existed independently, August 23rd, 2023, before its merger with Columbia Children's Partnership Council into the Columbia Family Resource Center Council (CFRC). Preference was given to those who last attended RCAC meetings in 2023 or 2024; participants whose last attendance was before 2022 were excluded. Homogeneity within the RCAC

feedback group was based on participants' shared commitment and experience, having attended no fewer than six RCAC meetings.

To ensure sector participation, as outlined in the RCAC charter, priority was given to including at least one participant from each identified service sector. Additionally, priority was given to participants who met both the sector representation and frequency criteria.

Ten RCAC participants were recruited to join the NSFRC manager for a manageable group size. The group comprised 30% male and 70% female participants, with an equal representation of 50% Black/African American and 50% White individuals.



Efforts were made to foster an open and non-threatening group discussion, facilitated in a familiar setting—the same room used for previous RCAC meetings. Participants received a brief introduction before the session, emphasizing the value of respectful responses. The facilitator did not push for agreement or consensus; all individual insights and perspectives were documented.

The NSFRC conference room was arranged in the same fashion as the RCAC meetings to promote easy communication, familiarity, and comfort. Food orders from a local sandwich shop were pre-ordered and delivered before the meeting.

Participants were welcomed by the facilitator and co-facilitator. Consent was received from participants for recording, and everyone was encouraged to be on a first name basis. Capacity for childcare was available, but no participants used this. At the end of the feedback group participants were given a letter of appreciation and a \$25 gift card.

The feedback group questions, and sequencing were finalized in collaboration with the evaluation team. For more details on the RCAC methods, refer to the full report (Lancaster, Spoliansky, Pegram, et al., 2024). To explore the RCAC findings, see Section 5.2.2 of this report, which presents results based on the Process Evaluation Reach questions.

RCAC Feedback Group Questions

1. *Can you offer examples that demonstrate the value and impact of collaborations between NorthStar and community partners in assisting patrons and their families?*
2. *Have NorthStar services and activities been responsive to community and patron needs? Can you provide examples of services or activities that have been particularly effective in meeting the needs of patrons?*
 - a. *Are there any challenges or obstacles that patrons face in accessing services, and how might these challenges be mitigated?*
 - b. *Are there unmet needs or service gaps within the community that NorthStar could help address?*
3. *Now we want to hear about the RCAC specifically. From your perspective, what aspects of the RCAC are functioning well? [This can include before or after the merger into the CFRC in October of 2023]*
 - a. *Are there any barriers or challenges that hinder the efficient functioning and responsiveness of the RCAC to NorthStar and their patron needs?*
 - b. *Any suggestions for addressing challenges and improving RCAC processes?*
4. *How would you describe the sense of community within the neighborhoods where patrons live and the level of trust among and between patrons and NorthStar?*
 - a. *What has or can the RCAC and NorthStar do to enhance a sense of community trust and engagement?*
5. *Have NorthStar services and activities been respectful of and responsive to the cultural diversity of patrons and the community.*
6. *What efforts have been made to support the sustainment of NorthStar services beyond the current project period?*
7. *What challenges or obstacles may arise in sustaining NorthStar services beyond the project period, and how might these be addressed?*
8. *Wrap Up: Last comments.*

Section 4-3-1: SFSa Process

The RCAC introductory meeting was held in the Richardson Community Center cafeteria on January 16, 2020, and then later that year, on November 9, 2020, a visioning session was held in the same community center's gymnasium. The community center is a recreational facility managed by Columbia County at the time, which was identified as a potential community partner and offered their support in hosting RCAC meetings. This session was planned and facilitated by Paul DiLorenzo (formerly from Casey Family Programs). Mr. DiLorenzo and Casey representatives have helped PSF and the Gainesville Resource Centers in the past, from which tangible results from dialog with the broader community that have helped to shape the goals and activities of our FRCs. All collaborative partners, RCAC members, and patrons/families/households within the targeted geospatial service area were invited to participate in the event. Feedback was solicited from community members and stakeholders, which was analyzed in a qualitative manner (identifying themes in responses, support, and recommendations) with an itemization and summarization of comments and recommendations for FRC operations going forward.

Identified early goals for the RCAC were:

- Planning for a Family Resource Center opening in Lake City in 2021
- Helping PSF conduct a comprehensive Needs Assessment in Lake City
- Analyzing and discussing results of the Needs Assessment related to local service and resource needs
- Providing ongoing support to ensure that the needs of the community are being met
- Collaborating to identify and fill gaps in resources and services



It was also advised that an RCAC charter would be developed and presented at the following meeting and encouraged for participants to spread the word about the RCAC to select individuals to increase membership.

For detailed information on the RCAC's early engagement, membership analysis, visioning session, feedback group, and content analysis results, please refer to the full report (Lancaster, Spoliansky, Pegram, et al., 2024) or review section 5.1.1.

Section 4-4: Outcome Surveys

The criteria for study inclusion included being 18 years of age or older, of sound mind, be an FRC client who has received some service. Participants were not required to receive a certain kind of service or have received services previously (they can be a new patron). Study recruitment is aimed at caregivers though participants do not have to be caregivers. Additionally, staff or close family members of staff were not eligible to participate.

Though allowances were made in the evaluation plan to use a variety of administering methods including survey links and paper surveys the surveys were only administered using their electronic versions, in person with a CRC.

CRC recruitment efforts including the following talking points to highlight elements of the evaluation's informed consent:

- We are doing a program evaluation to help us learn more about how receiving services from this Resource Center supports our patrons, their families, and the community; as well as to gain feedback about how to improve our services. We are especially interested in learning: Does using the Resource Center improve the well-being of families and children, increase access to resources, reduce stress, or reduce a family's likelihood of child welfare involvement?
- The information and knowledge you share with us will help Partnership better understand the value of the Resource Center model and add to what we know about community-based programs.
- If you agree to participate, you will be asked to complete a few short surveys when you begin, and then again twice a year (every six months) until August 2024. Completing the surveys typically takes about 20-30 minutes.
- You may also be randomly selected to participate in a focus group to share your thoughts and experiences about working with the Resource Center.
- If you agree to participate, you can still change your mind and withdraw from participating at any time.
- There are no expected risks that could result from being involved in this project. There is no payment for participating. As a small incentive, you will be entered into a random drawing each month for a chance to receive one of four \$25.00 gift cards. Any information you provide as part of this evaluation that could reveal your identity will remain confidential. Your signed consent form will be kept in a secure lock box. Participating in this program evaluation is completely voluntary. You can continue receiving services from the Resource Center regardless of if you choose to participate or not, or if you choose to withdraw at a later time.

Careful attention was given to accurately record whether patrons self-identified as caregivers. Several survey questions were not applicable to non-caregivers, and patrons were encouraged to select the most appropriate option in those instances. The surveys were administered in the order listed below.

Informed Consent Procedures

Once patrons agreed to participate, the CRC asked them to sign a consent packet containing two informed consent forms. The first form was a three-page consent for primary data collection which allowed for the collection of survey data. The second form was a one-page consent document for collecting secondary service data, enabling the tracking of their service usage at the FRCs. Participants were also asked if they consented to have the past or present involvement with DCF viewed by CRCs and used for evaluation purposes. Efforts were made to assure patrons that any collected data would be de-identified in subsequent reporting and their information would never be shared with FRC staff or affect services at the FRC. As per IRB protocols, participants could voluntarily consent to participate in any part of the evaluation and withdraw consent for any form of participation at any time. Once patrons' consent preferences were recorded the CRC enrolled them in the community module (our FRCs database system for patron visits and service utilization) and loaded the first survey to be administered onto an iPad.

Each CRC was provided with two iPads, so they were able to complete this process on two patrons at a time. Most patrons completed the surveys on their own with the CRC in standby mode to answer any questions or assist with technical issues.

In a few cases patrons self-identified as not being tech savvy or good at reading and asked for more direct assistance with the CRC reading off the question for them and recording what they said. The patrons' wishes were honored wither they preferred to be asked the questions in an open space or go into a private room to complete the surveys.

Informed consents were temporarily locked in a small portable lockbox and once several packets were complete the CRC took them to LPRC to store them in the projects large storage box which holds all the project's consents.

A patron who filled out an informed consent but did not complete any surveys had their enrollment deleted and were removed from the study. If a patron voluntarily removed themselves from the study, they were asked if it was okay to keep what was already gathered or if they wanted that removed as well. If they wanted everything removed their consent was shredded and their surveys deleted from the Module.

Monthly Gift card Incentive

The studies incentive originally included a random drawing of four active participants at each FRC receiving a \$25 gift card. Due to financial constraints on 6/7/2023 incentives were reduced to two active participants at each FRC selected by random drawing receiving a \$20 gift card. A participant was considered active if they had responded to at least one of two phone contacts or had spoken with the CRC in person, as long as no more than six months had passed since their last follow-up without contact, and they had not voluntarily withdrawn from the study. Recipients were chosen randomly by placing the full list of active participants' client IDs or names into a random generator each month and choosing the top names as winners.

CRCs were responsible for creating thank you cards to go with these gift cards and ensuring delivery to the winner. If a gift card was already assigned to a participant who becomes inactive that gift card gets put into the main pool of gift cards to be given out next time.

Each CRC maintained their own list of patrons that they enrolled and was responsible for handling gift cards and arranging for follow up surveys to be complete for those participants. This strategy was important for patron tracking as we found participants often received services at more than one FRC.

Six Month Follow-Ups

Efforts were made to schedule follow ups with participants exactly at six months, and no earlier. CRCs took the lead on contacting and scheduling follow up surveys with their enrolled clients. A script was provided to CRCs to make phone call reminders.

CRCs called no more than two times consecutive without an invitation from the patron. The second missed call identified that if no response was received, it was determined that the patron did not want to provide that information and no additional contact efforts were made.

The CRCs were careful to not mention the study if leaving a message on a phone number that may have other people living at the residence, so confidentiality was not violated.

If there was an issue in contacting a patron, their name was added to a front desk list so that Family Resource Center staff who were checking in patrons were able to quickly identify those individuals. This proved helpful when a CRC was not at the front desk or covering at an FRC where they knew less of the patrons. Learn more about the outcome findings in section 6 of this report.

Section 4-4-1: Supplemental Demographic Survey

The Supplemental Demographic Survey was the first instrument administered after the informed consent process. This survey collected household demographic data for participants and asked the patron if they consented to authorize access to past or present involvement with DCF. This was another opportunity for the CRCs to verify the patron's consent for this part of the study. Because this survey was administered at each follow up instance, patrons were asked this question again and their account was updated with the current information.

Of all surveys this one proved to be the most difficult for individuals with low technology skills. Some participants had difficulty with scrolling over to see all parts of the household members section and difficulty switching between keyboards to choose numbers instead of letters for household member ages. Additionally, some participants had no experience typing on an iPad so the qualitative questions at the end proved difficult/frustrating to them. The CRCs took care to offer help if the participant started to become frustrated, offering to type in their answers and then read it back to them to confirm accuracy.

Section 4-4-2: Perceived Stress Scale

The Perceived Stress Scale (PSS-10) is a 10 item self-report measure that appraises the level of stress in one's life (i.e. belief their life has been unpredictable, uncontrollable, and overloaded) over the past month (see Appendix P). Three levels of stress (low, moderate, and high) are identified, although the tool has been used as an interval level measurement. The general nature of the items on the Perceived Stress Scale (PSS-10) ensure that responses are non-stigmatizing and of value for the target population of FRC service recipients.

Section 4-4-3: Family Resource Scale

The Family Resource Scale is a self-report 30 item scale that has a four-factor structure/sub-scales measuring: Basic Needs, Money, Time for Self, and Time for Family. It has well established reliability and validity and has been utilized extensively as an assessment and measurement tool in resource-based intervention practices and in evaluation/research studies of these practices to gauge the impact of the identification and mobilization of resources on a series of desired outcomes for families with children.

Section 4-4-4: Protective Factor Survey

The Protective Factors Survey, 2nd Edition—PFS-2 (regular and retrospective version) is a 44-item questionnaire that measures level of desired change in protective factors related to family functioning/resiliency, nurturing and attachment, social supports, and concrete supports. It is a product of the FRIENDS National Resource Center in collaboration with the University of Kansas Center for Public Partnership and Research.

Retrospective: The retrospective version of this scale was administered to participants at the SWAG FRC, the CPLRC and the LPRC who visited two times in the past three months or three times in the past six months to establish a baseline. This survey was not administered at the

NSFRC. This survey was only administered when the patron was first enrolled, and not at follow up instances.

Pre/Post: If the participant was not eligible for the retrospective survey at enrollment, they completed the Pre/Post version of this scale. Additionally, all follow up instances utilized this version of the scale.

Section 4-4-5: Strengths and Difficulties Survey

The Strengths and Difficulty Questionnaire (SDQ) is a 25-item questionnaire that measures the manifestation of emotional symptoms/problems, conduct problems, hyperactivity/inattention, peer relationship problems, and pro- social behavior demonstrated by the child(ren) aged 3 to 16. This scale was only administered to the participant caregivers of youth who were accessing Social and Emotional Competence of Youth services. Examples of such services include Homework Help and Girl Scouts. The caregiver would complete a scale for each of their children who was accessing one of these types of programs. Each survey was child based as asked for the child's full name and age.

There were six versions of the questionnaire, each tailored to a specific age group. Three were intended for initial screening (Strengths and Difficulties Questionnaire P 2-4, P 4-10, and P 11-17), while the other three, with the same age distinctions and labeled ""Follow-Up,"" were designed for use during follow-up assessments.

If the child was no longer receiving social and emotional competency services at follow up instances, the caregiver would still be asked to complete the SDQ follow up version to review the impact of the program over time.

Section 4-5: Provider Agreement Review

This report presents official community collaboration agreements created between four of PSF's FRCs (LPRC, SWAG FRC, NSFRC,

and CPLRC) and community agencies. This review required consultation with PSF and FRC administration representatives and staff to secure any available historical documentation of collaboration agreements and copies of the actual agreements so that their content could be reviewed and analyzed. A critical appraisal of this information was conducted which represents a summary description of the form, content, and scope of identified new collaborative agreements, along with a brief itemization of each partner's primary service and support role in the community and a link to their website (if available).

Data are presented in tables stratified according to protective factor. In 2023, PSF continued to align their services using a protective factor framework that was derived from the Center for the Study of Social Policy (CSSP).

In addition to partners with official agreements, there are many providers that deliver one-time events and provide support through sponsorship, co-event planning, and tabling. Currently, there is no process in place to keep a record of these connections. Providers may work extensively to support a specific event but if they are only providing services once or twice a year, they may never make a formal agreement (S. Merritt, personal communication, October 31, 2022).

More information about the PSF formal agreement execution process, changes over time, limitations, and data management can be found in the full report: (Pegram, Lancaster, Merritt, et al., 2024)

Section 4-6: Community Based Participatory Research

PSF has implemented several Community-Based Participatory Research (CBPR) approaches, which center on “community perspectives throughout the research and evaluation process.” CBPR as “a community engagement method, is

rooted in considerations of power and social justice” source: Worden, et al., (2022) These methods reinforce the active and equitable participation of all community stakeholders, including collaborative partners of CBCs and those utilizing and impacted by services and support (i.e., patrons and their families). Community-based child welfare practice requires partnering with the community to ensure a responsive implementation of targeted services and supports and an evaluation of efforts to strengthen families through the enhancement of protective factors and prevent and/or reduce the risk of child welfare system involvement.

The following subsections provide methods used for those CBPR approaches.

Section 4-6-1: Community Strengths and Needs Assessment

In the process of creating an expansion site in Lake City the RCAC in connection to this site worked towards the establishment of a Community Strengths and Needs Assessment.

RCAC members were kept abreast of the project's evaluation activities to serve a two-fold purpose- to imbed the culture of inclusion of the council in important activities related to the grant project, as well as to receive and utilize any feedback they may have or be able to provide to better inform the project's evaluation as part of their collaboration. In this sentiment, RCAC members were asked to share any existing Community Strengths and Needs Assessments for Lake City that they or their agency may have access to, as well as any reports with local data that could be helpful. Although members did not expressly provide material in response to this request, their input and suggestions in subsequent Council meetings provided meaningful collaboration and contribution as to how the Community Strengths and Needs Assessments for Lake City would ultimately be finalized and utilized.

Information that was collected from RCAC members to help develop a Community Strengths and Needs Assessment was considered, as were the responses from a survey that was sent to the members of the RCAC in June 2020, containing questions to help guide what information was to be included in the assessment. The survey explained how each of the services provided at PSF's Family Resource Centers are connected to one or more of the five Protective Factors, and then each protective factor was included, with a brief definition and examples of service types. For each protective factor, the survey asked the following:

- *If it was important to have the types of services provided as examples in Lake City to address the needs of families.*
- *To list the service types provided as examples, ranking them in order of importance. With 1 having the highest importance and the largest number having the lowest importance. The largest number varied by Protective Factor, as each had a different number of service type examples provided. The range of largest number (lowest importance) varied from 3-8.*
- *To complete a 7-point Likert-type scaled response, indicating the importance level for each of the service type examples (not at all important, neutral, low importance, slightly important, moderately important, very important, and extremely important).*
- *What additional resources could be of value for that protective factor.*

The next section of the survey referenced and displayed the project's Theory of Change, which had already been presented in an earlier RCAC meeting, was shared again, asking the following questions:

- *Does this proposed Theory of Change make sense to you?*
- *Do you have other suggestions or consideration for our Theory of Change?*
- *If you answered yes to the question above, please briefly tell us your suggestions or considerations.*

Next the survey addressed and presented a summarized version of the project's proposed evaluation plan, which had previously been shared with RCAC members at an earlier meeting, asking the following:

- *Does it make sense to measure the impact of the Resource Center services/activities on parent's/patron's perceived level of stress over time?*
- *Does it make sense to measure the extent to which select Resource Center services/activities have impacted any change in parent/patron reports of resources that they rely upon for support?*
- *Does it make sense to measure the change over time (for applicable children and youth) regarding any reported difficulties (social, emotional, behavioral) children and youth have been dealing with?*
- *Does it make sense to measure over time any changes in the level of each protective factor in families receiving service(s)?*
- *Please let us know if there are other factors/indicators we should consider in measuring if patron/family involvement with the Resource Centers provides meaningful change in addressing unmet needs and supporting and enhancing the well-being of children and families.*

Of the 42 RCAC members surveyed, 19 submitted responses between June 11 and July 16, 2020. These procedures highlight the effort that was made on PSF's behalf to engage RCAC members in important decisions regarding the project's evaluation and the opening of the NSFRC, which opened on March 18, 2021.

In reviewing the results from the survey administered to the RCAC members during a RCAC meeting, other suggestions regarding the Community Strengths and Needs Assessment were discussed. One major suggestion that was provided was to shorten the Community Strengths and Needs Assessment, which was originally four pages, to a single page, to facilitate a clearer and easier experience for the community members who would complete it. The original assessment included more detailed questions, requiring short answer responses about the best and worst things about living in the community, as well as the Sense of Community Index II (SCI-2). Additional and more in-depth demographic questions were also part of the original assessment. Per the feedback received from the RCAC members, it was suggested to remove the SCI-2 from the assessment, simplify the demographic questions asked, and remove the questions requesting short answer responses about living in the community. What remained was a one-page questionnaire, listing needs (separated by Protective Factor), asking the responder to rate as not needed, enough supports available (need is met), some supports available (need still exists); and no support available (still have need). The RCAC members also suggested to make the assessment available in an electronic format, which proved to be incredibly beneficial in collecting responses from community members during the COVID-19 "pandemic, since face to face solicitation was not always appropriate. To learn more about results for this assessment view the fidelity results in section 5.1.1 and 5.1.4 and information on

how this assessment contributed to the FRCs reach in section 5.2.2.

Section 4-6-2: Satisfaction Surveys

Satisfaction surveys are made available to patrons who utilize resource center services. This is a one-page survey with 10 questions asking patrons how they heard about the FRC, their levels of satisfaction and reasons for visiting.

These surveys are part of PSF's continuous quality improvement plan which allows the Director of the Family Resource Centers to have updated data on quality satisfaction so that needs may be addressed in a timely manner.

Section 4-6-3: Getting to Know You Forms

Utilization of the Getting to Know you Forms (GTKY) as a means of signing a patron in at the Resource Center upon their first visit, allows them to request needs privately on the form without having to say them out loud. Notably, patrons can receive services without providing much or any information, and this won't impact the quality or extent of the services they receive. 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. On March 16th, 2021, all FRCs started collecting information from patrons to self-identify if they are caregivers to children under the age of 18. If 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 whether 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 the FRC staff can properly assist. When patrons visit the FRC for 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 allow the FRCs to track and monitor service utilization trends and expressed needs within the neighborhoods and households served.

Section 4-6-4: Child Welfare Community Collaborations Cross-Site Process Evaluation

Abt Associates and Child Trends (2024) conducted a cross-site study of the Community Collaborations to Strengthen and Preserve Families projects, including Partnership for Strong Families. The study was being conducted on behalf of the Administration for Children and Families and assessed collaboration effectiveness across seven factors: Context, Members, Process, Communication, Function, Resources, and Leadership. The survey achieved a 36% response rate, with 29 out of 80 invitees participating. Findings revealed strengths in areas such as Context, Members, Function, Leadership, and Communication, where respondents reported high levels of trust, defined objectives, effective leadership, and established communication systems. Resources emerged as a concern, particularly around financial stability, and future funding plans. Overall, participants reported

moderate success in achieving coalition goals and expressed confidence in future success.

Leadership roles and those with longer involvement in the collaborative reported higher satisfaction. Consistent meeting attendance was also positively associated with satisfaction across all factors. Please see the full report: [Evaluation – Partnership for Strong Families](#).

Section 4-6-5: Community Partner Survey

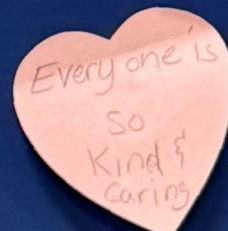
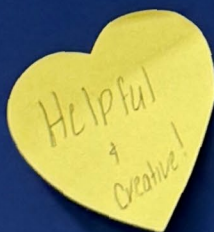
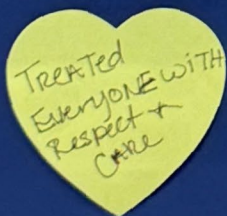
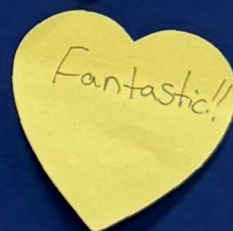
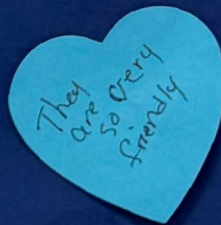
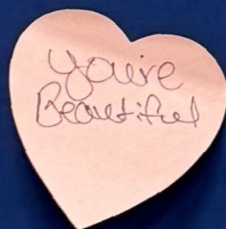
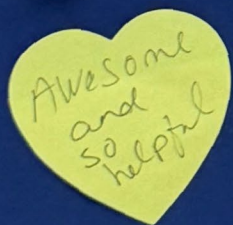
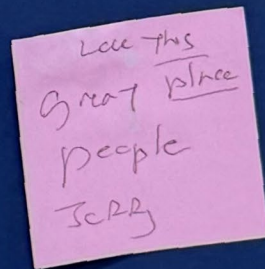
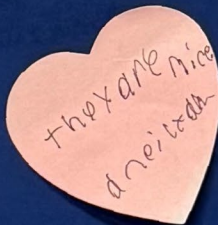
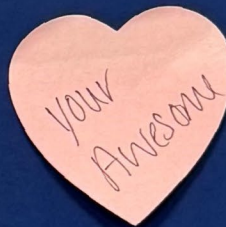
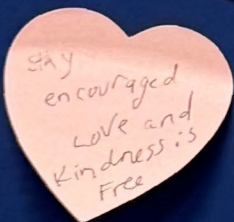
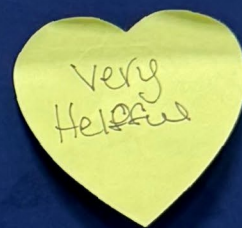
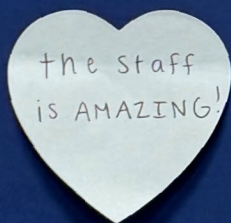
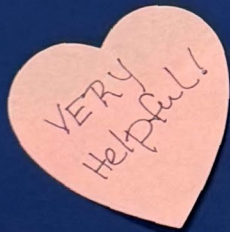
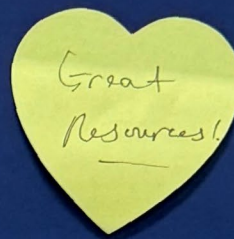
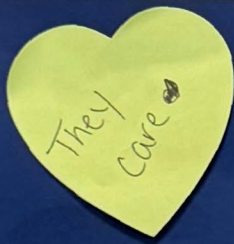
In an effort towards ongoing improvement PSF provided an annual survey to community partners with the hopes of gaining valuable information needed to improve our collaborations with partner agencies and to provide the most meaningful services and support to our patrons. We started this as a formal process in 2017 and then updated it in 2021 for the purposes of Grant data collection.

Surveys were provided to representatives from each of our estimated 90 Family Resource Center (FRC) Partners. Please note, that some partners had multiple representatives included based upon their involvement with the sites. Learn more about this survey in section 5.2.1.

Section 4-6-6: Informal Patron Input

Informal patron feedback often played a role in continuous quality improvement at each FRC. For example, an FRC manager recounting how patrons came to her looking for a safe family fun Halloween event that didn't include scary clowns resulted in the creation of an annual Harvest Festival.

I LOVE MY RESOURCE CENTER BECAUSE...



Section 5: Process Evaluation

This section discusses findings related to research questions exploring Fidelity, Reach and Implementation Drivers, Solutions and Barriers.

Section 5-1: Program Fidelity

To address the extent to which the project's key activities linked to building and sustaining community collaborations implemented with fidelity we look at three questions. The first question, addressed in 5.1.1 is focused on building and sustaining community collaborations and the next two questions, addressed in 5.1.2 and 5.1.3 are focused on Family Resource Center services.

Section 5-1-1: Building and Sustaining Community Collaborations

To assess the extent to which the project's key activities helped with building and sustaining community collaborations implemented with fidelity (F-1), we examined community collaborative formal agreements, the implementation of the RCAC, the Community Visioning Session at the NSFRC and results from the cross-site evaluation.

Continued Collaborative Engagement

A major strength of the Resource Center Model utilized at PSF's FRCs is its strong focus on community collaborations as a means of addressing identified needs in at-risk neighborhoods. Every service provided at the FRCs is free and responsive to the needs of the surrounding community as identified by community partners, community members of the targeted areas (patrons), and other stakeholders.

During this project, four Service Provider Agreement reviews were created, each revealing fluctuations in the number of active agreements,

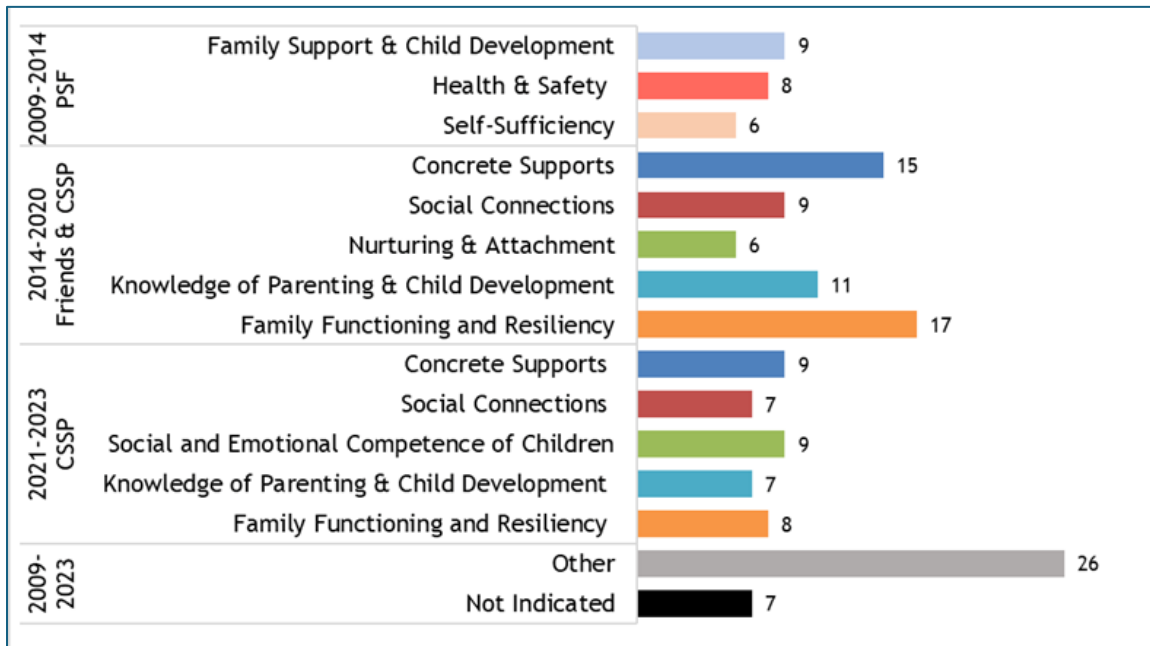
including Memoranda of Understanding (MOUs), Memoranda of Agreement (MOAs), Host Agency Agreements, and others. A historic review analyzed 97 active agreements from 2009 to 2020, followed by reports for 2021 with 105 active agreements, 2022 with 103 active agreements, and 2023 with 93 active agreements (Bernardin, et al., 2022, 2023; Pegram et al., 2022; Pegram, Lancaster, Merritt, et al., 2024). The Service Provider Array Report can be found here: [Evaluation - Partnership for Strong Families](#)

As the FRCs work to meet the evolving needs of patrons and adapt to changes in provider availability, they establish and dissolve contracts as necessary. According to the 2023 review (Pegram et al., 2024), the retention rate of service providers stands at 74%, demonstrating a strong commitment by community collaborators to maintain long-standing relationships with PSF and their support to the of patrons served by the agency.

In addition to partners with formal agreements, many providers contribute through one-time events, sponsorships, co-event planning, and tabling. Currently, there is no formal process in place to track or maintain records of these connections.

Figure 3 illustrates the 93 active formal agreements as of 2023, categorized by the categories or protective factors used at initiation. The chart reveals that each protective factor is supported by more than five agreements (Pegram, Lancaster, Merritt, et al., 2024).

Figure 3: Agreements by Category/Protective Factor Time Frame



Quarterly Resource Partner Meeting Participation

Since 2016, quarterly resource center partner meetings have been a key forum for PSF to collaborate with community partners. These meetings bring together local nonprofit, for-profit, and government agencies to discuss issues impacting families who utilize these services.

During this study, attendance was analyzed using meeting minutes and login sheets. For at least one quarter of each year, over 60% of meeting attendees were identified as collaborative partners, with rates reaching 89% in 2021, 79% in 2022, 76% in 2023, and 71% in 2024. To calculate these figures, a static copy of the 2024 RC Partner Email List for Alachua County was used to identify known partners. Attendees' names, excluding PSF, FRC, and CRN staff, were compared with this list. While attendance ranged from 9 to 19 participants per meeting, over 100 partners were invited regularly.

Partners associated with the NSFRC are addressed in the RCAC section of this report, and members from this group were informed when PSF's new resource center was announced to be co-located at the Richardson Community Center in Lake City, FL and when the corresponding ribbon-cutting was held on March 18, 2021.

Meetings followed two formats: standard meetings with minutes; and network fairs. Four network fairs were held during the study period. These events provided a platform for providers to connect, share resources, and collaborate without the distraction of serving patrons. Each fair included a guest speaker who presented updates on their program. Attendees expressed gratitude for the opportunity to network, which they felt was more productive than traditional tabling events.

Standard meetings included the results from annual Partner Surveys, when available, which collected partner feedback on resource center successes and barriers.

These results informed group discussions and contributed to a cycle of continuous quality improvement.

The group addressed several barriers over the years. COVID-19 had long-lasting impacts, restricting indoor activities, limiting library access and hours, and necessitating safety protocols for summer camps. Although family resource center visits and service levels returned to pre-pandemic numbers by 2023, challenges persisted into 2024. Additional barriers included the closure of the CPLRC in August 2023 due to a rise in out-of-home care cases and staffing transitions, including FRC manager changes in 2022 and 2024.

Notable updates during this period included revisions to Race/Ethnicity and Gender demographic data in the community module system, the SWAG FRC's 10-year anniversary celebration in June 2022, the establishment of a parent and community advisory council at the CPLRC, and new funding from the Children's Trust of Alachua County to support existing FRCs. These updates, combined with more community events, contributed to restored confidence and higher service utilization.

In 2023, the Community Resource Navigation (CRN) program became fully active, operating one day a week, at the Alachua Branch Library, High Springs Library, Waldo City Square, Hawthorne Area Resource Center, Porters Quarters, and Willie Mae Stokes Community Center. Looking ahead, the CRN program will explore new locations and PSF staff will focus on enhancing services for special needs populations, including individuals with disabilities.

Collaborative Engagement at Expansion Site

One of the initial steps in implementing the project was the establishment of the Resource Center Advisory Council (RCAC). The RCAC is a collaborative group comprising local stakeholders from nonprofit, government, and for-profit sectors invested in the community's well-being. This council was formed to help identify the activities and services to be offered at the NorthStar Family Resource Center (NSFRC).

An introductory RCAC meeting was held on January 16, 2020, followed by the start of regular monthly meetings in February and the formal approval of the RCAC charter in May. To ensure the Family Resource Center's responsiveness to community needs, the RCAC facilitated the creation of a Community Strengths and Needs Assessment, which was conducted from June 30 to October 19, 2020.

PSF had a long-standing presence in the County since 2004 as the area's child welfare agency and has been creating formal collaborative Memorandum of Understanding and Service Provision Agreements with community providers since 2012. Building upon these formal agreements, PSF worked to identify additional community collaborators. Combined, these collaborators were members of the Lake City community familiar with the needs of the community and representing a variety of social service agencies, including representation from the public child welfare agency (PSF), the Temporary Assistance for Needy Families (TANF) provider (Florida Department of Children and Families), the legal (Three Rivers Legal Services) and judiciary community, caregivers

with lived child welfare experience, the public health community (Florida Department of Health – Columbia County), and public housing partners (Columbia County Housing Authority), as well as other community members and partners providing direct services to children and families in the area.

In November 2020 a visioning session was held in the Richardson community center gymnasium. This session was planned and facilitated by the project’s implementation team, along with Paul DiLorenzo (a contracted consultant, formally from Casey Family Programs). Mr. DiLorenzo and representatives from Casey Family Programs have helped PSF and the Gainesville Resource Centers in the past, from which tangible results from dialog with the broader community that have helped to shape the goals and activities of our FRCs. Identified community leaders were invited to participate in the event. At this session the results from the Community Strengths and Needs Assessment as well as local community data pulled from the Casey’s Community Opportunity Map were shared. Feedback was solicited from community members and stakeholders, which was analyzed in a qualitative manner (identifying themes in responses, support, and recommendations) with an itemization and summarization of comments and recommendations for FRC operations going forward. Participants and topics of discussion included the vision for the Resource Center, as well as next steps needing to be taken, including establishing goals for the RCAC which were identified as:

- [Planning for a Family Resource Center opening in Lake City in 2021](#)
- [Helping PSF conduct a comprehensive Needs Assessment in Lake City](#)
- [Analyzing and discussing results of the Needs Assessment related to local service and resource needs](#)
- [Providing ongoing support to ensure that the needs of the community are being met](#)
- [Collaborating to identify and fill gaps in resources and services](#)

It was also advised that an RCAC charter would be developed and presented at the following meeting and encouraged for participants to spread the word about the RCAC to select individuals to increase membership.

RCAC meetings began, and their charter was approved in May 2021. RCAC members would help with the development of the opening of a Family Resource Center, which would eventually be named the NorthStar Family Resource Center (NSFRC), as well as assist in identifying the activities and services provided at the NSFRC on an ongoing basis.

As part of a formal review of this advisory council, meaningful attendance among identified partners were reviewed. It was hoped that the retention rate would be at 75% for those partners each year but results show much higher rates with 94.78% in 2020, 94.02% in 2021, 96.3% in 2022 and 94% in 2023.

This retention rate supports the findings of formal collaborative partner agreements, demonstrating the commitment of community providers to sustain their involvement.

From the first session on January 16, 2020, to the final RCAC meeting before the merger with the Columbia Children’s Partnership Council on August 23, 2023, there were 24 meetings attended by a total of 268 members, representing the following 29 different roles/groups:

- Career Source Florida Crown
- Catholic Charities
- Columbia County Government
- Columbia County Housing Authority
- Columbia County Public Library
- Columbia County School District
- Columbia County Sherriff’s Office
- Community Member
- Department of Children and Families
- Department of Juvenile Justice
- Florida Gateway College
- Health Department
- Healthy Families
- Hedges and Highway Outreach
- Lake City Police Department
- Lake City Housing Authority
- New Bethel Missionary Baptist Church
- New Hope United Methodist Church
- North Florida Pediatrics
- Partnership for Strong Families Board
- Richardson Community Center
- Suwannee Valley Community
Coordinated Child Care
- Three Rivers Legal Services
- United Way of Suwannee Valley
- Wellcare
- WIC

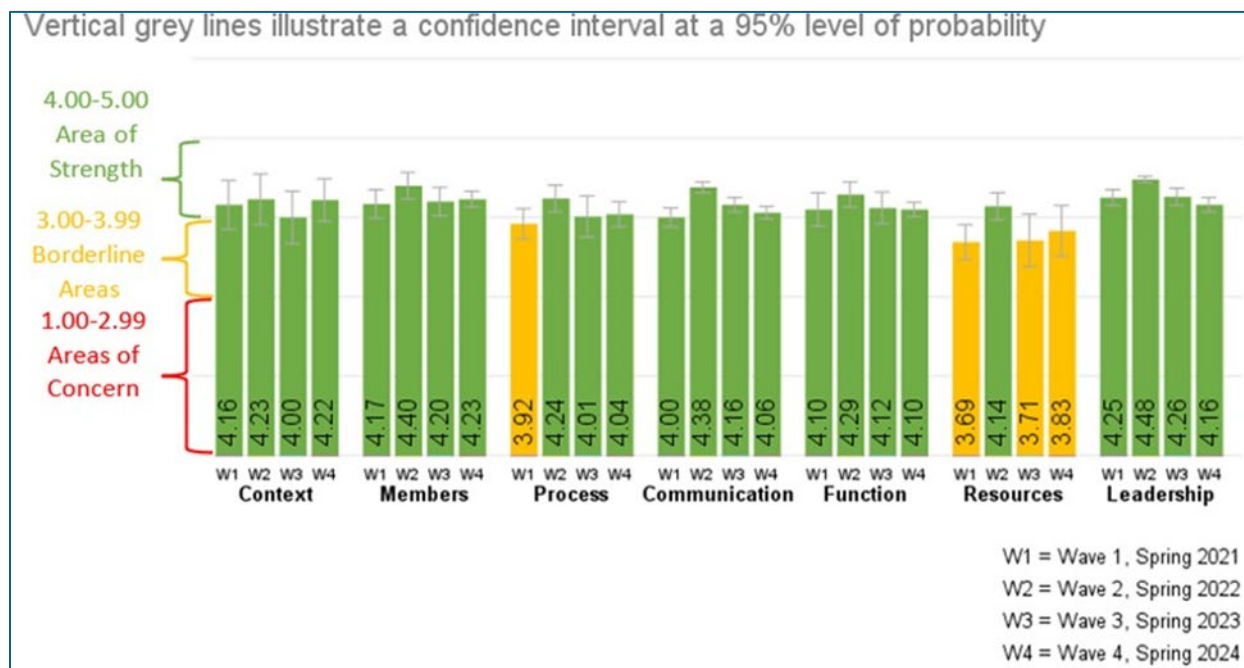
To learn more about the RCAC review, including results from the feedback group, a descriptive analysis and details of the membership analysis read Lancaster, Spoliansky, Pegram, et al., 2024.

Cross Site Evaluation

Abt Associates (now Abt Global) and Child Trends conducted a cross-site study of the Community Collaborations to Strengthen and Preserve Families projects, including Partnership for Strong Families. The study was conducted on behalf of the Administration for Children and Families. Community Collaborators were sent an email with an invitation to complete the Collaboration Assessment Tool (CAT), annually. These surveys were sent each year with wave one on 3/22/2021, wave two on 4/18/2022, wave three on 3/20/2023 and wave four on 1/22/2024. The survey respondents were not always the same and all data was viewed on an aggregate, not individual level. The response rates (proportion of invitees who responded to the survey) were 43% in Wave 1, 30% in Wave 2, 37% in Wave 3, and 36% in Wave 4 (See Figure 4). Read the full report at [Casey Family Programs Article](#).

For five out of the seven measures—context, members, communication, function, and leadership—PSF demonstrated consistent strength over all four years.

Figure 4: Partnership for Strong Families CAT Scores Waves 1-4



For the first wave PSF had a borderline score for process and resources. For the third and fourth wave PSF only had a borderline score in resources. There were no areas of concern identified. Borderline scores reflect averages that align with a rating (score of 3) meant to represent a response of “Neither Agree nor Disagree” to 10 individual questions. Five of these questions specifically address and attempt to gauge the extent to which there are tangible financial resources available, formally sought after (from partners and outside funding sources), and/or provided by partner organizations to support “coalition” operations. Activities and actions associated with the development and enhancement of the collaborative network of partner agencies for FRCs are supported by the Partnership for Strong Families. Although there are representative committees and councils (of community collaborators) for FRCs (e.g., the RCAC for NSFRC, see above) and PSF, these entities do not need to seek, establish, and sustain a funding mechanism to support and enhance their specific operations. The facilitation of partner meetings and associated activities/operations are supported by PSF and, when applicable, in-kind contributions of partners. These facts may have contributed to the observed borderline ratings related to aggregate resource scores given the level or lack thereof of applicability of select questions to operational processes and existing funding mechanisms.

Synopsis of Community Collaboration Measures:

The **context** questions assessed the coalition's collaboration with local agencies, community support and awareness, cultural diversity among members, perceived leadership, and the existence of supportive policies.

The **members** questions emphasize the importance of mutual respect, trust, collaboration, shared responsibility, and ownership among coalition members to achieve common goals and celebrate collective successes.

The **process** questions focus on the coalition's adaptability, regular meetings, inclusive decision-making, clear strategies, role alignment, conflict resolution, community needs assessment, progress measurement, and marketing efforts for support.

The **communication** questions highlight the coalition's effective communication systems that facilitate open dialogue among members and connect with local leaders and the broader community.

The **function** questions highlight the coalition's defined problems and goals, alignment with community needs, member agreement, and interdependence.

The **resources** questions focus on the coalition's financial support, future funding plans, resource contributions, member expertise, community resource identification, and use of cultural assets.

The **leadership** questions highlight the coalition leader's skills in organization, interpersonal relations, team support, fairness, goal focus, funding knowledge, and effectiveness.

Since community collaborators were asked to share their experiences working with Partnership for Strong Families, the high scores in context, members, communication, function, and leadership highlight the organization's success in building and maintaining strong collaborative relationships.

Section 5-1-2: Fidelity to the Protective Factor Framework

The following findings are related to these Fidelity Questions

To what extent are services offered/ integrated at all Family Resource Centers (FRC) sites implemented with fidelity in keeping with the Protective Factors Framework?

Are the provision of services/ activities across each Protective Factor classification (at each Family Resource Center) responsive to the perceived and expressed need (by patrons) for each type of service/ activity?

All services and supports provided at PSFs FRCs are developed based on the Center for the Study of Social Policy (CSSP) Protective Factors Framework³ that focuses on engaging families, programs, and communities in enhancing the following five protective factors:

Parental Resilience: Managing stress and functioning well when faced with challenges, adversity, and trauma.

Social Connections: Positive relationships that provide emotional, informational, and spiritual support.

Knowledge of Parenting and Child Development: Understanding child development and parenting strategies that support physical, cognitive, language, social, and emotional development.

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.

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.

SFSA Fidelity findings

Each FRC conducted a Strengthening Families Self-Assessment Process with a team including staff, community partners, and community members (referred to as community ambassadors). These team members, who were knowledgeable of FRC operations and community impact, came together to review the services and supports provided at the FRC. This team followed the Strengthening Families Self-Assessment Tool for Community-Based Programs guidelines developed by the CSSP.

This is a research-informed approach with the goal of determining how well the Resource Center has implemented services, supports, and programming to strengthen families which aligns with core strategies for building each of the protective factorsⁱⁱ. Each FRC completed this process once. The LPRC, the CPLRC and the SWAG FRC took several months to complete this activity in 2021 and into 2022; and the NSFRC completed the process in late 2022. Team members completed a self-assessment survey with a section for each protective factor. The team came together to discuss the survey results with the goal of reaching an agreement on the strengths and suggested areas of improvement to the fidelity of the services and supports related to each protective factor. This process resulted in a series of reports and recommended action items to build upon identified strengths and address areas needing improvement to better meet the needs of the community served by the Resource Center. There was a total of 18 action item documents created. The CPLRC had three action item updates covering the first and second half of 2022 and the first half of 2023 (Lancaster & Reed, 2023a, 2023b; Lancaster, Reed & David-John, 2022). The LPRC had five action item updates covering the second half of 2022, The first and second half of 2023 and the first half of 2024 ((Pegram & Nichols, 2023, 2024a, 2024b; Pegram, Nichols, & Bell, 2023; Snow, Kelly & David-John, 2022). The NSFRC had one action item baseline infographic (Lancaster, 2023) and four action item updates which covered the first and second half of 2023 and 2024 (Lancaster, Mobley & Perry, 2023, 2024a, 2024b, 2024c).

The SWAG FRC had five action item updates covering the first and second half of 2022 and 2023 and the first half of 2024 (Pegram, & Hoopaugh, 2024; Pegram & Nichols, 2023, 2024a, 2024b; Pegram, Nichols, & Bell, 2023).

The following information is based on the fidelity which focuses on whether services and supports were offered and implemented in alignment with the protective factor's framework utilized by each FRC. Altogether there were four reports on fidelity for each FRC (Perry, David-John, & Spoliansky, 2022; Perry, Lancaster, & Spoliansky, 2022, 2023; Perry, Snow, & Spoliansky, 2022)

These SFSA scores are summed for each protective factor where scores less than 50% of the possible total score are rated as low fidelity, scores between 50 and 74% are rated as moderate fidelity, and scores greater than 75% represent high fidelity.



The **Parental Resilience** services and supports were used with **moderate fidelity across all FRCs**. This protective factor is focused on managing stress and functioning well when faced with challenges, adversity, and trauma. Resilience may be related to parenting stressors such as navigating parenting during a marital separation or resilience to general life stressors such as gun violence. Some overlapping findings can be seen across FRC. For those FRCs with established parental resilience services (CPLRC, LPRC & SWAG FRC), safety procedures put into place due to COVID-19 and staff limitations were identified as limiting services/programming which support this protective factor.

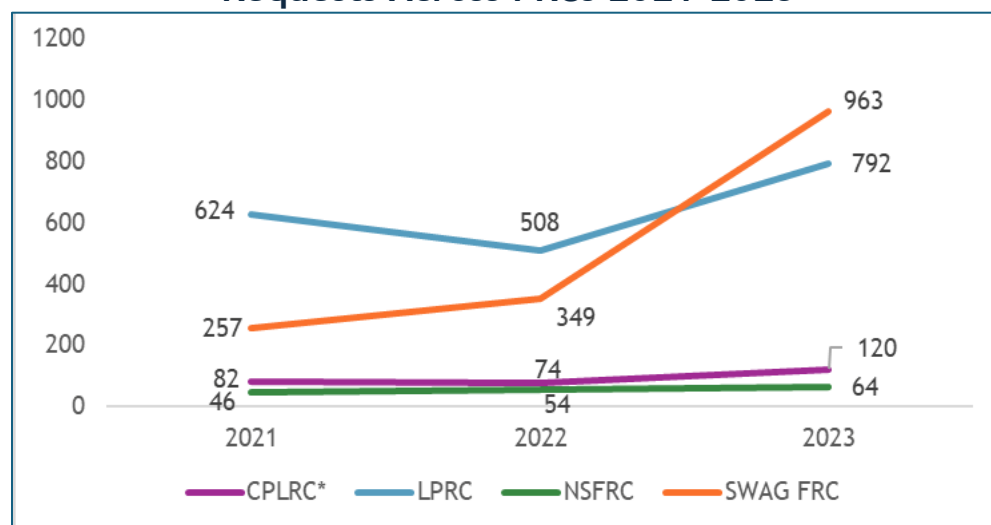
Additionally, participants at each FRC identified a need for additional parental resilience supports and engagement with fathers and male patrons.

Some identified factors limiting these services may include limited father specific agencies to engage with, "...fear of social services...[because]...most organizations [are] hooked to social services..." concern that collaboration between agencies would result in the sharing of personal/family information; stigma associated with receiving support (especially given gender/family role expectations); and discomfort with engagement and talking about problems.

Supports for immigrant and migrant individuals were also seen as possible areas of improvement at each FRC, though there were various levels of knowledge about local populations. One of the suggested supports was to ensure information and outreach materials are culturally appropriate and that all types of families are included at all levels of programming. It was also seen as important to lean on collaborative relationships with partners such as Catholic Charities in Gainesville (serving five counties, including rural communities) and Jacksonville (an office with immigration services) provides more specific supports (including concrete supports) focused on the needs of immigrant and refugee families.

Figure 5 shows that service requests which fall under this protective factor saw a large increase at SWAG FRC in 2023, a moderate to large increase at LPRC after a dip in 2022, and a minor increase at CPLRC and NSFRC.

Figure 5: Total Number of Parental Resilience Service Requests Across FRCs 2021-2023



The CPLRC achieved a moderate Parental Resilience fidelity score of 73.2%. The qualitative findings are briefly discussed here, thoroughly explored by Perry, Lancaster, George, et al. (2021b), and concisely summarized by Perry, Lancaster, George, et al. (2022b). According to The Cone Park Library Resource Center: 2023 Profile for Services and Supports, common services for this protective factor include IFAS Nutrition and Gardening where patrons learned about the health benefits of growing their own food, SHINE Medicare Counseling which provided free unbiased confidential Medicare counseling, and VITA Tax assistance through United Way. Other programming included readings from authors, one-on-one support, ESL tutoring, job club and more. (Perry, Lancaster, Merritt, et al., 2024).

Findings highlight CPLRC's effectiveness in supporting parents as decision makers, with staff perceived as informed, responsive, respectful, and committed to strengthening families through supportive engagement and affirmation of parent roles. Increased promotion and utilization of external Library resources, such as the track, were encouraged to address mental health

concerns, foster father involvement, and support overall well-being.

There was consensus agreement that suggest a quality level of support, concern, respectfulness, and affirming attitude of CPLRC and CP Library staff toward parents and all patrons. Staff are seen as competent in their ability to be responsive to families in stress...and...are potential stabilizing resources for enhancing parental resilience. Participants reported that CPLRC does well at honoring each family's race, language, culture, history, and approach to parenting as well as provide meaningful information and outreach materials. [When asked if CPLRC helped parents understand how to buffer their child during stressful times there was unanimous agreement.](#)

The LPRC achieved a moderate Parental Resilience fidelity score of 59.8%. The qualitative findings are briefly discussed here, thoroughly explored by Perry, Snow, et al., (2021a), and concisely summarized by Perry, Snow, et al. (2021b). According to The Library Partnership Resource Center: 2023 Profile for Services and Supports, common services for this

protective factor at LPRC include Adult Counseling, Adult Education Info, Budgeting, College / Professional Training, Community Scholarship, Disability Benefits Info, Domestic Violence Assistance, and an Employability Workshop (Perry, Pegram, Merritt, et al., 2024).

Findings suggest that staff are welcoming, respectful, and strength-based when assisting families experiencing a variety of crises and stresses. *Community Ambassadors note that staff “almost always say something positive,” are “gentle and listen,” and are “patient and try to support”.* Mutual respect and support are defining features of the relationship between LPRC staff and patrons. Some suggested areas of improvement included encouraging partners to come and speak and developing a Parent Advisory Committee to lead in outreach and empower leadership in Community Ambassadors.

The team agreed that LPRC staff are inclusive and respectful of all families' race, language, culture, history, and parenting approaches. Findings highlight the staff's professionalism, caring attitude, and proactive responsiveness to families experiencing stress. These qualities reinforce the view that LPRC staff are competent, compassionate, and skilled in supporting families and children facing various crises in a respectful and professional manner.

The NSFRC achieved a moderate Parental Resilience fidelity score of 70.1%. The qualitative findings are briefly discussed here, thoroughly discussed by Lancaster, Perry, Evans, et al. (2022a) and concisely reported on by Lancaster, Perry, Evans, et al. (2023a). According to The NorthStar Family Resource Center: 2023 Profile of Services and Supports, common services for this protective factor at NSFRC included Health Info, Homelessness Outreach, Job Searching, Legal Assistance, Resume / Job Application Assistance, and Tutoring for Adults (Perry, Lancaster, Mobley, et al., 2024).

There was extensive discussion on how to help parents feel supported and not judged, with concerns raised about the potentially stigmatizing wording of parent support groups. Additionally, there was interest in creating a parent advisory council to empower parent leaders and encourage broader parent involvement to *“make this center their center, not our center.”*

Many parental resilience supports at NSFRC are provided one-on-one. One parent in the middle of a marital separation shared his experience of the FRC manager who *“gave advice on not just how to deal with that situation but also how to have certain conversations with [the other parent] and keep the goal of what’s best for our son”* as the top priority. Though he was frustrated and found it difficult to come to talk to someone about such a sensitive subject, he commented that *“seeing a friendly face on the way in helped [the parent] to keep taking the steps.”*

The team wholeheartedly agreed that Dr. Mobley creates a *“...no judgement zone”* where *“you can be yourself and he won’t look down on you.”* NSFRC employs key staff and recruits’ volunteers with strong community ties, though some express concerns the volunteer process may hinder recruitment.

Overall, staff and volunteers are seen as understanding the stresses and barriers that parents and families face within the community and are committed in their work to support parents and enhance the well-being of families.

Patrons find the environment calming, with one community ambassador noting,

“before I leave my house, I’m very stressed, and when I get here [to NSFRC], it’s a comfort zone.”

The SWAG FRC achieved a moderate Parental Resilience fidelity score of 67%. The qualitative findings are briefly discussed here, thoroughly discussed by Perry, David-John, Benson, et al. (2021a) and concisely reported on by Perry, David-John, Benson, et al. (2021b). According to The SWAG Family Resource Center: 2023 Profile of Services and Supports, common services for this protective factor at SWAG FRC include Adult Mental Health Services, Budgeting/Credit Repair/Debt Reduction, College / Professional Training, Community Scholarship, Dental care information, Disability Benefits Info, Domestic Violence Assistance, Dress for Success/Workplace Behavior, and Exercise/Nutrition (Perry, Pegram, Merritt, et al., 2024).

Responses and feedback highlight a level of respect and understanding afforded parents by staff in actions that reinforce parental authority in dealings and interactions with their children. Staff actions include addressing difficult issues, helping families access additional support, maintaining confidentiality, and recognizing signs of crisis such as domestic violence, depression, mental illness, substance abuse, and more, with an appropriate response. *Specific note was made of efforts and consideration by staff across all SWAG FRC programs and supports to be respectful and inclusive of all families from different cultural, religious, and socioeconomic backgrounds.*

Suggested improvements include creating a parent and youth advisory council, engaging parents in program planning, and providing training for community ambassadors to support parent nights.

Historically, and during the time of this review, gun violence has impacted this community and taken the lives of its members (including youth). Community Ambassadors reinforced that families are “*stressed*” and that “*...parents and our community are grieving*” due to weekly gun violence and an erosion of trust within the community. Opportunities for stress relief are provided through referrals to support groups, informal engagement and individual consultations when needed.

Overall, findings highlight the positive impact of SWAG Family Resource Center, where staff affirm parents' central role, create a welcoming environment, and foster respectful relationships. Regular communication ensures these strengths are consistently upheld.

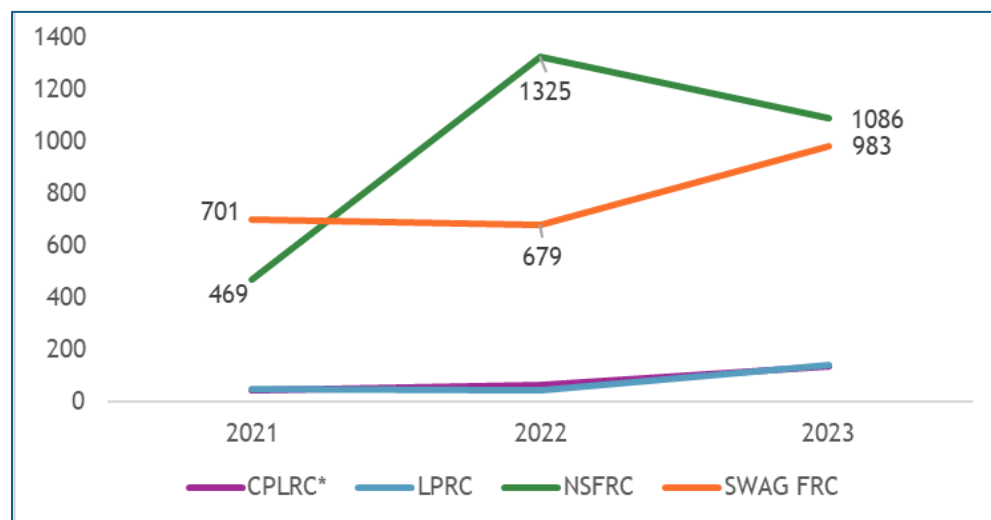


The **Social Connections** services and supports had a ***moderate fidelity score across all FRCs.***

This protective factor covers positive relationships that provide emotional, informational, instrumental, and spiritual support. Social connections may include having trusting relationships, having family/friends who provide emotional, spiritual, or practical support. It can also mean having a sense of connectedness which enables people to feel secure. Like with some Parental Resilience supports there were several Social Connections supports which were limited due to COVID-19 restrictions.

Figure 6 shows that service requests which fall under this protective factor saw a moderate increase at SWAG FRC, minor increases at CPLRC and LPRC. There was also a decline in this protective factor at NSFRC.

Figure 6: Total Number of Social Connections Service Requests Across FRCs 2021-2023



The CPLRC achieved a moderate Social Connections fidelity score of 58.10%. The qualitative findings are briefly discussed here, thoroughly discussed by Perry, Lancaster, George, et al. (2021a) and concisely reported on by Perry, Lancaster, George, et al. (2022c). According to The Cone Park Library Resource Center: 2023 Profile of Services and Supports (2024), common services for this protective factor at CPLRC include gaming for youth and adults, arts and crafts, movies, and educational opportunities such as learning about bats from the Lube Conservancy.

Relevant community events were highlighted, such as a fall festival created in response to fears of clowns and human trafficking, which also inspired a self-defense class. Building trusting connections, especially when seeking care for their youth was seen as important. Informal community events were seen as “*steppingstone to further connections.*” For example, patrons who didn’t know each other have been seen striking up a conversation in the parking lot at food distribution activities (a Concrete Supports service). Opportunities for connections to “*...happen naturally*” are intentionally built into many activities.

Suggestions for additional social connections activities and supports included parent-child activities, holiday celebrations, coffee breaks, outreach efforts like home visits to marginalized families, and transportation support.

Agreements on what CPLRC does well to facilitate mutual support highlight important strengths of the CPLRC leadership, staff and volunteers and feature, in part, behaviors and practices that have contributed to the perspective that “*...people generally do trust the resource center to be [there] for them.*” Team members reiterated these sentiments and see staff as positive role models with good communication skills who authentically care about patrons and families.

The LPRC achieved a moderate Social Connections fidelity score of 62.8%. The qualitative findings are briefly discussed here, thoroughly discussed by Perry, Snow, et al., (2021c) and concisely reported on Perry, Snow, Barli, et al. (2022c). According to The Library Partnership Resource Center: 2023 Profile for Services and Supports (2024), services for this protective factor at LPRC included the Chill and Grill Father's Appreciation Day designed to show fathers appreciation with fun, games and music, the Mother's Day Off Spring Brunch which included food, painting and comradery with other moms while their children were being supervised, and a Cookies and Cards Valentine's Day Event which included sweets and music to enjoy while making valentine cards for loved ones.

There was uniform consensus regarding opportunities and environments that reinforce informal connections among families and parents at the LPRC. Opportunities for parents to connect and socialize are usually facilitated through informal community events (e.g., holiday parties, etc.) rather than formal parent support groups. In addition, parents connect with one another during scheduled LPRC events and programs. Such has been observed during financial fitness workshops, as well as during regular concrete support events (i.e., Clothing Closet, Food Distribution events, etc.).

There was some interest in exploring the development of an in-house mentoring and support groups to be conducted by the Parent and community advisory council once formed.

It was highlighted that LPRC staff always aim to *"provide a path to the resource even if we can't provide the resource."* According to staff, *"It's a safe place to call"* and all attempts are made to *"Limit the 'no'"* as *"...people rely on us"*. LPRC staff are very apt at engaging parents/patrons in a supportive manner while utilizing and modelling appropriate social

skills in a variety of service and support contexts. Collectively, these responses reinforce that the LPRC is a significant source of support for families that encourages the development of mutual supports. *Team members shared that the "feel of the place is welcoming" and LPRC is seen as "a warm place to be."*

The NSFRC achieved a moderate Social Connections fidelity score of 72.1%. The qualitative findings are briefly discussed here, thoroughly discussed by Lancaster, Perry, Evans, et al. (2022b) and concisely reported on by Lancaster, Perry, Evans, et al. (2023d). According to the NorthStar Family Resource Center: 2023 Profile of Services and Supports (2024), common services for this protective factor at NSFRC include Community Walk, a daily walk around the neighborhood, community meetings, invites to an introductory parent and community advisory council along with community events such as the Black History *"Unsung Heroes of Columbia County"* which honored African Americans over the age of 90, a community health and wellness fair and a Toys for Tots distribution among others.

The SFSA Team spoke extensively of NSFRC's welcoming stance to all people and the supportive environment exemplified by interactions of staff and volunteers with patrons and families. There were some identified difficulties to for social connections including perceptions of NSFRC being *"...new on the scene"* in a community that reportedly has members which, *"...hold on to things that happened over 50 years ago."* Language such as *"parenting classes"* was noted as potentially stigmatizing, with informal parenting cafés suggested as an alternative.

While social connections were valued for shared support, concerns about safety and the impact of social media on family dynamics were noted. There was an expanded discussion on a proposed men's summit which brought up concerns for

fathers who have no social context for how to be fathers.

NSFRC is gradually building trust in the community. Insights reveal that the SFSA team strongly agreed that NSFRC staff were friendly and open to everyone, and the family resource center has a positive atmosphere. Staff were seen as modeling positive interactions during social events and making newcomers feel welcome.

One community ambassador shared *“NorthStar provides good support and is a safe place to bring my son, and the staff are friendly.”*

The SWAG FRC achieved a moderate Social Connections fidelity score of 55.3%. The qualitative findings are briefly discussed here, thoroughly discussed by Perry, David-John, Benson, et al. (2021c) and concisely reported on by Perry, David-John, Benson, et al. (2021d). According to The SWAG Family Resource Center: 2023 Profile of Services and Supports (2024), common services for this protective factor at SWAG FRC include SWAG community dinner, community meetings such as the Safe Space LGBTQIA+ group and community events such as tabling at the Human rights coalition of Alachua county’s community ID program.

The informal efforts of program staff to engage with families in a friendly, supportive, and helpful manner—including personally networking families to an array of collaborative partners and supports that can help strengthen family relationships—were well acknowledged. A strength of the SWAG FRC is that it is seen as a comfortable, welcoming setting with friendly, supportive, and helpful staff. The collaborative connections of the SWAG FRC and the SWAG Board, the scope and quality of community partners, and the SWAG FRC staff’s skills and authentic concerns serve as a foundation...that...encourage[s] newcomers and isolated or marginalized families to participate in program activities.

Suggestions for additional services include included starting a *“parent support night,”* utilizing green spaces, hosting farmers markets, wellness events, and holiday activities. Additional ideas included enhancing SWAG FRC’s social media, partnering with local landlords, distributing flyers, and forming a Parent or Community Advisory Group.

Team members reiterated sentiments that staff are positive role models with good communication skills who authentically care about patrons and families.

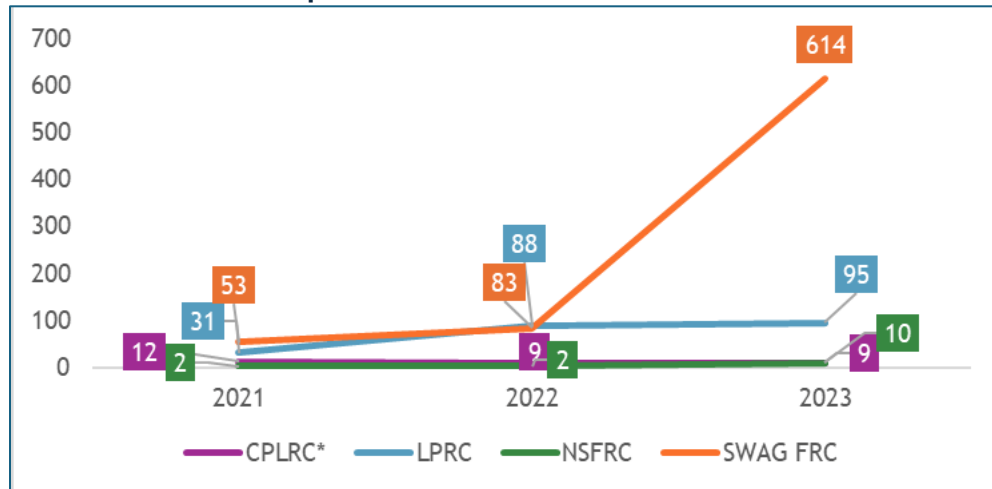


Knowledge of Parenting and Child Development services and supports were used with moderate fidelity score at the CPLRC and the LPRC and a low fidelity score at the NSFRC and the SWAGFRC. This protective factor is about understanding child development and parenting strategies that support physical, cognitive, language, social and age/stage-related information to foster secure attachments through nurturing, emotional development.

At each FRC participants were not aware of what training staff and volunteers may have. Many of the services related to this protective factor are provided in an individualized/private manner.

Figure 7 shows that service requests which fall under this protective factor saw a large increase at SWAG FRC, little to no change at NSFRC and CPLRC and a mild decrease at LPRC.

Figure 7: Total Number of Knowledge of Parenting and Child Development Services Across FRCs 2021-2023



The CPLRC achieved a moderate Knowledge of Parenting and Child Development fidelity score of 50%. The qualitative findings are briefly discussed here, thoroughly discussed by Lancaster, Perry, George, et al. (2021) and concisely reported on by Lancaster, Perry, George, et al. (2022a). According to The Cone Park Library Resource Center: 2023 Profile of Services and Supports (2024), supports of this nature were not very common at CPLRC and often provided as a direct one on one support with referrals to parents or individuals.

Ms. Reed was praised for her commitment and manner by which she engages and deals with children at the FRC; it was noted *“she’s always been good with kids”* and engages with children generally in a *“...gentle, calm, peaceful, reinforcing”* manner. Ms. Diane Johnson, the CPL Manager, who was also praised as being *“very good”* with children credits her collaboration with Partnership for Strong Families staff over the years with learning developmentally appropriate responses to children’s behavior.

Overall, findings suggest that age and developmentally appropriate responses are modeled for parents in interactions with children at the CPLRC and Cone Park Library. For example, collaboration at CPLRC’s summer camp ensured inclusivity for a child on the Autism Spectrum. Staff worked with the parents, CPL and CDS Family & Behavioral Health Services who directed the summer camp to create a plan allowing participation with accommodations for the child’s needs.

Past parenting classes were challenged due to inconsistent funding, low engagement, and presenter participation requirements. For this reason, support and referrals are provided case-by-case, with Ms. Reed building strong ties to resource providers, cutting barriers, and following up to ensure ongoing support. Community Ambassadors praise her non-judgmental aid for families in crisis or stress, offering advice, referrals, and encouragement.

The LPRC achieved a moderate Knowledge of Parenting and Child Development fidelity score of 57.1%. The qualitative findings were briefly discussed here, thoroughly discussed by Snow, Perry, Barli, et al. (2021) and concisely reported on by Snow, Perry, Barli, et al. (2022c). According to

the Library Partnership Resource Center: 2023 Profile for Services and Supports (2024), services for this protective factor at LPRC included 0-4 Parenting Classes / Information, Baby Bag, Brunch and Learn, Child Development Information, Early Childhood Learning and/or Childcare, Early Childhood Learning and/or Childcare event, Head Start-ECS.

Interactions with parents are collaborative in nature, allowing staff and parents to provide coordinated support for their children.

Collectively, findings suggest that LPRC staff demonstrate a strong understanding of child development through their actions and communications with parents and their children.

Suggestions included connecting parents and providing language and cultural interpreters. While no formal parenting classes were requested, the idea could be revisited if parents show interest. Instead, referrals to partner organizations offer targeted, engaging, and best-practice-based content. Community ambassadors and SFSA team members praised LPRC's collaborative partnerships and highlighted the staff's trusted, non-judgmental role in connecting parents to resources.

Findings suggest that supporting parents with parenting and child development is a focus and priority of the LPRC. Staff model appropriate interactions, create a comfortable environment for parents and their children, and make referrals for parenting support based on individual family needs.

The NSFRC achieved a low Knowledge of Parenting and Child Development fidelity score of 24.3%. The qualitative findings are briefly discussed here, thoroughly discussed by Perry, Lancaster, Evans, et al. (2023a) and concisely reported on by Lancaster, Perry, Evans, et al., (2023c). According to the NorthStar Family Resource Center: 2023 Profile of Services and Supports (2024), common services for this

protective factor at NSFRC include provision of child development information, isolated parent/child meetings, and the dissemination of select youth education information.

The lack of consensus agreement with 90% of the assessment questions addressing these topics, it was asserted, related to the fact that many members did not think these questions had applicability for NSFRC, especially the questions related to parenting education classes. Parenting education classes and dissemination of child development topics are not a primary focus at NSFRC due to possible stigmatization and negative connotations around formal parenting classes/groups.

When specific parenting and child development needs are identified by staff, efforts are made to provide a warm hand-off, connecting caregivers with community service providers. Team members acknowledged a need for enhanced knowledge of parenting and child development supports in a non-stigmatizing and supportive way, suggesting greater informal options than formal ones. Regardless, there was consensus (from direct observations, as well as knowledge and experiences working with staff) that key staff and volunteers' model developmentally appropriate interactions with children.

The caring approach to providing knowledge of parenting and child development was a great help to one couple in their 80s who adopted their 9-year-old great grandsons who started attending Homework Help. Staff and volunteers were able to sit down with the parents one-on-one and share modern parenting techniques, viewpoints, and manage expectations. Though Homework Help falls under the Social and Emotional Competence of Children protective factor it allows frequent opportunities for NSFRC staff to touch base with parents. These connections strengthen relationships with staff and provide

openings to discuss and model appropriate interactions with children.

The SWAG FRC achieved a low Knowledge of Parenting and Child Development fidelity score of 42.9%. The qualitative findings are briefly discussed here, thoroughly discussed by David-John, et al. (2021a) and concisely reported on David-John, et al. (2021b). According to The SWAG Family Resource Center: 2023 Profile of Services and Supports (2024), common Services for this protective factor at SWAG FRC included age specific and child development Parenting Classes / Information, Baby Bag, Brunch and Learn, Childbirth Services/Education, Early Childhood Learning and/or Childcare, Head Start-ECS, Healthy Families Info, Parent-Teacher Conference, and Youth Education info.

The individualized collaboration between staff and parents led some team members to give neutral responses, resulting in a low fidelity score. SWAG FRC staff support parents by attending IEP meetings, discussing behavioral challenges, and fostering informal connections at events. The community may be unaware of parental development supports at the Resource Center, as these are individualized rather than advertised group activities which the CSSP SFSA "tool focuses upon as measures of fidelity. Resource Center staff develop and maintain relationships with community partners who offer services and supports in a flexible and inclusive manner. Parents also receive regular, individualized check-ins, particularly from the FSF and Resource Center Manager, during drop-off or pick-up for tutoring or afterschool programs.

The SWAG FRC staff believe that family support is needed more, as compared to formal

parenting classes. The team supported community led parenting discussions and peer-to-peer programs but noted potential resistance and low participation, emphasizing the importance of using careful, effective language to promote them.

This review suggests that regardless of the low score, the staff at the SWAG FRC have a “see a need, fill a need” mindset that rings true when recognizing and supporting the parenting challenges experienced by families with children who have special needs.

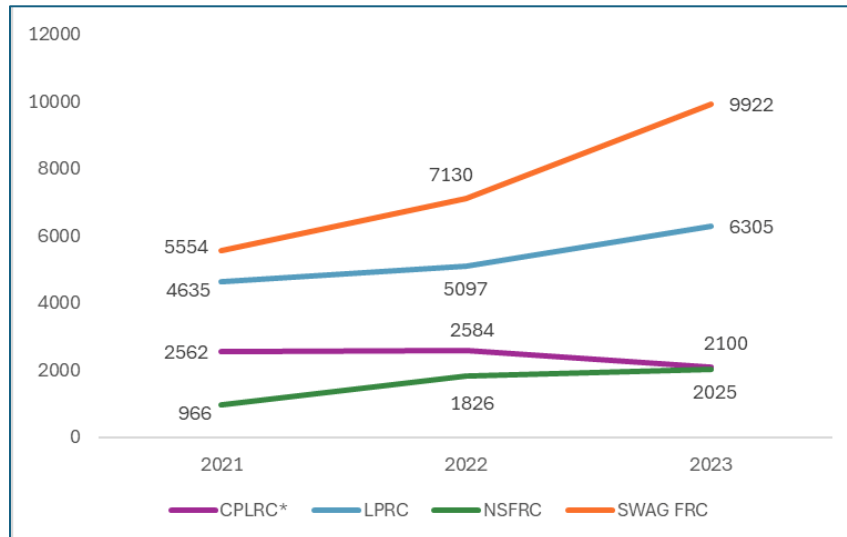


Concrete Support in Times of Need services and supports were used with high fidelity score at each FRC. This protective factor includes access to concrete support and services that address a family's needs and help minimize stress caused by challenges. These services empowering resourcefulness, access to necessities and service navigation.

These findings speak to the priority of concrete support needs within the communities served.

Figure 8 shows that service requests which fall under this protective factor saw a large increase at SWAG FRC in 2023, a moderate increase over time at LPRC and NSFRC. The decline at CPLRC may have been a result of a the FRCs closure in August 2023.

Figure 8: Total Number of Concrete Support Requests by Patrons Across FRCs 2021-2023



The CPLRC achieved a high Concrete Supports in Times of Need fidelity score (of 82.1%). The qualitative findings are briefly discussed here, thoroughly discussed by Perry, Lancaster, George, et al. (2022a) and concisely reported on by Lancaster, Perry, George, et al. (2022d). According to The Cone Park Library Resource Center: 2023 Profile of Services and Supports (2024), common Concrete Support protective factors at this FRC included assistance with food, clothing, phone, and housing/rent/utility.

Collectively, it was assessed that CPLRC is very responsive to the expressed need of patrons for select concrete supports and services and are perceived as a valued member and contributor to the community. This status is maintained given that supports and activities are implemented with clear fidelity to the CSSP model as such relates to how: parents are encouraged to turn to staff in the event of a crisis, staff proactively respond to signs of parent or family distress, and how staff and the program supports families experiencing extreme difficulties or crises.

In some instances, group members were not aware of individualized services which are

unadvertised and unknown to many but critical to those receiving the service. These extra efforts are made to help maintain the autonomy and respect the privacy of the patron.

Findings showed the caring and responsive actions and attitudes of CPLRC and CPL staff are a valued asset toward engaging and establishing trusting relationships with parents and families that, subsequently, enhance the likely receipt of needed concrete supports.

The LPRC achieved a high Concrete Supports in Times of Need fidelity score of 92.3%. The qualitative findings are briefly discussed here, thoroughly discussed by Perry, Snow, Barli, et al. (2022a) and concisely reported on by Perry, Snow, Barli, et al. (2022b). According to The Library Partnership Resource Center: 2023 Profile for Services and Supports (2024), concrete Support services for this FRC include assistance with food, clothing, holidays, housing/rent and phone.

Overwhelmingly, most concrete support items were identified as strengths of the LPRC by SFSA team members. Staff at LPRC were

perceived as involved, approachable, and responsive to parents and families in times of distress and crisis. As one community ambassador noted:

“most people turn to the resource center...you can get everything here.”

Another team member (community partner) highlighted “...the first place I go to [is the] *Library Partnership*” when she is seeking resources for a family because she knows that “...there is no judgement and stigma when people seek and receive...supports from LP.”

LPRC keeps current information on community services, including hours, fees, locations, eligibility, and language capacities, such as food pantries, healthcare, shelters, respite care, and legal support. They are also effective in linking patrons to these resources, advocating for patrons, coordinating, and working with partner agencies, and following up with patrons to see that their needs have been met. Library staff note that calls forwarded to LPRC are “*always addressed in an efficient and timely manner*” adding that there is “...never a call that is not responded to.”

The LPRC has a well-established reputation as a valued community resource that provides supports in a non-stigmatizing and helpful manner. The LPRC is effective in linking their patrons to other resources, advocating for patrons, coordinating with partner agencies, and following up to see that the family’s needs have been met.

The NSFRC achieved a high Concrete Supports in Times of Need fidelity score of 100%. The qualitative findings

are briefly discussed here, thoroughly discussed by Perry, Lancaster, Evans, et al. (2022b) and concisely reported on by Perry, Lancaster, Evans, et al. (2023b). According to the NorthStar Family Resource Center: 2023 Profile of Services and Supports (2024) common Concrete Support Services for NSFRC include assistance with internet access, faxing, notary services, infant care products, housing and school supplies.

There was uniform consensus that staff at NSFRC are caring, engaged and responsive to parents and families in times of distress and crisis. The SFSA Team highlighted staff’s knowledge of resources, personal attention, and caring attitude, noting that supports are provided without stigma and staff respond proactively and confidentially to family needs. *These attributes reinforce that NSFRC is (as noted by one member and agreed to by others) “...a caring place to be...people here truly care...”* If NSFRC resources can’t meet a patron’s needs, staff use community relationships to advocate and ensure a “warm handoff” to appropriate resources.

Housing circumstances are a major source of stress for families in the area served by NSFRC. Team members acknowledged the limited low-income housing options, no homeless shelters, and up to a two-year waitlist for low-income housing. Circumstances are dire for some homeless families, increasing their risk of being separated. The need for advocacy was emphasized, including forming a task force to address housing issues, gentrification, and lack of resources for improving residences and neighborhoods. Needs for food supports and technology training were also identified.

The team agreed that staff at NSFRC are proactive in responding to patrons and their families in times of stress and resourceful in their efforts to connect patrons to other community supports that can provide specific services.

The SWAG FRC achieved a high Concrete Supports in Times of Need fidelity score of 92.3%. The qualitative findings are briefly discussed here, thoroughly discussed by Perry, David-John, Benson, et al. (2022) and concisely reported on by Perry, David-John, Benson, et al. (2022). According to the SWAG Family Resource Center: 2023 Profile of Services and Supports (2024) common services for this protective factor include internet connection, assistance (food, clothing, phones, rent, utility, cash), help completing food stamps, support with IDs and voter registration, pet care support, holiday assistance and more.

The SWAG FRC staff are acknowledged as engaging and responsive to parents and families in times of distress and crisis. Efforts at providing concrete supports in a time of need were highlighted as its greatest strength. Staff focus on meeting basic needs as a foundation for ongoing support, helping promote stability and self-sufficiency through additional, individualized assistance.

The supportive environment and proactive efforts of staff to connect with patrons reinforces a caring atmosphere and helps build trust and meaningful relationships with families in the community. The SWAG FRC (along with the SWAG Board) are seen as a valued resource within the community. This status is sustained given that supports and activities are implemented with clear fidelity to the CSSP model as such relates to how: parents are encouraged to turn to staff in the event of a crisis, staff proactively respond to signs of parent or family distress, and how staff and the program supports families experiencing extreme difficulties or crises. One member noted that

“...we are in a crisis daily” within the SWAG neighborhoods.

Findings highlight strong collaboration between SWAG FRC and numerous community partners, providing a wide range of services to support families in need. This network, including the CHILD Center and the SW Health Clinic, ensure timely and effective provision of concrete supports to distressed families within the community.

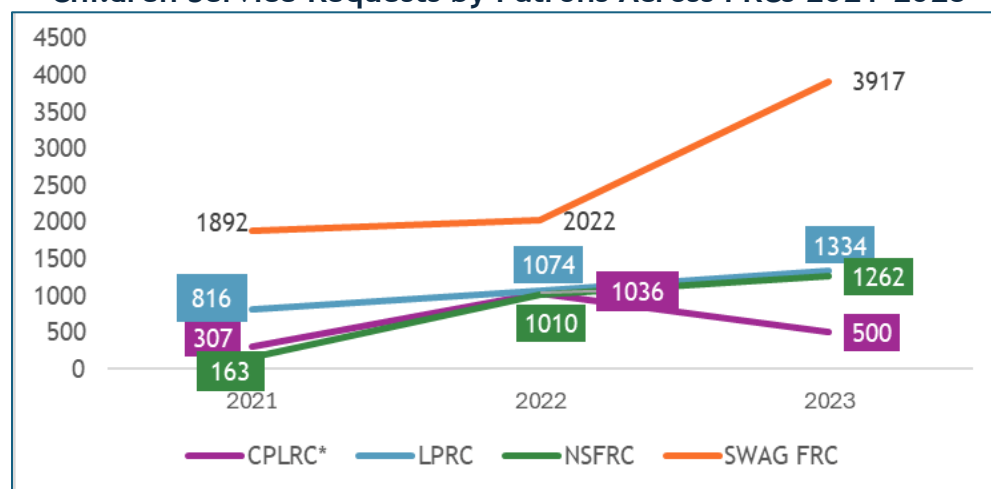


Social and Emotional Competence of Children services and supports were used with **moderate fidelity at each FRC.** This protective factor supports Family and child interactions that help children develop the ability to communicate clearly, recognize and regulate their emotions and establish and maintain relationships. This protective factor is designed to nurture positive parent-child relationships and skills.

In each of the FRCs there was some lack of knowledge on what trainings staff may receive in relation to this protective factor.

Figure 9 shows that service requests which fall under this protective factor saw a large increase at SWAG FRC in 2023, moderate increase over time at LPRC and NSFRC. The decline at CPLRC may have been a result of a the FRCs closure in August 2023.

Figure 9: Total Number of Social and Emotional Competence of Children Service Requests by Patrons Across FRCs 2021-2023



The CPLRC achieved a moderate Social and Emotional Competence of Children fidelity score of 58.3%. The qualitative findings are briefly discussed here, thoroughly discussed by Lancaster, Perry, George, et al. (2022b) and concisely reported on by Lancaster, Perry, George, et al. (2022c). According to The Cone Park Library Resource Center: 2023 Profile of Services and Supports (2024), common services for this protective factor at CPLRC include Homework Help, the Strong Kids Summer program, Girl Scouts and Story Time.

The attributes of Ms. Reed, volunteers, and interns and their genuine sense of commitment and concern for the well-being of children and families was acknowledged by the team. Ms. Reed reports she “...relies on the professionals [within PSF and collaborative partners] to get tips, advice, and consultation...” when needed to assist select families and those children with specific or special needs.

Staffing limitations and low attendance continue to pose challenges for some programs and supports related to this protective factor.

There is a clearly identified peer support mechanism between the CPL and CPLRC managers who consult with one another regarding identified social and emotional needs of select children that access services and supports. Ms. Johnson observed a young man struggling with reading at the library and, after consulting with Ms. Reed and the child's mother, recommended he join the CPLRC Homework Help program. Due to their established rapport, the mother was receptive and enrolled him.

Community Ambassadors noted that staff comfort both their children and others in a supportive way. As long-time patrons, they strongly agreed that Ms. Reed is “like family to us” and “she knows who we really are”.

Overall, findings showed that CPLRC staff go “...out of their way...” to accommodate the social and emotional needs, working directly with partners to identify plans for service delivery for patrons and their children.

The LPRC achieved a moderate Social and Emotional Competence of Children fidelity score of 57.1%. The qualitative findings are briefly discussed here, thoroughly discussed by Snow, Perry, Barli, et al. (2022a) and concisely reported on by Snow, Perry, Barli, et al. (2022b). According to The Library Partnership Resource Center: 2023 Profile for Services and Supports (2024), Services for this protective factor at LPRC include Academic Enrichment, Boys' Time, Capoeira, Child Activity, Child Resiliency Program – EVENT, Counseling for Child, Family Counseling, Girl Scouts, Homework Help, Kid's Health Info Child Activity, Mentoring, Parent-Child Activity, Parent-Child Activity – EVENT, Summer Program, and more.

During enrichment programs led by community partners such as Girl Scouts and Capoeira, LPRC staff and/or trained interns are always present to provide consistent expectations and behavioral boundaries.

Additionally, the LPRC partners with other organizations to provide programming specifically tailored to support social and emotional competence, such as a weekly social and emotional skills class co-facilitated with University of Florida Clinical Psychology graduate students.

Older youth have opportunities to share their cultural experiences and explore challenges of living in a diverse society. Recently, the LPRC created a Youth Advisory Board, where teens from East Gainesville met monthly to discuss cyberbullying and online racial discrimination.

SFSA staff team members noted that they often handle social and emotional support on a case-by-case basis, assisting parents with IEP or 504 processes or connecting them to providers for developmental, behavioral, or mental health services.

Findings suggest that staff, interns, and volunteers at the LPRC are consistently welcoming, warm, and empathetic toward children participating in programs and events. [When developing goals for youth in the Strong Kids Afterschool Program, staff listen to parents' observations and model how to actively involve their child in the discussion. Staff help students recognize their strengths and achievements and encourage them to identify their own goals and ideas for improvement.](#)

The NSFRC achieved a moderate Social and Emotional Competence of Children fidelity rating of 56.3%. The qualitative findings are briefly discussed here, thoroughly discussed by Perry, Lancaster, Evans, et al. (2022a) and concisely reported on by Lancaster, Perry, Evans, et al. (2023b). According to the NorthStar Family Resource Center: 2023 Profile of Services and Supports (2024), common services for this protective factor at NSFRC include Academic Enrichment, Counseling for Child, Family Counseling, Homework Help, Summer Program, and Tutoring for Child.

One of the ways NSFRC staff help parents foster their child's social and emotional development is through interactions in and around the Homework Help program. Another program at NSFRC, the Youth Leadership Council, created a time-limited, grant-funded position known as the Community Leadership/Equity Coordinator (Nov 2021-Sept 2022). The Youth Leadership Council facilitated group-based activities for teens, providing them opportunities to voice concerns and engage in activities such as group gardening and creating professional biographies.

[Community Ambassadors agreed that staff make efforts to engage with parents in a supportive manner that has led to discussions about realistic expectations for children's behaviors.](#) This includes

appropriately redirecting misbehavior, the value of connectedness and patience (and allowing a child “...to be a child”).

Team members assessed NSFRC staff as attentive, responsible, caring, trustworthy adults and role models that perceive all patrons (parents, children/youth, and adults) as valued persons deserving opportunities and hope for enhancing their well-being.

Staff and volunteers highlighted the importance of working collaboratively with parents in supporting their children’s social and emotional development... [including]... helping parents/caregivers and children understand the importance of distinguishing emotions from behaviors, the need to reinforce appropriate social skills, and the value of structure and personal vision.

Many staff and volunteers have an abundance of experience working with children, youth, and families within the community. An involved discussion highlighted these experiences and how opportunities present themselves to address children and youth’s social and emotional needs.

The SWAG FRC achieved a moderate Social and Emotional Competence of Children fidelity score of 52.1%. The qualitative findings are briefly discussed here, thoroughly discussed by David-John, et al. (2022a) and concisely reported on by David-John, et al. (2022b). According to The SWAG Family Resource Center: 2023 Profile of Services and Supports (2024), common services for this protective factor at SWAG FRC include Academic Enrichment, Book Checkout, Boys' Time, Cade Enrichment, Capoeira, Child Activity, Counseling for Child/ Family, Girl Scouts, Girls on the Run, Harn Museum of Art, Healthy Start - Group Connections, Homework Help, Kid's Health Info, Mentoring, Parent-Child Activity, Peaceful Paths Healthy Relationships for Kids, Playroom, Summer Program, SWAG Beautiful, Teen Activity.

There is no formal programming which allow staff to help parents understand age-appropriate social and emotional skills and behaviors, but it is typically done via one-on-one situations as staff observe children exhibiting challenging behaviors or behaviors that are not developmentally appropriate.

SWAG FRC staff complete required and supplemental cultural competencies trainings. One suggestion provided by the FSF to enhance understanding and appreciation for individuals from different backgrounds is to include volunteers and interns in cultural competency trainings.

During homework help and other afterschool programming, FRC staff ensure children are consistently responded to in a warm, supportive manner. [The FRC staff have an open-door policy which allows children to know staff are there to support them beyond academics.](#) It was reported that staff talk to parents about their child’s development, needs or challenges in a one-on-one setting.

SWAG FRC staff, interns, and volunteers meet youth “*where they are at,*” individualizing personal goals and program elements to meet each child’s needs. [The SWAG FRC’s Family Support Facilitator highlights: “we don’t just help with homework; we help children recognize their emotions and learn how to deal with them in a positive manner.”](#)

Patron/Parent Focus Groups Fidelity Findings

The utilization of focus groups of patrons (herein referred to as Patron Feedback Groups) receiving services and supports at each of the project family resource centers (FRCs) aided, in part, with answering questions related to fidelity of services and supports to the protective factor model. Consenting patron participants were randomly assigned to participate in one of two Patron Feedback Groups at each FRC (eight groups in total) in 2023. Efforts were made to enroll between 6 and 10 participants per group with 75% of participants serving as caregivers of children (an additional stratum for selection). Although focus patron feedback groups are FRC specific, patrons at each were asked the same questions. Some commonalities of perspective across FRC focus groups were identified that permit an aggregation of findings (and identification of an aggregate content saturation level) in select analyses denoted in this and other reports.



Detailed information related to the methodology guiding the sample selection of patrons to participate and other procedures and limitations associated with the evaluation design can be found in a separate brief (see Perry, Lancaster, & Pegram, 2024). Further, a separate guide was

produced that highlighted in detail the processes and protocols utilized in the development and selection of questions (nine in total), forming and facilitating the patron feedback groups, and the structure for the content analysis (see Institute for Child and Family Services Research, 2023).

Fidelity of services and supports to the Protective Factors Framework was demonstrated in content responses to several questions, the majority of which aligned with a specific protective factor. In terms of fidelity, qualitative feedback/comments (in quantity and scope) paralleled findings generated from the SFSA team's reports/findings and were perceived in alignment with the proportional distribution/frequency of service requests across the FRCs. For example, there were a higher abundance of statements detailing the receipt and description of specific concrete supports received by participants than any other protective factor. Concrete supports represented 66% of all (aggregate) service requests, was the modal protective factor service request at every FRC and were rating as being provided with high fidelity at every FRC by each SFSA team. Services and supports associated with other protective factors may have been mentioned with less frequency, seemingly proportional to their availability. Regardless, cited services and supports by patrons appear to represent the classification by each FRC of services and supports across respective protective factors. Further, where it was known (from the SFSA findings) that services and supports may have been implemented with moderate or low fidelity (in aggregate and/or across individual FRCs), occasions existed where feedback or suggestions were provided by patrons that could enhance fidelity in the future (resources permitting).

Concrete Support in Times of Need

The first two questions (and one sub question) asked: 1) *How does [FRC name] assist individuals and families with immediate needs?* 2) *What resources and supports do they provide? Have they been helpful?*

Content analyses revealed two themes (i.e., Concrete Supports and Supports for Parents and Children) in responses that highlighted an itemization of specific activities, services, and supports received by patrons that were consistent with the categorization and implementation of services and supports intended to provide Concrete Supports in Times of Need, promote Parental Resilience, and enhance the Social and Emotional Competence of Children for patrons (Perry, Lancaster, Pegram & Spoliansky, 2024). The theme of Concrete Supports includes the identification of a host of services and supports classified as concrete supports at each FRC (e.g., food distribution, clothing closet, faxing, notary, baby items, transportation assistance, rent/utility support, school supplies, holiday assistance, etc.) within the context of 148 statements. This theme is also represented by comments that reflect upon the general and specific needs identified within the communities served for concrete supports and the response of the FRCs to address these needs. These needs may vary based on individual patrons' circumstances and the availability of other community resources. The response of the FRCs with respect to this protective factor includes cited practices and processes that highlight (with praise) the efficiency at which needs are addressed and accessibility of services and supports given the location of the FRCs in communities/neighborhoods in need; thus, allowing for the provision of valued resources and supports that many families would not have had access to otherwise. Subsequently, the itemization of these supports was highlighted in response to other questions; for example, in feedback detailing their importance in minimizing economic and

familial stress (Pegram, Perry, Lancaster, et al., 2024a).

Parental Resilience

In response to the first two questions, the theme of *Supports for Parents and Children* focused, in part, on content and a subtheme related to services and supports that promote parental resilience (48 content statements). Existing categories of parental resilience supports at the FRCs include (for example) the provision of health/medical information, job/employment assistance, budgeting and financial literacy, mental health/stress management, community safety events, and adult education supports (Perry, Pegram, Lancaster, Merritt, et al, 2024; Perry, Lancaster, Mobley, et.al., 2024). Although all these supports were mentioned within focus groups (across all FRCs), highlighted focus in response to the first two questions focused on supports associated with job/employment assistance and enhancing budgeting and financial literacy skills (Perry, Lancaster, Pegram & Spoliansky, 2024).

It is important to note that although there are specific classifications of services at the FRCs (denoted above) targeting the promotion of parental resilience, patrons noted on numerous occasions how the provision of supports related to other protective factors (e.g., concrete supports in the time of need, social connection events, enhancing knowledge of parenting and child development, along with the social and emotional competence of children) are a source of stress relief and aid with promoting parental resilience. (Perry, Lancaster, Pegram & Spoliansky, 2024; Pegram, Perry, Lancaster, et al., 2024a; Lancaster, Perry, Pegram, et.al., 2024b). This speaks to the interdependence and symbiotic nature of protective factors and how efforts at strengthening one protective factor can have a residual impact on another, contributing to a broader strengthening of families. For

example, when asked to identify and discuss FRC activities that help patrons better deal with the demands of parenting during stressful times, there were 61 comments that detailed the ways in which the FRCs help alleviate the varied forms of stress (65 additional statements spoke to factors contributing to and defining experienced stress) faced by caregivers in the community, aiding with the promotion of resilience. Patrons found relief through formal services offered at their FRC, such as food distributions, the clothing closet, homework help programming for youth, and one-on-one meetings with the FRC manager or family support facilitator, among others. Some patrons also found that the atmosphere of the FRC, including staff attitudes, were comforting and stress reducing themselves (Pegram, Perry, Lancaster, et al., 2024a).

Given that caregiving stress was one of the most significant subthemes of stressors, patrons identified programs for youth (e.g., after-school homework help programming, a social and emotional competence service) as a notable source of stress relief for caregivers. This relief, in part, represented one form of caregiver respite. Patrons discussed the importance of caregiver breaks, emphasizing their crucial role in giving caregivers the opportunity for personal time and respite from the demanding responsibilities of parenting. Caregivers often emphasized that just coming into their FRC, even without accessing formal services, provided a valuable respite from their otherwise demanding days. Patrons viewed the FRC as a space where they could unwind and recharge amidst the challenges of their daily responsibilities. One patron noted that they'd *"been leaving the house and coming to SWAG in the morning just so I can get relief."* Similarly, another patron shared they *"always come up here in the daytime like when I need to destress from like mom brain."*

According to these patrons, the FRCs can serve as more than just service hubs (albeit an important function, itself a form of stress relief); they can act as essential sanctuaries of relief and respite, providing caregivers with a space to retreat as needed, rejuvenate, subsequently enhancing resilience.

An additional aspect of the FRCs is the ability of some patrons to have one-on-one sessions with staff, offering a compassionate ear and support for personal and complex needs following a thorough assessment of the individual's situation. Staff members are equipped to provide direct assistance or guide patrons in connecting with the relevant social service agencies for mental healthcare, insurance, benefits, and other essential resources (activities all aligned with the parental resilience protective factor). Patrons often sought the advice and guidance of the FRC staff with their personal problems and needs, even if the FRC was not able to directly assist them with their issues. As one patron emotionally shared *"I mean I'm coming in here in tears... and so I've gotten counseled."* Through these experiences, patrons have found the FRC and FRC staff to be safe and trustworthy enough to share detailed, personal stories and ask for feedback. It is important to acknowledge, however, that some FRCs faced understaffing during the time of the patron feedback groups, limiting this service/opportunity for select patrons.

Many patrons commended the FRC for delivering services and supports in a kinder and more effective way than other social service agencies utilized. FRC staff were perceived as dedicated to cultivating a safe and respectful environment within the FRCs, open to anyone seeking services. In an environment where individuals may be dealing with an array of challenges and stressors, the presence of approachable and understanding staff members makes the process of accepting and receiving

assistance even easier. Subsequently, many caregivers express that the FRC atmosphere is inherently stress-relieving. The FRC as a dynamic hub (one-stop-shop of resources) not only consolidates essential services but also fosters a sense of community and support, creating a space where individuals feel empowered to seek assistance and enhance their overall well-being.



Although select services and supports (some informal) identified above are important for stress-reduction and resilience promotion, patrons highlighted additional services needed for caregivers to better cope with every day and community stressors (see Lancaster, Perry, Pegram, et.al., 2024b) and promote resilience. Among 288 total content responses to specific questions on this topic, the theme of “accessibility” emerged prominently with 68 (23.6%) statements, representing the highest count among all subthemes. Accessibility needs were identified as the need for free services, language considerations, transportation needs, and the expansion of the FRCs. Each of these accessibility needs addresses a barrier that induces stress for caregivers and/or community members. In addition, patrons identified a need for services that focus on “*enhancing well-being.*”

This theme, represented by 61 statements (21.2%), included services conceptualized as peer supports, mental health supports, and holistic services, which address a wide range of needs for

the whole person. Peer support suggestions included the FRCs providing space and more opportunities for patron peers to meet and form peer support groups. Patrons also perceived a greater need for mental health services and supports. The identified need for mental health support could be addressed, it was suggested, by the FRCs facilitating additional/more mental health providers on site, mental health classes, workshops, and therapy groups. Finally holistic service suggestions included a Zumba class, Narcotics Anonymous (NA) and Alcoholics Anonymous (AA) groups, grief support groups, life skills groups, financial assistance workshops, emotional regulation sessions, entrepreneurial workshops on sales and advertising, self-discovery or career discovery programs, nutrition education, cooking classes, money management including credit awareness and bill-paying skills, youth activities, and any other activities identified by patrons as needed.

The theme with the third largest count of statements ($n = 52$ or 18.1%) focused on learning opportunities, suggests a need for educational classes for all ages. Subthemes were categorized by adult learning, youth learning, and those learning opportunities which allow for skill and passion exploration. Examples were provided of suggested opportunities that could meet patrons' needs and contribute to future self-improvement and self-actualization. The theme of “*childcare*” was represented by 49 statements and perceived as crucial, especially for caregivers managing job responsibilities and balancing the dual roles of caring for both young and elderly family members. The provision of childcare (within the community) was seen by participants as having a substantial impact on reducing stress and enhancing overall well-being. Formal and affordable childcare options are limited within the communities served; and not a primary focus of the FRCs. The need for respite was mentioned in 25 statements by patrons across the different FRCs. Although FRCs and select staff were

praised for the informal respite currently provided, additional respite services encompassing activities that afford caregivers a brief break or relief from challenging or demanding responsibilities were suggested. These can include additional in-house (time limited) childcare so caregivers are able to access services and supports (within the FRC and community) that they wouldn't be able to access otherwise, along with the facilitation of caregiver interactions that caregivers may not otherwise have access to.

Social and Emotional Competence of Children

In response to the first two questions, the theme of Supports for Parents and Children focused, in part, on services and supports that promote the social and emotional well-being (i.e., competence) of children. A total of 50 comments were identified with this subtheme, where the most common supports for children and youth focused on a variety of after-school enrichment programs and supports, including homework help and mentoring activities. Remaining comments affiliated with this subtheme mentioned assistance received through referrals to Meridian Behavioral Health

Care, and peer consultation among parents (at the SWAG FRC) for children with social and behavioral health concerns, Girl Scout group participation (at the SWAG FRC and the LPRC), assistance with holiday/Christmas gifts (e.g. Toys for Tots, other family holiday events at all the FRCs), and education and enrichment program during the summer months. Caregivers commended the FRCs particularly for their after-school homework help programming, in which dedicated staff and interns offer support to children of all ages, helping with homework and providing additional educational opportunities. All these services and supports align with planned and implemented activities linked to the

Social and Emotional Competence of Children protective factor. Further, patrons with children (across all FRCs), expressed gratitude for the “very supportive” direct services provided, and staff efforts to coordinate/collaborate with partners to ensure their children received tutoring, needed one-on-one help, and outside assistance for behavioral health issues/problems a child may exhibit that the parent(s) were struggling dealing with (Perry, Pegram, Lancaster, & Spoliansky, 2024). The provision of these services was perceived as a source of stress relief for caregivers (Pegram, Perry, Lancaster, et al., 2024a), with patrons and caregivers affirming (46 statements) elsewhere that the program activities at each FRC supports and promote the social-emotional development of youth in the community (Pegram, Perry, Lancaster, et al., 2024b).



Supportive and meaningful interactions between FRC staff and youth (through formal and informal programs and services) were said to be of benefit to their social-emotional development by guiding youth in a positive, appropriate way, while additionally modeling behaviors (including effective and appropriate parenting strategies) for caregivers and other patrons to internalize and use in their own lives. Here, staff were perceived as role models, manifesting kindness, patience, problem solving skills, appropriate discipline, love, and concern for the youth in their programs, including (for example) the ability to remain calm and respectful while working with children/youth who were perceived as acting

disrespectful and disruptive. These processes contribute to a youth friendly, kind, caring, and comfortable atmosphere at the FRCs, where young individuals feel a sense of belonging, actively seeking to be at the FRC, and where parents trust the care provided by FRC staff to their children. The environment is said to be comfortable, welcoming, and inclusive, fostering a strong sense of belonging for youth.

Parents/patrons perceive youth services as safe, supervised spaces where young individuals genuinely want to be. In these environments, youth reportedly feel at ease, connect well with staff, and experience a sense of care, resulting in their happiness, comfort, and excitement to see friends. (Lancaster, Perry, Pegram, et.al., 2024a; Pegram, Perry, Lancaster, et al., 2024b).

While the FRCs do offer many enrichment activities to youth in their homework help programs, patrons provided many new ideas that could give youth a variety of skills and knowledge sets to further enhance their social-emotional development. These include expanding childcare options within the community, additional life skills (e.g., sewing, cooking/culinary, etc.) and financial literacy/knowledge development among youth, year-round/summer programming and camps for older youth/teens, other youth learning opportunities (e.g., nutrition, mental health, emotional regulation/education, music, computer skills, employability skills, etc.), counseling, peer-to-peer learning and mentoring, and generally more youth targeted and frequent community events to keep children from getting involved in dangerous or harmful activities within the neighborhood while providing a space where young people may connect with one another and develop a sense of community. (Lancaster, Perry, Pegram, et.al., 2024b; Pegram, Perry, Lancaster, et al., 2024b).

Knowledge of Parenting and Child Development

Knowledge
is
Power

Services and supports linked to the Knowledge of Parenting and Child Development protective factor are few (across all FRCs) and, subsequently represent the lowest amount (approximately 1%) of all aggregate service requests over the timeframe of the project. Thus, there was limited reference in the patron feedback groups of the fidelity of specific services and supports linked to this protective factor. However, patrons did highlight that FRC staff actively listened to patron statements and responded efficiently and effectively to specific needs related to their child(ren)'s development. Most of these needs focused on physical and concrete support needs for a child. These included (for example) aiding patrons directly with the provision of diapers, infant clothes, infant formula, food, and assisting/collaborating with patrons (new or expectant mothers) to enroll and secure resources through the WIC (Women, Infant, and Children's) program. The inherent and instrumental value of staff engaged in active listening with an authentic interest in the well-being of patrons is manifested in an abundance of praise and affirmations denoted by patron participants. These interactions, along with other collaborative initiatives, have reportedly been positive in their efforts to assist parents/caregivers in addressing the developmental (whether physical, cognitive, and socio-emotional) needs of their children (Perry, Pegram, Lancaster, & Spoliansky, 2024).

Although the attentiveness and responsiveness of staff to the developmental needs of children (and parents efforts to address these needs) are important elements and processes for strengthening this protective factor with families, patrons did identify distinct services and supports that could be enhanced or implemented to better address (increase fidelity with) this protective factor. These included the provision of learning opportunities for adults (including parents/caregivers) on topics including (but not necessarily limited to) anger management, coping skills/strategies, mental health/wellness, and parenting strategies and supports, especially when dealing with (as one patron characterized) “*kids that’s outta control*” or children with specific behavioral and developmental needs (e.g., ADHD, etc.) Select patrons shared program ideas they have seen elsewhere, including a program called “*Mommy Dollars*” which involved having parents come in the center to watch parenting videos which are chosen based on the child’s developmental age. Once parents had collected enough of these “*Mommy Dollars*” they would have access to a resource room to make purchases. Peer-to-peer learning strategies led by an educated moderator that offered practical knowledge on parenting (and other practical issues) were suggested, along with parent/caregiver support groups focused on mutual aid for parenting and child development issues (Lancaster, Perry, Pegram, et.al., 2024b). These qualitative findings reinforced the perceived value (resources permitting) to expand services and supports (enhancing fidelity) for this protective factor.

Social Connections

Services and support linked to the Social Connections protective factor represent (in aggregate across all FRCs) the third largest proportion (approximately 8%) of service requests, although the second largest proportion (28%) at the NSFRC. Within the context of the

patron feedback groups, opportunities for Social Connections were linked to specific planned and secondary/supplemental benefits received through engagement of patrons at each FRC. For example, within a theme of comments identified as a Web of Support (see Perry, Lancaster, Pegram & Spoliansky, 2024) select content and subthemes spoke to the opportunities for, and the value of relationships and connectedness, including social relationships that developed between patrons. Patron comments within this theme focused on the value and benefit of promoting social connections (through social connection activities) and dual/reciprocal supportive relationships among patrons across the FRCs. Patrons did identify a series of activities participated in that meant to promote social connections. One key element in the assessment of fidelity of FRC services and supports in promoting social connections for families, is the extent to which activities and programs at FRCs are welcoming and inclusive, as well, as the extent to which families are made to feel comfortable interacting with others and participating in activities (CSSP, 2015). When patrons were asked if these dynamics were present at the FRCs, four dominant themes across the FRCs were manifested (see Lancaster, Perry, Pegram, et al., 2024a), all of which reinforced the fidelity to these processes across all FRCs. The first of these themes involved the ways that staff attributes created and sustained a welcoming and inclusive environment. An additional theme revealed the importance of a comfortable environment at each FRC, and level of ease patrons felt while at the FRCs, creating a level of comfort in asking for help. Patrons spoke to the FRCs efforts of inclusivity, detailing how different groups are made to feel included, reinforcing a perspective that the FRCs were welcoming, friendly, and inclusive, all essential elements for social connection activities (and enhancing engagement and potential benefit

across other protective factor services and supports). In conclusion, patron knowledge and utilization of resources and support across Protective Factor classifications reinforces the value and responsiveness of FRCs to child and family needs from a prevention standpoint. Qualitative feedback suggests that the FRCs engage, as intended, in practices that are consistent and faithful

to a Strengthening Families perspective through a Protective Factors model framework. Although the total amount and scope of all services may vary for each protective factor and across each FRC, such is a byproduct of prioritization of need and available resources to expand service and support options, which subsequently impacts the level to which fidelity is maximized in accordance with the CSSP measures/standards.

Section 5-1-3: Resource Center Service Trends

This section summarizes key findings from an analysis of secondary data related to services and supports received by patrons from the CPLRC, LPRC, NSFRC and SWAG FRC between 2021 and 2023 (see Figure 10). PSF's network of FRCs 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, 2020; 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). The most recent Profile for Services and Supports reports can be found here: [Refinement - Partnership For Strong Families](#)

Figure 10: Percentage of All Service Requests by Protective Factor for All Family Resource Centers Combined (2021-2023)

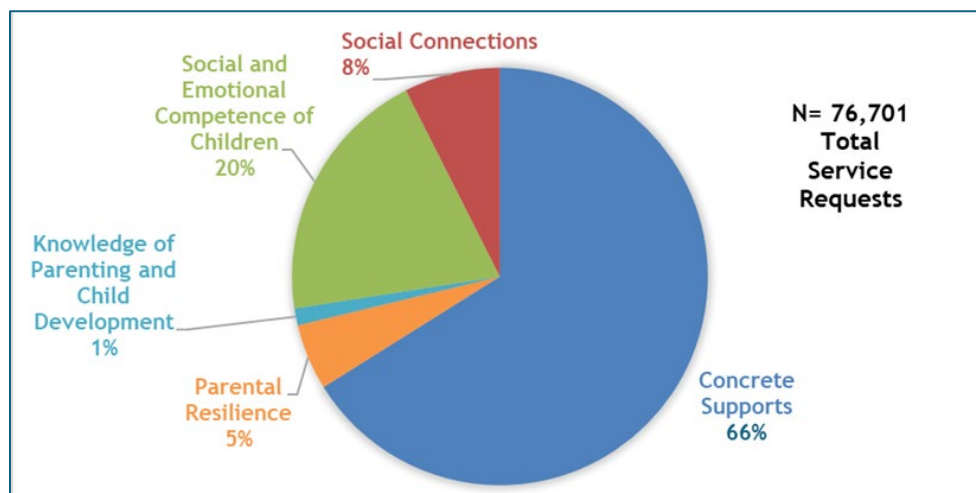
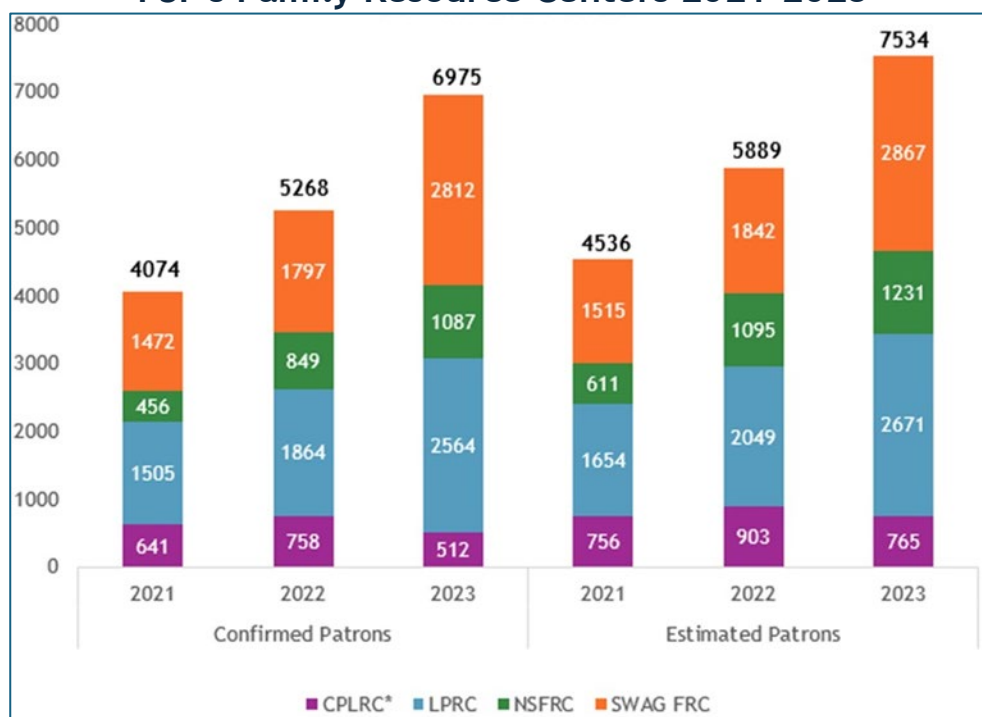


Figure 11 shows the similarities between the confirmed and estimated patrons. Confirmed patrons represent an unduplicated count of individual patrons that provided identifying information upon making their first service/support request that was used to create a unique “ClientID” number within the Community Module Data System, allowing their service history to be tracked over time. However, services and support are provided to patrons regardless of their willingness to identify themselves and have a ClientID number generated. Estimated patrons include the total number of confirmed patrons and an estimate of a non-duplicate count of patrons linked to service requests (using a rate calculation/formula specific to each FRC for each service year) with no affiliated client identification numbers. See Perry, Lancaster, Mobley, Merritt, Spoliansky, & Edelman (2024) for an example of the estimated patron rate calculation method.

Figure 11: Confirmed and Estimated Number of Individual Patrons Requesting Services at PSF's Family Resource Centers 2021-2023



Section 5-1-4: Responsiveness to Expressed Need

Patron needs are gathered from a variety of sources, some collected at every visit and others during the establishment of a new center. On a recurring basis, patrons are asked to fill out a "*Getting to Know You*" (GTKY) form at check-in. This form records their basic demographic information and the services or referrals they requested, which are then entered into the Community Module. Patrons can also use this form to write any notes they wish to discuss with the staff. Once the information is entered into the system, staff indicate whether the service was delivered or not.

The rate of service delivery at each Family Resource Center (FRC) is very high, revealing a consistent meeting of service needs. In 2023, CPLRC recorded 2,865 service requests, with 2,559 delivered, 306 lacking delivery status, and none marked as not delivered. At LPRC, of 8,667 services, 7,929 were delivered, 735 lacked delivery status, and 3 (<1%) were not delivered. NSFRC reported 4,447 service requests, with 4,354 delivered, 69 lacking delivery status, and 24 (<1%) not delivered. At SWAG FRC, 16,422 service requests were made, with 15,245 delivered, 1,060 lacking delivery status, and 177 (1%) recorded as not delivered.

In addition to the GTKY form, patrons are encouraged to fill out a one-page satisfaction survey. These surveys are compiled into quarterly reports and used to assess service delivery and patron needs for continuous quality improvement. FRC staff are also frequently in contact with patrons and take the time to ask patrons about their needs in a private, individual setting, thus giving patrons the opportunity to provide informal input. A community ambassador in one of our patron feedback groups gave an example of a response to her informal input (Perry, Pegram, Lancaster & Spoliansky, 2024):

“About a couple of weeks ... I came up with ... this idea ... and when I brought it to her [the program manager] she said ‘oh, [speaker] that is so great ... that could help some of the families that is on low income’ ... [adding, that the program manager said] ‘I didn't think of that ... thank you ... Thank you so much ... we'll get on it ... It would be kind of good for us, the neighborhood.’”

To assess and determine community needs before establishing the NSFRC, a Community Strengths and Needs Assessment (CSNA) was administered from June 30 to October 19, 2020, with a total of 339 respondents, most of who resided in the 32024, 32025, and 32055 zip codes in Lake City, FL. Below, the services identified by the highest count of community members in the CSNA are compared to the NSFRCs 2023 profile of services and supports report (Perry, Lancaster, Mobley, et al., 2024).

The CSNA identified the highest need concrete support services as housing, utility, and mortgage assistance, food and food stamps, transportation, and clothing. In 2023, the NSFRC saw the highest number of concrete supports provided during times of need associated with the School Supply Giveaway event and individual school supply distributions (n = 578). Food assistance was delivered both individually (n = 48) and through a weekly Panera Bread pastry giveaway event (n = 338), benefiting 386 patrons—a 9% increase from 2022. The next highest number of services included the use of computers, printers, and copiers (n = 368); broadband/internet access (n = 190); housing, rent, and utility assistance (n = 180); clothing assistance (n = 110); and fax use (n = 88). While transportation remains a challenge due to the lack of public transit services, every other need identified in the CSNA for this protective factor was addressed by the most utilized services at the NSFRC.

The greatest needs related to Knowledge of Parenting and Child Development, as identified in the CSNA, included childcare, early childhood services (ages 0–6), parenting resources, and support for parenting children with special needs. In 2023, only ten reported services or supports were linked to promoting knowledge in this area. These included the provision of Child Development Information (n = 6), Parent/Child Meetings (n = 2), and Youth Education – Info (n = 2). Due to the sensitive nature of private family dynamics, these services were delivered one-on-one. In each instance, NSFRC staff offered tailored support to parents, occasionally involving their children.

However, given the private nature of these interactions, it is challenging to determine whether the needs identified in the CSNA were fully addressed. Though this is a less used service, according to Perry et al.'s report (2023) “SFSA Team members collectively asserted that there is a need for enhancing knowledge of parenting and child development for many parents (and grandparents) in the community served by the NSFRC. However, there was consensus that such should not be done via the use of formal parenting classes. Following a description of select alternative means, the team suggested that a more informal or supportive situation/activities, like Parenting Cafés, would be best to consider.

The greatest parental resilience service needs identified by the CSNA included job assistance, legal assistance, adult education/GED classes, health information, money management/financial literacy, counseling (individual and family), and substance abuse services. In 2023, a total of 64 documented services were provided for this protective factor. Among these, 20 (31.3%) involved CRC visits, followed by the provision of health/medical information (n = 16), and requests for individual-based job and employment assistance (n = 12) which included services such as job searching and resume/job application assistance. CRC visits were instances where patrons participating in the larger evaluation study visited a Community Research Coordinator (CRC) as part of scheduled evaluation activities but did not receive additional services during their visit. Unlike the job board listed under concrete support services, job searching, and application assistance were more hands-on supports. Services such as job assistance, adult education, and health information had high rates of utilization in 2023, aligning with the needs identified by the CSNA. However, services such as legal assistance, money management/financial literacy, counseling, and substance abuse services were referred less frequently. The NSFRC has plans to expand some of these services, including collaborating with the opioid grant to enhance substance abuse support services.

The greatest social connections identified in the CSNA included community events, adult social activities, children's activities and events, and youth activities/events (ages 12+). The NSFRC's 2023 service data highlights several opportunities for social connection: the Community Walk (n = 496 participants, representing duplicate counts as walkers frequently participated throughout the year), community events (n = 383 participants), community meetings (n = 187 participants), patrons' participation in the Parent and Community Advisory Council (n = 16), and participation in a parent focus group (n = 4). Many identified CSNA needs were addressed with high levels of service utilization in 2023. Notably, most events were designed to be inclusive for both adults and children, making them difficult to categorize specifically as adult-, child-, or youth-focused. Additionally, the homework help program provided opportunities for social connection among the youth involved, further supporting social connections within the community.

The greatest social-emotional competency services identified by the CSNA included tutoring/homework help, afterschool programs, summer programs, and parent-child activities. The NSFRC's 2023 service data highlights offerings such as Academic Enrichment, Counseling for Child, Family Counseling, Homework Help, Summer Program, Summer Program – EVENT, and Tutoring for Child. Among the 1,262 service/support requests linked to this protective factor—a 25% increase from 2022—78.6% (n = 992) were associated with the Homework Help program.

Of the needs identified in the CSNA, parent-child activities were the only service need without high service utilization. One possible reason for this is that many events are designed for families across multiple age groups, making them inclusive of all families but not specific to parent-child activities alone.

Section 5-2: Reach Process Evaluation Findings

This section focuses on how the FRCs collaborated with partners and engaged patrons, aligned with research questions R-1 through R-4, as discussed in the subsections. In Section 5.2.1, we examined how relationships with collaborative partners were built and sustained, including advisory groups, formal agreements, and overall partner involvement. Section 5.2.2 highlights feedback from the May 2024 RCAC focus group to demonstrate how partners remained engaged and responsive throughout the project. In Section 5.2.3, we assessed how well FRC patrons reflected households in the highest-need areas by analyzing service utilization and study participation data. Finally, Section 5.2.4 explores how patrons perceived the value and usefulness of core services, drawing on surveys, SFSA findings, and group discussions.

Section 5-2-1: Reach Process Evaluation Findings

To assess the depth and functionality of relationships established and sustained between each Family Resource Center and its collaborative partners in delivering essential services and support to patrons (R-1), we examined advisory groups, formal agreements, and partner engagement.

Throughout this project, three key advisory councils played a notable role: the Parent and Community Advisory Council, the Community Research Advisory Council at the CPLRC and the Resource Center Advisory Council at the NSFRC.

The CPLRC's Parent and Community Advisory Council (PCAC) was established as a direct outcome of the Strengthening Families Self-Assessment (SFSA) process, which concluded in December 2021. One specific outcome from this process that led to the creation of the group was Action Item #3: Explore and consider a formal collaboration between the Cone Park Library Resource Center (CPLRC) and the Cone Park Library (CPL) to establish a parent advisory council/committee.

In February 2022, a wrap-up meeting was held for the CPLRC's SFSA group, where participants received both long and short reports summarizing the findings from the SFSA process, as well as a framed copy of their professional photo. Four months later, on June 24, 2022, the PCAC began operating, holding nine meetings through January 24, 2023. At that point, the group shifted focus to their primary initiative, the community garden, and met an additional 12 times through June 26, 2023, for a total of 21 meetings (see Figure 12).

The first four meetings involved two community partners, both of whom had worked with the CPLRC's SFSA process and PSF staff to outline the council's plans, design an application to join the group, develop a mission statement, and plan a community event to invite local families and community providers to be part of the group.

The group decided to be a Parent and Community Advisory Council rather than just a parent advisory council because there was a desire to include community providers who had been involved in the SFSA process and to engage with Columbia County Library leadership. Unfortunately, the invited library staff member was unable to attend the first meeting, and before the second meeting, was involved in an incident with library patrons that eventually led to their departure and replacement. The new library manager, unlike the previous one, had not attended any SFSA meetings. Instead of attending meetings, the new manager received updates on the group's progress from the CPLRC manager.

The group followed the planning steps as outlined by the Family Support Network in which staff were trained. The group's identified mission statement was: "As parents and community members, we advise the Cone Park Library Resource Center. We are people helping people to build strong relationships within the east Gainesville, FL community." The community dinner, held on September 2022, had nine parents/caregivers in attendance with their eight children. During that dinner, the FRC manager spoke of the services provided to families at the CPLRC, as well as the intention for creating an advisory council.

Early in the process, PCAC members identified a desire to focus on the community garden, which consists of several garden plots on the same property as the library and had fallen into disrepair. One of the attendees, who was working on the garden by herself, suggested that it could be a great initiative for the group. The garden could support fresh vegetables, provide social connections, and act as a stress reducer for attendees. This initiative aligns perfectly with the group's mission statement, and another identified action item from the SFSA process.

Action Item #5: Efforts should be made (perhaps in consultation with a newly formed Parent Advisory Council/Committee) to explore the collaborative development and implementation of possible parent-focused activities/events aimed at stress relief.

After some efforts to clean the plots, the group began to meet regularly between PCAC meetings to work on the community garden with the FRC manager. This time became an opportunity for patrons to speak with each other and the FRC manager in an informal setting on a regular basis and eventually became the sole purpose of the group. Though formal meeting minutes were not taken during community garden events, they nonetheless gave patrons an opportunity to discuss their desires and provided the FRC manager a chance to inform them of needs. After the June harvest in 2023, the group met to celebrate the fruits of their labor with a potluck in which vegetables they had grown were cooked and shared, with plans to reconvene for the next season's planning. It is uncertain if the group continued to meet after the CPLRC closure in August 2023.

Figure 12: CPLRC PCAC Attendance



The Community Research Advisory Council (CRAC) was also established as a result of the SFSA process. During the February 2022 wrap-up meeting, every SFSA participant at the CPLRC agreed

to continue in an advisory council role for the research project as needed. The group received six-month action item updates as they were developed from their SFSA efforts. This group met twice as requested, and there were no instances where the evaluation team asked the group to meet, and they did not comply. In September 2022, the group met to discuss the action items, including the development of the PCAC and the 2021 service data. The team was surprised by the large number of services categorized under the Concrete Support in Times of Need protective factor. The evaluation team also reviewed the presentation materials that would be used at the 2022 Florida Children and Families Summit. Attendees were pleased with the video, which would be part of the presentation and featured a community ambassador from CPLRC and SWAG FRC.

The second meeting of this group took place in November 2022, where attendees were tasked with reviewing the identified patron feedback group questions. Attendees were presented with several options for each question and asked to rank their importance and suggest rewording when appropriate. Their responses, along with input from other groups, helped the evaluation team select the best questions to use during the patron feedback groups.

The Resource Center Advisory Council (RCAC) began in January 2020 following the identification and invitation to key community partners to join this initiative to support the development of opening a family resource center in Lake City, FL. A thorough review of this group's activities, NSFRC formal agreements and the corresponding feedback group findings can be found (Lancaster, Spoliansky, Pegram, et al., 2024).

From the visioning session on November 9, 2020, to the final RCAC meeting before the merger with the Columbia Children's Partnership Council on August 23, 2023, there were 24 meetings attended by a total of 268 members.

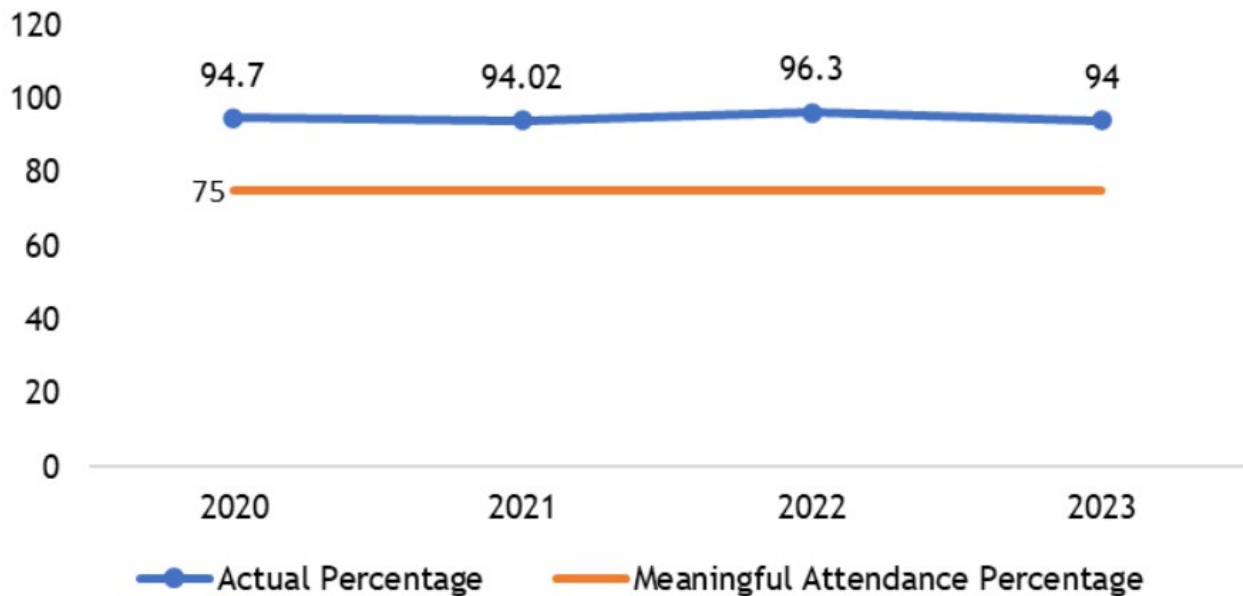
The RCAC charter states that membership should:

...reflect the community as a whole. Each member will be a contributor to this effort individually, professionally, and as an agent for the interests of the NorthStar Family Resource Center and the organization they represent, and the membership should include a strong multi-system collaboration with representatives.

Consequently, a selection of sectors was identified. Each attendance entry was assigned a sector based on the member's role and the identified sectors from the RCAC charter. Three additional sectors—local government, employment sector, and public facilities—were added to account for all participants.

Meaningful attendance for the RCAC was defined in the evaluation plan as achieving a minimum of 75% attendance by specific invited partners during at least three-quarters of the scheduled meetings throughout the year. Findings show that attendees far exceeded that percentage with 94.7% in 2020, 94.2% in 2021, 96.3% in 2022 and 94% in 2023 (see Figure 13). This demonstrates that the identified individuals were committed to attending regularly and actively engaging with the NSFRC.

Figure 13: Percentage of RCAC Attendance Exceeding the Target for Meaningful Participation from Specific Partners (2020-2023)



Formal agreements, which are discussed at greater length in 5.1 are being used at each Family Resource Center to solidify services for patrons. A major strength of the FRC Model utilized at PSF's FRCs is its strong focus on community collaborations as a means of addressing identified needs in at-risk neighborhoods. There has been a total of 125 contracts developed over time and as of 2023 there is a network of 93 active community partnerships across Gainesville and Lake City FRCs. This number only reflects those official agreements that have been created, there is a much wider array of community partners without official agreements that help with referrals and events regularly. To learn more about the formal agreements with the FRCs review by reading Pegram, Lancaster, Merritt, et al. (2024).

In an effort towards ongoing improvement, PSF's annual survey is provided to community partners connected with each FRC in the hopes of gaining valuable information needed to improve collaborations with partner agencies and to provide the most meaningful services and support to patrons. Findings for the question *'What is your involvement with the Family Resource Center(s) and/or our Community Resource Navigation Program?'* (choose all that apply) reveal the types of connections those community partners have with PSF. The most responses (50.68% of 73) were for collaborating partners, 39.73% provided for outreach and tabling, 35.62% were referral-based service providers, 10.96% were on-site service providers, 5.48% were funders. There were also 20.55% selections for 'other' which shows the dynamic nature of collaborative relationships. The question *"How long have you worked with PSF's Family Resource Centers and/or our Community Resource Navigation Program (in any capacity)?"* reveal the maintenance of meaningful relationships over time. Corroborating the RCAC's meaningful attendance findings 87.84% of respondents (N = 74) answer a year or more and 39.19% of those answering five years or more.

The maintenance of meaningful relationships was also identified in results from Collaboration Assessment Tool (CAT). When asked, when their organization become involved in a PSF

collaborative the greatest majority of answers chose the longest available option of ‘more than 3 years ago.’

Meaningful relationships have been honored through inviting collaborators to participate in FRC community events and welcoming them to be a part of our research, uplifting the role they provide in the community. In some cases, FRC community events have over 20 community providers providing outreach on site to patrons. The SFSA process was a critical research activity in which community providers made valuable contributions. Each team was composed of staff, community ambassadors who used services at FRCs and community providers. Two community providers participated at the NSFRC SFSA group, three at the SWAG FRC, two at the CPLRC and five at the LPRC.

The FRCs also hosted Provider Network Fairs, offering local service providers the opportunity to learn from one another. Attendance was limited to providers serving the area, excluding patrons, which created a space for professional exchange without the pressure of client-facing responsibilities. Each fair featured a highlighted provider who delivered a brief presentation about their services. Feedback from participating providers was consistently positive, with many noting that the fairs supported mutual learning, strengthened professional relationships, and provided new insights they could bring back to their work with patrons.

Collaborative partners came out to table and support the "Remembering Richardson High School: A Historic Dedication," a celebration of Richardson High School's official designation as a place of deep social and educational meaning in the African American community in Columbia County, Florida. The Richardson high school was the main school that black students attended in Columbia County before integration. The celebration included an unveiling of a new monument, as well as music, visual storytelling, and tributes to classmates and teachers, this day will honor a historic site whose well-chronicled and significant contributions are long overdue. The day's events also included music, historical reflections, slide show presentations, and food trucks. Watch a video on this event here: [Alumni at an old historic high school in Lake City reunited for a special dedication](#)



Section 5-2-2: Responsive Engagement

To address research question R-2, we examine the qualitative results from the RCAC feedback group conducted in May 2024 as part of the RCAC review. While some quantitative examples have highlighted participants maintaining engagement through meaningful attendance, this section will highlight qualitative insights collected.

Looking first at how RCAC members were active and engaged, results showed that RCAC members consistently served as ambassadors in each meeting by leveraging their connections to share updates on resource center developments. One of the advisory council's identified strengths was its open communication, a point of agreement from multiple participants in the feedback group. One participant specifically shared how their role as an ambassador functioned:

It helps everyone to get the word out to the community that we serve about what's available because you know, then we find out, I find out something that, you know, some other agency does, and I can take that back to the library. And we can refer people there and that you know, that works all around for all the partners.

Another participant shared how ambassadors could be used to enhance further community support, suggesting that leveraging the influence of “*power players in this group...* [could be used] *to support some of the identified needs that you have*” with the local county commission.

Using each member's connections to get the word out about the need at the NSFRC was identified by one participant as important because, “There are supporters that don't know you're here. There are donors that don't know you're here. It's not just about getting kids at the Resource Center. Businesses that have money to spend.” Other suggestions included providing support for grant writing, requesting funds from local government and “...*talk it [NSFRC] up in our circles to say, oh, I know that organization is doing really good work. And to help, you know, get funding sent that way.*”

There were several ways in which RCAC members showed responsiveness to implementation, organization, and patron needs. RCAC members played a crucial role in identifying gaps in local resources and services by contributing to the Community Strengths and Needs Assessment. One participant reflected on this work, stating, “*when we did the assessment, community assessment and what you mentioned was, was the top thing. Nothing to do for kids.*” With this information, the NSFRC has been able to make a thriving Homework Help program. Another participant reflected on the early steps taken to address the identified gaps, stating how the NSFRC has successfully filled these needs:

“*I remember when we started in the Advisory Board, when we were just trying to visualize what this was going to be. It was going to fill a niche that didn't exist in Lake City. And so now that you're here and you're, you know, you've, you've got your model in place, it's really time to start promoting. This is what we've been able to accomplish.*”

RCAC members also contribute to outreach efforts by identifying potential new partners and promoting the NSFRC within the community. Much of this outreach was conducted one-on-one, with RCAC members inviting new attendees to join. A notable example of this effort was the merger with the Columbia Children's Partnership Council (CPC), which led to the creation of the Columbia Family Resource Council (CFRC). Members recognized that both the CPC and the RCAC shared the same goals—to support local families and reduce entries into the formal child welfare system. This merger resulted in a more than threefold increase in attendance.

Lastly, RCAC members were involved in discussions about fundraising to expand the programs and resources at the center. While there was considerable conversation about the possibilities of fundraising, there were some identified limitations as to what they could accomplish. One feedback group participant noted using their connections to stay informed about funding opportunities:

...we're on different groups or whatever or even hearing of funding sources available, I mean Lake City's so connected, like we serve on lots of different things. Lots of us are United Way people and were Altrusa people and we're, you know, in lots of different groups.

To enhance responsiveness to implementation, organizational needs, and patron suggestions, recommendations were made to increase social media presence, particularly by creating events on Facebook. Another participant shared their experience and offered advice to the council, stating that they should:

...hear from the people. Let those ideas bubble up, not, not from the top down. Otherwise, you're just throwing out a bunch of ideas... So, I think we always have to be cautious as an Advisory Board to say, what did they tell us they wanted from us? And then make that happen, not what we think they want from us.

Section 5-2-3: Patron Representation

To evaluate research question R-3, we examine the extent to which patrons accessing Family Resource Center (FRC) services reflect households in the targeted geographic areas (ZIP codes, census tracts, and blocks) with the greatest need, based on service utilization data and study participation rates.

The number of study participants (n=245) is very low in contrast with the total number of non-duplicate (verified) count of total patrons (2.0% of N=12,343) that received services across all FRCs between 2021 and 2024. Participation was voluntary. The response rate was low despite developed efforts to engage with (including the use of incentives) and inform all patrons seeking services of evaluation efforts, including participation in the collection of outcome data involving survey activities. Limited participation was influenced by a number of factors, including (but not limited to): the impact of COVID upon service delivery and in-person dissemination and engagement efforts, the fact that 48.5% (n=5,991) of total (identified) patrons sought services only once during the three year period, and general resistance/inherent concern of patrons within the communities served (corroborated through qualitative means/interviews) to participate in research/evaluation studies and/or disclosure of personal information to any third party.

Regardless, equivalency tests were conducted to aid in understanding how the study sample differs from the total population on select variables.

The percentage of females represented in the study (79.8%) was significantly higher from those patrons that were not in the study (67.5%), with the percentage of males in the study (20.2%) being significantly lower than the proportion of males not in the study (31.9%). Among the three most represented race/ethnic groups, the percentage of patrons in the study versus not in the study that self-identified as Black or African American (non-Hispanic origin) (75.6% and 65.3% respectively) and White (non-Hispanic) patrons (14.0% and 21.7% respectively) were significantly different with an overrepresentation of Black patrons and underrepresentation of White patrons in the study. The observed differences in representation of Hispanic, Latino, or Spanish origin in versus excluded from the study (6.2% and 7.3% respectively) did not differ significantly.

Further, a series of independent samples t-tests (both equal and non-equal variances assumed) found a significant difference in the average age of patrons, where those in the study were (on average) older (Mean=47.13 years) than those not in the study (Mean=39.81 years). Finally, those in the study (see table below) also had a significantly greater average number of service requests at resource centers between 2021 and 2023 for services associated with Concrete Supports, Parental Resilience, Knowledge of Parenting and Child Development, Social Connections, and all Protective Factor categories combined. For example, on average, study participants requested 27.24 Concrete Supports and 35.58 total services between 2021 and 2023 in contrast to 3.35 and 5.11 (respectively) from non-study patrons (see Table 2). [Study participants had accessed services and supports on an exponentially greater scale than non-participants suggesting a higher level of expressed need and greater contact and familiarity with FRC operations.](#)

Table 2: Average Number of Service Request Comparisons Between Patrons Enrolled in Outcome Evaluation and Other Patrons (2021-2023)

Protective Factor Service Categories	In Study Group	Mean / Average	Std. Deviation	Std. Error Mean	T-Test Statistic (Unequal Variance Assumption)	p-value (two-sided)
Concrete Support in Times of Need	No (N=12,097)	3.35	7.132	0.065	-11.32	<.001
	Yes (N=245)	27.24	32.988	2.108		
Parental Resilience	No (N=12,097)	0.23	0.768	0.007	-7.67	<.001
	Yes (N=245)	2.47	4.552	0.29		
Knowledge of Parenting and Child Development	No (N=12,097)	0.07	0.599	0.005	-4.3	<.001
	Yes (N=245)	0.53	1.688	0.108		
Social and Emotional Competence of Children	No (N=12,097)	1.16	12.417	0.113	1.04	0.297
	Yes (N=245)	0.9	3.359	0.215		
Social Connections	No (N=12,097)	0.3	4.992	0.045	-2.58	0.01
	Yes (N=245)	4.45	25.127	1.608		
All Categories of Services Combined	No (N=12,097)	5.11	15.831	0.144	-10.07	<.001
	Yes (N=245)	35.58	47.294	3.022		

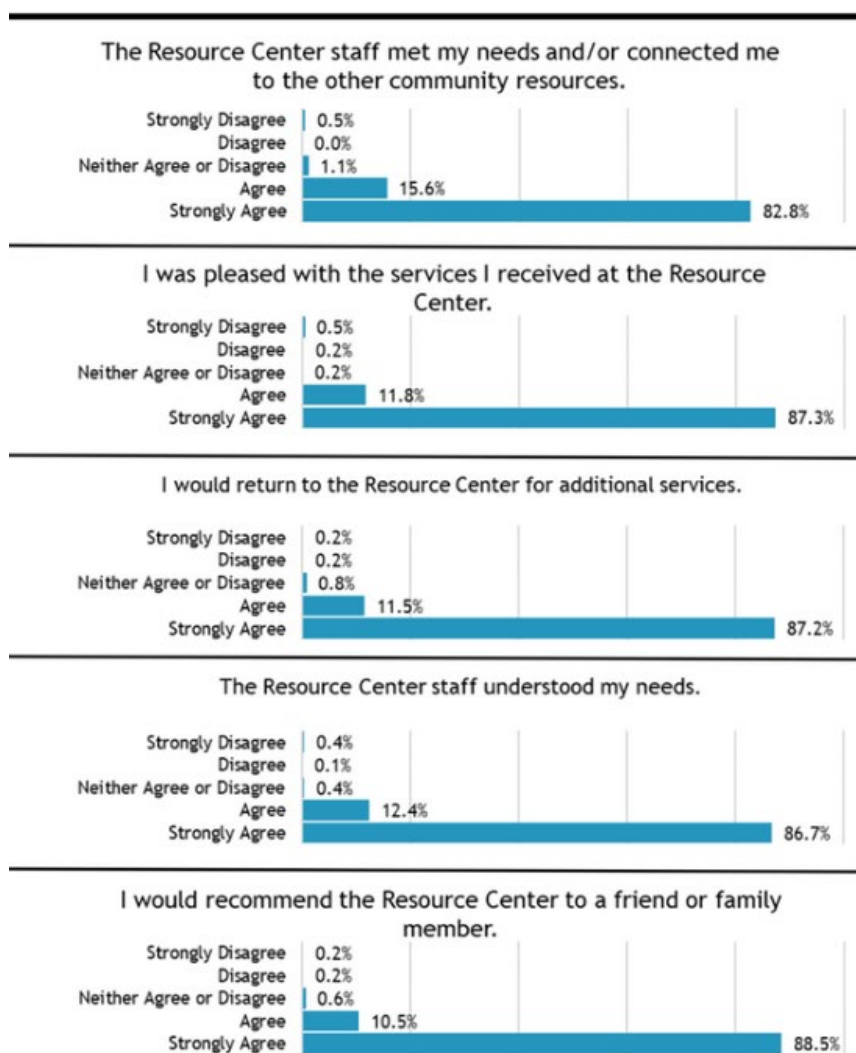
Section 5-2-4: Value of Core Services

To evaluate research question R-4, we examine the perceived value and utility of core services and activities as reported by patrons through patron satisfaction surveys, SFSA findings, and patron feedback group discussions. The full patron feedback group reports can be accessed [here](#): [link](#)

The patron satisfaction survey results were compiled throughout the evaluation period from surveys voluntarily completed by patrons after receiving a service at one of the FRCs. The recurring nature of these surveys enables PSF staff to consistently assess patron satisfaction by asking core questions. These results provide valuable insights into community needs and the reach of the FRCs. The data has been incorporated into quarterly reports shared with stakeholders, which include metrics such as the number of FRC visits, service requests, resource center highlights, demographic breakdowns (e.g., gender, age, race/ethnicity), and responses to the survey questions.

Figure 14 reflects data compiled from surveys conducted between September 2021 and September 2024. Details regarding the methodology for collecting and analyzing these results are provided in Section 4.6.2. Patrons overwhelmingly reflected positive experiences, with over 90% selecting "agree" or "strongly agree" to indicate that staff understood and addressed their needs, expressed satisfaction with the services, and showed a willingness to recommend the FRC to friends and family.

**Figure 14: Answer to Patron Satisfaction Surveys
September 2021- September 2024**



The reach of services and supports at each FRC was reflected in results from the SFSA process and the Patron Feedback Groups. To highlight these results, which demonstrate the value and utility of core services, this section is organized by protective factor. Each of the protective factors were evaluated separately in the SFSA process and evaluated together in the Patron Feedback Group process. Broad themes from the SFSA team results for each protective factor were consolidated into a brief summary, with additional insights from relevant patron feedback groups included. The full reports can be accessed here: [Refinement - Partnership for Strong Families](#).



Parental Resilience

The results of the SFSA process showed that all FRCs had a moderate Parental Resilience fidelity score. In the Patron Feedback Groups, the Parental Resilience protective factor was evaluated through question five and six of the Feedback Questions asked at each FRC:

Question 5: *“When thinking about yourself or other caregivers in the community, did the services and events at the resource center help manage stress? (Pegram, Perry, Lancaster, et al., 2024a)”*

Follow-up Question: *“Did these services help you to better deal with the demands of parenting during stressful times?”*

Question 6: *“What additional services do you need as a caregiver to better cope with everyday stressors? (Lancaster, Perry, Pegram, et al., 2024b)”*

Follow-up Question: *“What additional services do you need to cope with the stressors in your community?”*

SFSA results suggest support and stress reduction for individuals and families, accessing services at FRCs, who are facing internal and external stressors. Findings from the patron feedback group similarly reflected how patrons felt when visiting the FRC, with one participant noting, *“that eliminates the stress knowing hey I can go here, and it’s taken care [of].”* Another participant shared, *“it’s like you still feel like overwhelmed but you feel better, or you feel capable.”* The SFSA process also revealed that staff were seen as welcoming, respectful, and professional with patrons while exhibiting proactive support. Patrons in the feedback group also emphasized the importance of respectful support and shared how the FRCs successfully provided it. One attendee expressed their experience, stating, *“I’ve never walked in here and felt like I wasn’t welcome. When I talk to them, they act like they’ve been there. They act like they’re peer-to-peer advocates basically.”*

Adopting a strength-based perspective, skilled staff empowered parents as decision-makers, earning recognition for their informed, responsive, and respectful approach. This was one key idea highlighted during the SFSA process. FRC staff were believed to demonstrate a strong commitment to strengthening families through supportive engagement and affirming parental roles.

One patron feedback participant, who is a caregiver, articulated the support of the Homework Help program for his children and how that supports his family, saying:

“When they [children] come here, it literally will be like [staff] will sit down with him one-on-one and read that book with him so that he could test on it the next day. That’s a- that’s a huge de-stressor for us, I can tell you right now because it- it’s- it’s tough... It takes so much off of us when they can come here, and they can get that done quickly and then we can move on to something else.”

The SFSA process revealed numerous affirmations that the environment at the FRCs was calm and welcoming. Similarly, a patron feedback group participant shared, *“Just coming in and the state of mind you... [are] in, not knowing which way to go, and they definitely give you direction, and give you a sense of hope, you know? Lead you in the right direction.”*

The SFSA process highlighted some service challenges, including early COVID-19 restrictions, which limited the number of in-person parental resilience services. Identified staff limitations included restricted FRC operating hours and insufficient staff to support multiple services simultaneously. The patron feedback groups focused less on COVID-19 restrictions, likely due to their being conducted in 2023, and instead expressed a desire for more services in general. Patrons emphasized the need for services that provide respite, financial, educational, or case management support for care givers in addition to stress relief and youth-specific programming. Two feedback group participants provided examples, with the first sharing, *“And it’s stressful when you have a bunch of kids and there’s nothing to do.”* The second patron agreed, responding, *“When you want to do something for your kid, and you can’t do it.”* Patrons highlighted the lack of nearby youth activities and, when activities were available, the high costs of fees for youth and family activities that are inaccessible to some families.

At each FRC, SFSA participants expressed interest in providing additional supports to caregivers. However, some participants warned about the potentially stigmatizing language of parenting classes or similar programs, which might hold negative connotations for some patrons. Patron feedback group participants also focused on the need to be careful regarding stigma. One patron provided an example of what this might look like, saying:

“Professional[s] come in... to talk about ADHD... Let these parents, these people come in and ask questions and learn... people from the community, parents, grandparents... So maybe if people are informed [about parenting a neurodivergent child], and understand it, it won’t just get pushed to the side. Because I think it causes a lot of frustration because people don’t know.”

Another feedback group participant shared, *“It would be nice to have a support group [to talk about] ... this situation to help with what I’m going through.”* Each FRC created action items as part of the SFSA process to establish advisory councils composed of caregivers or youth to engage parents in program planning, provide training for community ambassadors, and support parent engagement nights.

However, the patron feedback groups did not mention parental or youth advisory councils, as the focus was on increasing services and accessibility to families in need. Of all the action items created from the SFSA process across all FRCs, 34 (54%) were based on the parental resilience protective factor, which indicates a strong focus on strengthening parental resilience across the FRCs.

The patron feedback group key recommendations provide several suggestions including transportation supports, especially at the NSFRC, outreach efforts, and ideas for growth. Other

recommendations focused on providing additional respite support and caregiver support. One Father responded with enthusiasm saying:

“Is it possible to [have a movie night for parents?] ... a Friday night or Saturday night where ... the kids are [supervised and entertained in a separate room while the FRC] is transformed into ... a simple movie night?”

Parental education was also seen as valuable, particularly in areas like, *“Mental health and dealing with daily life. [Including]...life skills on self-care, it could be helping them work on their schedule so that they don't feel overwhelmed with all that they have on their plate.”* Additional stress relief activities, such as cook outs, karaoke and open mic events were also suggested. Finally, the patron feedback groups highlighted the need for community centers that could offer youth the opportunity to participate in *“little workshops like cooking [or] sewing. Just regular activities of daily living... Something for them to learn and to grow and to become effective adults in the community if they choose to stay here.”*

Patron feedback group input seems too often mirror and enhance those SFSA parental resilience findings. For some patrons, these services provide relief, as one participant shared, *“[I] always come up here in the daytime like when I need to destress from like mom brain.”* For others, the services are life changing. As one caregiver expressed, *“I used to steal out the store and stuff for my kids until I started getting free services here, I don't have to do it no more.”*



Social Connections

The results of the SFSA process showed that all FRCs had a moderate Social Connection's fidelity score. In the Patron Feedback Groups, the Social Connections protective factor was evaluated through question three of the Feedback Questions, asked at each FRC:

Question 3: *Were the activities and programs welcoming and inclusive? (Lancaster, Perry, Pegram, et al., 2024a)*

Follow-up Question: *Did they make families feel comfortable interacting with others and participating in activities?*

SFSA results highlight the FRCs as supporting individuals and families through social activities and the encouragement of positive relationships and mutual support systems. One parent in the feedback group shared an experience of their child receiving tutoring from Dr. Mobley saying *“[Dr. Mobley] was so good at building his confidence level up and making him feel good about what he was doing. So, of course, that helped his emotional state.”*

One-way the FRCs provide universal access is through free community activities which are held throughout the year. The SFSA process revealed that each FRC hosts socializing opportunities for families, including community events, family activities, and holiday celebrations. Some events target a specific group, such as Father's Day events, while others are more general, such as a health fair with blood pressure screenings and COVID-19 shots. These findings also showed that families were welcomed, and newcomers were encouraged to join in on social supports. A patron in the feedback group shared that:

“ [the FRCs are]... *welcoming...*
People feel comfortable coming in because
there's a lot of people in here that I
didn't know and... we introduced
ourselves... and that's very important. ”

The SFSA teams found that staff were seen as friendly and helpful, with the SWAG SFSA team describing the FRC as a “...*non-biased advocate*.” Staff being ready with the needed services can be a huge help to patrons with emergency needs, as one patron in the patron feedback group shared, “*I came and got pull-ups and everything. It's like so much stress reliever when it comes down to money and food with my kids. [Staff] is my release; I come there for everything.*” Community provider relationships, such as the relationship with the local library and CPLRC, were considered positive. SFSA findings show that inclusive behavior was modeled, and efforts were taken to counter stereotyping. A patron from the feedback group shared “*its ‘everybody [is] welcome out here’, everybody come[s] to the SWAG*” and listed many of the staff names she has worked with over the years stating, “*they are all beautiful people.*” On a systematic level, PSF also had a racial equity workshop to identify areas of possible improvement. The SFSA team found that patrons were encouraged to address concerns with staff, and staff modeled positive social skills.

The SFSA groups identified some need for mentoring and support groups, though many FRCs cautioned about possible stigma related to these groups and connecting families with similar needs or interests. Distrust, fear, and different viewpoints were also listed as possible negative influences on social connections. In the case of NSFRC, there was some concern that they still may be too new to the community to make an impactful difference.

Though trust may be slow in some cases, it can be constructed one experience at a time as with one patron feedback group attendee who shared her experiencing of staff welcoming her and explaining food distribution:

[staff shared unjudgementally] *‘here we got all this type of [food], get your kids some sweets and stuff’. She goes on to share with a smile: “Girl... my kids [were] grabbing everything... [that experience helped me] feel kind of a little better knowing that I'm not the only one who is inside this type of situation... that really helped a lot to know.”*

Despite some patrons expressing initial hesitations to seek support at the FRCs due to feelings of embarrassment, pride, shame, or concerns about potential involvement with DCF, those who eventually overcame their reservations reported to have experienced a welcoming atmosphere, feeling reassured that they would not be made to feel ashamed. As one patron expressed, “... *none of the staff makes you feel ashamed or less than because you need help. They're all like right there to help you, with open arms and that's huge.*”

There was interest among the SFSA participants in creating more training for families, more parent/child events and activities, spaces to informally connect, and more programming for specific communities, such as fathers and teen moms. The COVID-19 virus was cited by the SFSA group as

a limiting factor for early events. Ideas to overcome transportation barriers and develop relationships with local landlords to create a newcomer packet were also suggested by SFSA participants.

Overall, the welcoming and inclusive nature reportedly did help families feel comfortable interacting with each other and participating in activities. Staff, including both paid and volunteer, were lauded as good at fostering connections, being youth friendly, professional, and provided an atmosphere in which patrons could feel comfortable in seeking support. One patron shared their experiencing of being welcomed,

I think the second time I came here they remembered my name and like it was just, like it threw me off, I was like oh my gosh, like I'm welcome here. Like they know who I am. And it's just like, very comforting.

Additionally, a patron shared her experience of meeting another individual at the FRC, explaining how their connection has grown to the point where they now know each other's families. She occasionally supports him with rides since they live nearby. Reflecting on this, she said:

“It's like, you know, you get to be friends with everybody and so that that is even a greater support system because you get to know people and what their situation is.”



Knowledge of Parenting and Child Development

The results of the SFSA process showed that the CPLRC and LPRC had a moderate score to the Knowledge of Parenting and Child Development protective factor while the NSFRC and SWAG FRC both had low fidelity scores to this protective factor. In the Patron Feedback Groups, the Knowledge of Parenting and Child Development protective factor was evaluated through question four of the Feedback Questions asked at each FRC:

Question 4: *When interacting with staff, are you listened to and supported?* (Perry, Pegram, Lancaster, & Spoliansky, 2024)

Follow-up Question: *Do you think program staff are willing to work collaboratively with you to support your child(ren)'s development?*

During the SFSA process, each of the FRCs was found to be developmentally appropriate when working with kids and understanding ages and stages of development. This includes supporting those children with special needs and their families. The FRC staff reportedly have a “see a need, fill a

need” mindset that reigns true when recognizing and supporting the parenting challenges experienced by families with children who have special needs. One parent in the patron feedback group shared their experience saying,

I know I expressed to [the FRC manager] about my son, when he has these little emotional outbursts ...he's ADHD... [the FRC manager] would counsel him ... [pull] him to the side, you know, follow up and ask him 'how you doing today?', you know ...get him talking...[Now my son is] ...comfortable with [the FRC Manager and comes into the FRC asking], ...where's [the FRC manager] at?

SFSA findings showed that education for parents is reportedly often provided on a one-on-one basis, tailored to the parents' needs. This could include just-in-time tips or educational resources like books, flyers, and bulletin boards at the FRC that contain educational information. The one-on-one nature of some of these supports may have been a factor in the low fidelity score for this protective factor at the SWAG FRC. If the SFSA attendees themselves had not received these individualized services, they may be unaware of the utilization or outcome of those services. This individualization, however, was asserted as a sign of flexibility in service delivery, which supports families. Patron feedback group attendees with children (across all FRCs), expressed gratitude for the “very supportive” direct services provided, along with staff efforts to coordinate/collaborate with partners to ensure their children received: “*tutoring*,” needed “*one-on-one to help better them with whatever they [children] lackin on*,” could participate in Girl Scouts, could go on “*camping trips*,” and receive outside assistance for behavioral health issues/problems a child was exhibiting and the parent(s) were struggling dealing with.

Suggestions for improvement that were identified in the SFSA process included the use of assessment tools, sharing observations with parents, creating a series of parenting classes, training for staff and connecting parents more often to mentors and support groups. Several of the SFSA participants identified a need for educational parenting materials to be culturally and language appropriate.

Many SFSA participants across groups were unaware of what child development training staff may have access to, which mirrors a general lack of knowledge about staff training regarding other protective factors. The CPLRC, LPRC, and SWAG FRC shared a need for official parenting classes, while the NSFRC leaned towards informal small groups and mentoring.

The low fidelity rating at the NSFRC was asserted by the SFSA team, noting that many of the questions did not seem applicable to that particular FRC. This was in part due to the perception among members that these questions, especially those related to parenting education classes, were not relevant to their operations. Parenting education classes, including efforts focused on disseminating information about child development issues, are not a primary focus at the NSFRC. When specific parenting and child development needs are identified by staff, efforts are made to provide a warm hand-off by connecting caregivers with community service providers.

Finally, patrons in the feedback groups highlighted the stark difference in the level of service and respect they received at the FRC compared to their experiences with other community resources. They contrasted these positive interactions with instances where other organizations demonstrated “no communication” and interactions made them feel “*embarrassed*,” “*stupid*,” and they were looked

at “...like you had three heads when you asked a question you didn’t know [the answer to].” FRCs patrons are reportedly attended and responded to, as one LPRC patron notes:

“I’ve seen a lot of people come in and get help, I’ve never seen any of the staff people snub them or, you know, be in a hurry and shove them off or any of that ... that’s huge, especially when you’re trying to reach out for the first few times to get some help...”



Concrete Supports in Times of Need

The results of the SFSA process revealed a high-fidelity score at each FRC for the Concrete Support in Times of Need protective factor. In the Patron Feedback Groups, the Concrete Supports in Times of Need protective factor was evaluated through questions one and two of the Feedback Questions asked at each FRC (Perry, Lancaster, Pegram, & Spoliansky, 2024):

Question 1: *How does [FRC name] assist individuals and families with immediate needs?*

Question 2: *What resources and supports do they provide? Have they been helpful?*

Staff at the FRCs were identified by the SFSA teams as encouraging to individual and family patrons who are experiencing distress. Of the 91 patron feedback statements gathered from these questions 36 (40%) expressed general support and appreciation for the FRCs with quotes such as, “Y’all help with everything”, “...it’s just a wonderful program. I love it. I love it,” and “...what they are doing now is exceptional, is good.”

Each FRC’s staff were seen by SFSA participants as good at identifying signs of distress, proactive in supporting patrons, and providing referrals. There were many similar comments during the feedback groups highlighting the proactive and helpful support staff provide including, that staff “...are very good and helpful,” “...great with helping people,” “...so...very helpful,” “...helped me out,” “help you,” and are “...lending a helping hand.” One patron feedback group attendee shared a time they experienced a strong need for the concrete support of diapers that they were “...able to get Pampers [and] we’re able to get Ensure milk. Until we got his WIC thing going and stuff, everything [was] right here, there’s no problem.” Reportedly, staff express concerns for patron needs and support patrons with follow-ups.

The SFSA process found that the FRCs maintained updated information about services in the community and often built upon connections with providers in the community. One patron feedback group attendee collaborated this idea saying the FRCs, “...know where to go for other community resources.” Other attendees spoke of their personal experiencing of finding that multiple resources were “all in one place” and staff “...helped me navigate a lot of things.” The convenience of placing the

FRCs within walking distance of households served was highlighted by the patron feedback groups. Families were provided information and guidance and encouraged to take the lead in cooperative planning to address the family's needs. A feedback group attendee shared their point of view:

“ So, SWAG has kind of been that Justice League. Because when you come to them, you like “look I need a little bit of help”, they don't just give you something, they show you how to [get help and help yourself] ... to be your own hero. ”

There were thirty patron feedback group statements highlighting the ways in which FRC staff provide a friendly and warm environment such as “*The communication with the staff here is very nice. Everybody [is] calming and relax all the problem*” and “*...it is welcoming. You know, people feel comfortable coming in...*” The perceived non-judgmental nature of staff and patron interpersonal interactions was also positively highlighted. One patron feedback attendee shared, “*...you don't feel pressured, you don't feel looked down upon.*”

In addition to service delivery for these supports, concrete supports were also spoken of as being a great benefit to local individuals and families in the patron feedback groups, with responses such as:

...like I was saying earlier with the food situation my kids eat you out of house and home. It gets down to the last little food [staff member at the CPLRC] comes right in time. So instead of me stressing about what they going to eat, it's already done ... I know with the food thing it definitely helped my family...

“Because my daughter right now is going through a divorce, and he left her with nothing ... Thank God for the clothes closet because they'd be naked right now otherwise.”

“I don't have a computer myself, so I came here to apply for HUD housing. I came here to apply for EBT...I've been using all the resources that they'll give me, and it's been incredibly helpful.”

...my son, he was like a month old, and I was running low on pampers and [CPLRC staff member began gathering] ... the diapers and all type of [essentials in a baby basket of supplies] ...I'm like, okay, that became very useful ...because I was ...not working at the time ... So that really helped me out a lot...

“I'm like guys [you should go to the FRC] if you need ... just go there if you need to. Print something if you need to, fax something, if you need a notary, like, they're willing to help.”

As one SFSA community ambassador noted: “*most people turn to the resource center...you can get everything here.*”

For some patrons these services are critical as one patron feedback group attendee shared:

“When I was in a homeless shelter, that’s where I found out about this place. And they- like this was an integral part of getting out of the homeless shelter because I was able to use the computer and apply for housing and apply it for EBT and like I was able to get back on my feet because I had access to... the internet, and a printer, and a notary and I could get everything done that I needed to get done, that I wouldn’t have been able to do otherwise. They went on to add, there’s a lot of people in that shelter I was in that had children that were doing the same thing.”

Another patron shared a similar sentiment saying, “My butt would be naked, and I’d be starving if it wasn’t for you guys, I’m serious.” The value of concrete supports was not only in the services themselves, but the capacity to build connection during those supports as one patron feedback group attendee shared:

...it’s a community dinner, for the community to get involved ... not just to eat dinner, to interact with other people that’s in the community and strengthen the community, along with you know ... Even being in the rough neighborhood, I found ... mothers coming together ... with our children and strengthening our families, that’s, that’s what it’s about, you know, they see us communicating and getting along, they got a better chance of getting along with each other. If it’s a situation we should be able to, as women, mothers, fathers, we should be able to come together and say, you know, I had a situation with you or your child or whatever, without having to fight each other.

There were only a few suggestions for improvement, which included longer operating hours or being on call, providing home visitation, and connecting patrons to peer-to-peer navigation support. The patron feedback group felt that more could be done to collaborate in the community, especially with faith-based organizations. One patron highlighted this saying:

We could increase awareness of the programs and services by doing a little bit more announcements in the churches ... I try to go to church every Sunday, but I haven’t heard a whole lot of announcements about NorthStar and what they do ...

There could also be additional support and referrals given to parents to share information about resources with others and to follow up after all referrals to ensure patron satisfaction. One FRC patron suggested that parents could identify service gaps, and another suggested the creation of a task force to address housing costs and homelessness, citing that families “have been thrown in the street because of things that are outside of their control. Their rent went from \$800 to \$1700. That’s a problem.” In one case, the need for housing was so pronounced that a patron sadly died one evening of a reported drug overdose while outdoors near the NSFRC.

One unexpected finding with the patron feedback groups was the frequency in which they provided a Web of Support to each other. This web spoke to the opportunities for, and the value of relationships and connectedness, including social relationships, and the development of quality

relationships with staff and between patrons. Even during the feedback group sessions patrons would stop answering the questions to provide other attendees detailed information of service times and availability or invite them to be more involved as one patron told another to “...*come around girl*” as an invite.



Social and Emotional Competence of Children

The results of the SFSA process showed a moderate-fidelity score at each FRC for the Social and Emotional protective factor. In the Patron Feedback Groups, the Social and Emotional Competence of Children protective factor was evaluated through question one of the Feedback Questions asked at each FRC:

Question 7: *Do program activities support your children’s social and emotional development?* (Pegram, Perry, Lancaster, et al., 2024b)

Question 8: *Do you think that [FRC name] resources have helped caregivers in the community from being involved with the child welfare system?* (Lancaster, Perry, Pegram, et al., 2024c)

The SFSA process found that each FRC provided a warm, supportive, and safe environment in which children and parents were responded to with empathy. In the patron feedback groups, patrons indicated agreement with the notion that programs and services enhance the social-emotional development of youth through short statements of affirmation such as: “*yes, definitely,*” “*absolutely,*” “*I feel like they really do,*” “*It’s been great, great, great,*” or “*yeah they do.*” SFSA participants believed that staff were aware of developmental needs and promoted positive relationships. One parent in a patron feedback group shared their son’s experience at summer camp:

...he built some connections, you know, with some of the kids. And he found out they go to this school and that school... [I believe he will] have lifelong friendships with [them]. And so, he was kind of shy like getting to know people and that kind of brought him out of his shell.

The SFSA process showed that FRCs were seen as places that encourage healthy social skills, set expectations, and establish limits on youth behavior. Patrons in the feedback groups shared similar beliefs, stating that some of the youth, “...*misbehave and the [FRC staff] have to, you know, try to get them straight... they are being trained how to... behave, you know, how to be respectful.*” The SFSA process found that the FRCs were also viewed as places where parents could discuss concerns and access additional support and resources as needed, while respecting the role of the parent in the child’s life. Additionally, children were encouraged to express their feelings, resolve conflicts, and learn to separate emotions from actions at most of the FRCs. According to feedback group participants, kids “*can ask the staff; they don’t need to ask anybody else,*” highlighting the approachability and comfort children feel when interacting with staff.

The SFSA process revealed a need to improve the provision of specific child development support information/assessments for behavioral and developmental challenges. In some cases, these supports were viewed as best provided by the professional providers to whom staff refer patrons. Consequently, only the SWAG FRC was listed as providing appropriate screenings and assessments,

as other FRCs typically rely on the professionals they partner with to conduct these types of assessments.

Additionally, in several of the FRCs, SFSA attendees were not aware of the trainings provided to staff, which aligns with findings related to other protective factors.

Youth experiencing developmental or undiagnosed disabilities were discussed in the patron feedback group, with praise for FRC staff who help these youth and alleviate stress for parents. There were some SFSA scores indicating neither agree nor disagree on providing culturally and language-specific supports related to the social and emotional competence of children, such as opportunities to discuss these differences with caregivers. While these needs were not specifically mentioned in the patron feedback group, there was interest in increasing services and supports. As one patron stated, “[I] know for a fact there are more families out there ... in Columbia County that definitely could use the services that may not know about it.”

The SFSA process did not specifically address the question of DCF involvement. However, the feedback groups provided some insight into how services and supports for youth and their families could offer assistance and potentially mitigate the chances of involvement with the formal child welfare system. They shared:

Having the resources for children to be happy for a while and parents to be able to interact does reduce stress so that domestic violence goes down, communication, loving interaction between children and parents goes up, and so DCF is not involved in that respect at least.

Similarly, another patron shared:

The parents are de-stressing, first of all, so they don't do any harmful thing to their child or to have DCF come in and with them de-stressing they're learning how to cope with their child. So, I think all we have to do is expand our program a little bit here and it would just help in general.

Staff who were knowledgeable about local resources and could provide emotional support were seen as a possible mitigating factor for some of the SFSA groups. As one patron stated, “the only thing you can do is... keep supporting them.”

Several patron feedback members spoke about the complexity of engagement with the formal child welfare system. In some cases, patrons shared experiences they or their friends had. Feelings of anger, stress, fear, helplessness, and depression were expressed, along with trepidation and skepticism about signing into services and submitting forms due to concerns about how this might affect them. One parent who experienced an open DCF case shared, “After all these years... you never had a DCF [case] and then boom, something did happen out of the blue someday. You couldn't prevent [it], and it just seemed right downhill, like straight depression.”

SFSA participants identified the need to support children with specific social and emotional needs and to assist staff who deal with these issues and behavioral challenges. These needs and challenges were a major point of discussion in the patron feedback groups. One patron explained the strain some youths are under, saying: “They'll act out and throw a fit and say hurtful things and be mean when really they're just feeling something that they're not able to put into words.” Another patron shared, “if you see a child who may have anger issues, sometimes, maybe more than sometimes, there's an adult in the home that has anger issues, and they're just mirroring the adult.” Evidence-based therapeutic approaches to support staff, parents, and youth experiencing these difficulties were

seen as a possible idea for service delivery by patron feedback participants. In addition to suggestions for peer mentoring and additional youth supports one suggestion was that a professional could come to *“talk about feelings and things like that, come and mentor the kids a little bit in those areas.”*

Although this research has some limitations, particularly the lack of direct input from children, caregivers provided valuable insights into how these social and emotional competence of children services benefit their youth:

“I mean I think it definitely helped him build his confidence up, which definitely helps with the mental and the social. Because when you feel good about what you’re doing...”

“[Their son] met... all the kids that went there over the summer and he built some connections... with some of the kids... and he found out they go to his school... [Now he can have] lifelong friendships with ‘em. And so, he was kind of shy like getting to know people and that kind of brought him out of his shell.”

“They do offer Girl Scouts meetings here and that’s huge because Girl Scouts opens up a whole new world for girls ... Girl Scouts taught her [her daughter] so much. I mean, you learn how to interact with other kids, you learn teamwork, you learn to work together.”

I’ve known the [NSFRC Manager]’s family forever. I knew the dad, mom, whatever, the whole entire family. But when you come out here, you are welcome. And I love the idea. Like you take them outside and they have a little free time. They love it ... We used to go every evening she wanted something from Burger King or something, but now she just wants to come to NorthStar.

To conclude, the value and utility of core services provided at FRC were seen as significant through the feedback from the patron satisfaction surveys, SFSA findings, and patron feedback group discussions.

Patron satisfaction surveys conducted during this evaluation reflect an overwhelmingly positive experience at FRCs with over 90% selecting *“agree”* or *“strongly agree”* to indicate that staff understood and addressed their needs, expressed satisfaction with the services, and showed a willingness to recommend the FRC to friends and family.

Positive assessments of the reach and value of services were seen throughout the SFSA process and patron feedback groups. Though not every FRC had the same strengths or suggestions there were many similarities in the manner of service delivery, which was often spoken of as respectful, stress relieving and supportive.

Parental Resilience services and supports obtained a moderate fidelity score at each FRC, and qualitative feedback reports these services as very helpful and, in some cases, eliminating stress.

No matter the challenge staff help *“...you feel capable...”* to function. Some patrons shared that they didn't know where to go or what to do to solve their issues, but staff *“...definitely give you direction, and give you a sense of hope...”* Parents are empowered as decision-makers, and children receiving supportive services *“...takes so much off of...”* parents/caregivers.

Caregivers shared challenges in supporting children with ADHD and providing affordable activities for their children, expressing interest in support groups and parent advisory councils at many FRCs. Over half (54%) of the action items from the SFSA process focused on improving parental resilience supports, highlighting the importance of strengthening these resources. Suggestions included workshops and movie nights to aid parents’ development and stress reduction. Patrons also valued the supportive environment of FRCs as a place to *“de-stress,”* emphasizing the ways FRCs foster resilience and offer vital supports for families.

Social Connections services and supports also obtained a moderate fidelity score at each FRC. Staff were described as "...[a] *non-biased advocate*", "...*welcoming*", "...*beautiful people*" and "...*there to help you, with open arms...*" The positive relationships between staff and patrons foster positive relationships among patrons, as one shared how her friendships have grown into getting to know each other's families. Each FRC hosts community events throughout the year to promote further relationship building.

There was interest in creating more training for families, additional parent/child events, including groups for teen moms and fathers, and more activities and spaces to connect informally. Some caution was noted regarding feelings of embarrassment, pride, shame, or other concerns that may impede or slow social connection. Importantly, the perceived welcoming and nonjudgmental environment of the FRCs leads to stronger connections, providing support as one patron shared:

"you get to be friends with everybody and... that is even a greater support system..."

Knowledge of Parenting and Child Development services was the only type to receive different fidelity scores across FRCs during the SFSA process. The CPLRC and LPRC obtained moderate scores, while The NSFRC and SWAG FRC received low fidelity scores. Regardless, staff at each FRC were recognized for being developmentally appropriate when working with youth and understanding the ages and stages of development. Although there was some interest in creating parenting education classes, it was not a primary focus at every FRC. Additionally, SFSA findings indicated that education for parents is often provided on a one-on-one basis, tailored to the parents' specific needs. The individualized

nature of these supports may have contributed to the lower fidelity scores, as SFSA attendees who had not directly received these services might be unaware of their availability.

Overall, staff were praised as "*very supportive*" in their knowledge of parenting and child development services, which support physical, cognitive, language, and social-emotional development.

Patrons shared that they felt safe asking questions and were not made to feel "*embarrassed*", "*stupid*", or as if they were being looked at "*...like you had three heads when you asked a question.*"

Each of the FRCs obtained a high-fidelity score for their Concrete Supports in Times of Need services. Patrons shared personal experiences of finding multiple resources "*all in one place*," with staff who "*...helped me navigate a lot of things.*" Patrons praised the FRCs, saying, "*...you can get everything here.*" Among the highlighted supports were food, clothing, computer access, diapers, faxing, printing, and notary services. In some cases, these resources were described as critical, with one patron sharing, "*My butt would be naked, and I'd be starving if it wasn't for you guys.*" Patrons were also frequently found supporting each other by sharing details about available resources and how to access them.

Suggestions included expanding housing supports, strengthening connections with faith-based organizations, increasing outreach efforts, and improving accessibility to services currently limited by FRC capacity. Overall, Concrete Supports in Times of Need services at the FRCs were considered outstanding and highly effective in reducing stress.

Services providing support to the Social and Emotional Competence of Children Protective Factor at each FRC received a moderate fidelity

score. The FRCs were recognized as providing a warm, supportive and safe environment where both children and parents were responded to with empathy.

As this research focuses on adults, we do not have direct input from youth in these programs. Instead, we rely on feedback from parents whose children participate. Caregivers noted that when youth misbehave, staff “try to get them straight... they are being trained how to... behave, you know, how to be respectful.” Additionally, youth reportedly feel safe asking staff members questions and appreciate being treated with respect.

Suggestions for incorporating evidence-based therapeutic approaches, peer-to-peer mentoring, and additional support for families involved in open child welfare cases were discussed. Overall, caregivers reported that programs such as homework help contribute to building their child's “*confidence up*”, support building “*connections... [that will become] lifelong friendships*”, teach youth “*to work together*.” Caregivers also affirm that FRCs are places where, “*they love it*”.

Over, all it is clear that families rely on the FRCs for trusted support, meaningful connections, and essential resources.

Section 5-3: Implementation Drivers, Solutions and Barriers

To address the four primary research questions affiliated with implementation drivers, solutions, and barriers, data was collected from staff interviews, quarterly FRC meetings, advisory council input, the SFSA tool, and patron feedback group findings. Staff interviews occurred every six months, during which the research team's CRC sat down with each of the FRC managers to determine what strides had been made toward the action items created during the SFSA process.

To reduce the strain on FRC managers for these meetings, CRCs compiled all known events and information they had relating to these action items and then conducted a short interview with them. This process naturally allowed for the collection of success and barrier information alongside updates on identified action items.

The first two research questions for this section, I-1 and I-2, examine the factors or actions contributing to any perceived success, along with any challenges and/or barriers impacting the development and implementation of the Family Resource Center in Lake City and the continued operation of the three Gainesville Family Resource Centers.

Successes

Several successes were identified through staff interviews discussing the action items created during the SFSA process. The following is a brief highlight of some of those successes followed by input from the NSFRC advisory council and patron feedback group attendees.

The **CPLRC** established a Zumba class and gardening group based on their action item to create parent-focused “*activities/events aimed at stress relief*.” **The FRC's parent and community advisory council united over the gardening project (more information about this can be found in section 5.2.1).** Once the new Cone Park Library manager was hired, collaborative calendars and community events were organized. An action item to connect more with immigrant and refugee families resulted in the creation of FRC informational rack cards in Spanish.

An action item to utilize the center's outdoor resources led to the establishment of an annual “*On Track Fitness Health and Wellness Fair*,” which included Zumba, cooking, workouts, and demonstrations on the track and the property's other free resources. The action item addressing the need for additional staff was satisfied with

the hiring of a part-time volunteer through the provider, The National Caucus & Center on Black Aging, Inc.

The **LPRC's** action item to continue the involvement of peer mentors was manifested in multiple events that included peer mentors and parent attendees connecting with each other. These included a Mother's Day event (Mommy's Day Off: Spring Brunch), financial fitness workshops (Fight for Your Money or FFYM), an employment conference and job fair (Re-Entry Conference), and Parent and Community Advisory Council Info Sessions. This FRC also welcomed a high school volunteer who assisted with homework help and has mentored with Florida Victorious to bring college athletes to the center to mentor youth during the summer camp program.

Efforts to develop a process to connect parents with each other were supported through social connection events, including the Chill and Grill Father's Day Event, Health Fair and Fall Festival, and afterschool holiday parties.

An action item to expand services in other languages included FRC rack cards and the monthly calendar translated into Spanish, as well as the addition of a part-time volunteer who speaks Spanish fluently. LPRC also began working with the Rural Women's Health Project to pilot a language line for translation services, with funding from the Children's Trust of Alachua County supporting its ongoing availability for all FRCs.

An action item to pursue training opportunities with partner organizations resulted in staff participation in a race equity workshop facilitated by national expert Corey Best of Mining for Gold. Family Support Facilitator staff also completed the Gainesville Immigrant Neighbor

Inclusion training. All PSF staff participated in LGBTQ+ training conducted by All Children-All Families and a de-escalation training by the Alachua County Crisis Center.

An action item to build on existing communication methods led to the development of a listserv with over 1,000 families receiving monthly calendars, updates, and information regarding events, programs, and resources. An action item to engage more with fathers led to a fathers and men's appreciation gift giveaway, the Chill and Grill Father's Day Event, and connections with local providers like Team Dad.

An action item to develop more child-focused activities included providing childcare for adult-based events and hosting afterschool program events for holidays and other celebrations. Additionally, the Strong Kids Summer Education and Enrichment Program incorporated various child enrichment activities, including Capoeira, African Drums, the New Worlds Reading Initiative, and more.

An action item to increase the completion of satisfaction surveys resulted in the creation of a digital version of the survey and a flyer with a QR code displayed on bulletin boards.

The **SWAG FRC** also had several successes as a result of their action items. An action item to create a dynamic speaker series to reach parents and youth resulted in local Eagle Scouts offering coding classes, with youth who participate receiving a free monitor and Raspberry Pi (small computer) to continue their coding adventures at the end of the program. **Anthony Ray, the creator of Dad, Can We Talk?, began a monthly speaking series during the community dinner.** SWAG staff started a weekly Safe Space group for LGBTQIA+ patrons. LGBTQ+ stickers were also seen

throughout the office. The North Florida Sewing Center started a class to teach patrons to hem, mend, and create products. A community garden is being utilized by several families.

An action item to offer parent development and support resulted in the creation of a monthly Parent Power Workshop that allows parents to come together and share stories and advice. The monthly community dinner also became an informal parent support night. The Baby SWAGgers baby shower events for soon-to-be parents, including fathers, also serve as an opportunity for parents to connect.

Interest in patrons obtaining training opportunities manifested in several CPR/AED trainings, a Know Your Rights workshop presented by Florida Legal Services, and a Mental Health First Aid and Health & Wellness Fair, which were open to staff and patrons. An action item to explore peer-to-peer training manifested in a Parent Power Workshop and Community Café.

An action item to utilize community members to raise awareness resulted in a keener focus on when patrons shared FRC materials by word of mouth during food distributions and other events.

The patron feedback groups also revealed that a great deal of community sharing, or a “*web of support*,” was created among patrons.

An action item to improve outreach strategies manifested in FRC staff making connections with local landlords, who were then added to the email listserv to gain and distribute valuable FRC information. There was also the creation of SWAG! Bingo, which is utilized at several events to disseminate information about the FRC in a fun way. SWAG staff also attended community events like the Safe Choices and Safe Communities Fair and the UF FYCS Networking Fair.

Efforts to increase the community’s awareness of parenting and child development resulted in the establishment of Family Reading Nights and Girls on the Run. The SWAG FRC also has a slideshow of information displayed in their lobby to highlight important information.

An action item to increase engagement with local businesses resulted in a relationship with the local Hidden Oaks Elementary staff, Gas South, Gainesville Health and Fitness, and Exit Realty. These local schools and providers were then encouraged to come to the SWAG Back-to-School Block Party and set up tables to provide information to the community.

An action item to strengthen mental health supports manifested in Meridian Behavioral Healthcare coming on-site once a month to table. Staff also hosted and attended a Mental Health First Aid training that covered signs of common mental illnesses, diagnoses, and de-escalation.

In efforts to support all people, the language line was utilized, and a document with common phrases in English and Spanish was created to begin supporting patrons. In exploring the organizational framework for engagement, staff found that, in addition to satisfaction surveys, the Community Café and Community Dinner were great ways to access informal feedback or ideas on proposed programming.

An action item to reduce gun violence led to a collaboration with Moms Demand Action, the Gainesville Police Department, and the Alachua County Sheriff's Office to host the One County, One Community: Standing Together for Gun Safety event.

An action item to reinstate and expand community events manifested in a large-scale 10th Anniversary Party, afterschool holiday

parties, on-site events with a therapy dog, and more.

The **NSFRC** started its SFSA process a year after the other FRCs but still had several successes. An action item to boost collaboration with local agencies resulted in the Columbia County Library creating a nearby story walk that youth could walk through and read, as well as establishing an on-site computer class. Additionally, the local high school's adult education program created an agreement with the NSFRC to use their on-site computers for their students.

An action item for a food pantry first started with a weekly bread distribution from Panera Bread donations and bloomed into an on-site pantry and a local community garden. An action item to create co-located services resulted in a DCF Hope Navigator and a Meridian Behavioral Healthcare staff member being on-site weekly.

An action item to build relationships leading to more volunteers resulted in connections with CareerSource FL Crown and Florida Gateway College, which produced volunteers for the FRC.

An action item to expand community connections manifested in the FRC manager attending the Columbia Children's Partnership Council and the Homeless Coalition, as well as a myriad of other connections, which led to community support such as the Resolution Run and health fair.

Connections with fathers through participation in an All Pro Dads event at a nearby elementary school resulted from an action item focused on creating supports for youth and males in the community.

An action item focused on securing additional staff and/or other resources resulted in the hiring of retired teachers to support youth during the homework help program. Funds have been secured through the Scaff Foundation to support parenting cafés.

One action item highlighted the need for efforts to connect with places of worship that serve marginalized communities. These efforts resulted in the “Unsung Heroes” event, which honored African Americans over the age of 90. Additionally, the FRC manager, being a pastor himself, actively fosters connections with local community members and churches.

Interest in supporting non-English-speaking populations resulted in the translation of flyers into Spanish, connections with local multilingual providers, and gaining access to and training for the language line.

Lastly, an interest in supporting families dealing with substance abuse addictions and the needs of LGBTQ+ youth resulted in trainings for inclusion and de-escalation. It also led, in part, to access to the opioid grant, which aims to reduce instances of child maltreatment through education and prevention of opioid addiction. This opioid grant has been a major success in maintaining the NorthStar FRC after the closure of the grant this research is based on.

Additional successes from RCAC members included discussions on various ideas, such as the importance of after-school activities for children and youth, the installation of a community garden, the addition of a food pantry, and the co-location of Hope Florida staff at the NSFRC. Each of these ideas has led to the development of different programs at the NSFRC.

Other identified successes include the agency fair, which facilitated connections between agencies. Collaborations with the FL Hope Navigator, Columbia County Public Library, CareerSource FL Crown, Florida Gateway College, the Summer Youth Employment Program, and local schools were all partially built through RCAC connections and praised for their support of patrons. These supportive partnerships, which foster further connections, have been a significant benefit for the NSFRC. The comfortable environment at the NSFRC is also reported to be a strong support for patrons. More information regarding RCAC findings can be found in sections 5.1.1 and 5.2.2. More information regarding RCAC procedures can be found in sections 4.3 and 4.6.1.

Additional insights on successes were provided by participants of the patron feedback group, such as: *“The location of this center and the feeling of a relationship with the individual patrons that come in allow different agencies to connect with us to better serve our patrons.”* Larger events with attendance of over 50 people were also seen as successes, as they *“helped the community by allowing them to learn more about the different services provided.”*

Successes from the quarterly FRC meetings included the opening of the NSFRC in 2021, the establishment of the CPLRC PCAC, and the expansion of race/ethnicity and gender markers. Additionally, the creation of the Community Navigation Program in 2023, funded by the Children’s Trust of Alachua County (CTAC), led to the opening of remote locations at the Alachua Branch Library, the High Springs Library, and the Willie Mae Stokes Community Center one day a week. In 2024, partnerships with CTAC expanded further, opening additional remote locations in Alachua County, providing funding for the majority of operating expenses

for the Gainesville FRCs and supporting the FRC consulting program.

The annual Community Partner Surveys from 2021 to 2023 highlighted several strengths, including the overall performance and professionalism of resource center staff, staff accessibility to partner organizations, strong working relationships, and high-quality service provision. Effective communication methods, information sharing, and efforts to promote an inclusive environment were also recognized.

The FRC network consistently received high ratings, achieving a score of over 95% each year for overall performance. Partners praised the centers for being integral parts of their communities, fostering community engagement, and organizing well-run, impactful events. They appreciated that FRCs are strategically located in areas with the greatest need, serving people in life-changing ways.

Partners expressed gratitude for the FRCs' role in connecting agencies, promoting diversity, and actively supporting Spanish-speaking populations. Staff were recognized for their ability to provide both immediate resources and deeper, needs-based referrals. FRCs were viewed as reliable and consistent sources of support for families, particularly through food distribution events and afterschool assistance. Staff were also commended for their commitment to keeping families together. Additionally, partners valued how FRCs acknowledge the expertise of other organizations, prioritizing referrals rather than duplicating services.

Challenges

There were also some challenges and barriers along the way at each of the FRCs.

The Cone Park Library, which the **CPLRC** rented their space from and often collaborated with, went without a manager for several months, hampering collaborative programming. Additionally, due to a budget reduction plan implemented by PSF, the Cone Park Library Resource Center closed on August 11, 2023. This decision came as a response to several challenges, with the unprecedented costs associated with out-of-home care for children being the most significant factor.

This change was made after much thoughtful consideration by PSF leadership, with a commitment to minimizing the impact on our patrons, some of whom began to access resources and supports at the LPRC and our remote Community Resource Navigation sites.

The **LPRC** experienced significant barriers in getting community interest for the Parent and Community Advisory Council, with informational meetings having little or no attendance. Efforts to brainstorm possible solutions continue. Budget cuts and lack of funding reduced opportunities for patrons to attend conferences.

The **SWAG FRC** has had some difficulty maintaining engagement with their Dad's group and Safe Space for LGBTQ+ groups due to low attendance. The Parent Power workshop was also put on hold for the same reason. There was early interest in creating a Youth Advisory Council, but additional staff and funding were required, which were not available. A YAC interest meeting was held, but there was little buy in from local youth. The Parent Advisory and Community Advisory Committees also faced a similar lack of interest.

Although the **NSFRC** had an action item to create an annual summit focused on reclaiming the community's youth and males, this event had to be put on hold due to low community support. A plan to create a parenting education group was also delayed because free curriculum and a professional provider willing to offer the service for free could not be found. Efforts continue to find leaders to provide these important services.

One recurring barrier at all the FRCs included the prohibition against FRC staff creating or managing an FRC-centric social media account. In May 2022, a Family Resource Center Facebook page was created, but after a few months, there were no staff available to adequately manage or monitor it. This was considered a barrier that reduced community engagement across all the FRCs.

Barriers identified through the quarterly FRC meetings included COVID-19 precautions, which limited office hours and indoor activities. FRCs located within libraries had to adhere to library hours and regulations, which were often restrictive and capped visitors at 15 people at a time. Additionally, the long-term impacts of COVID-19 made it more challenging to encourage patrons to attend in-person events. Attendees also highlighted the need for greater support for special needs populations, including individuals with disabilities.

The annual Community Partner Survey results from 2021 to 2023 allowed partners to identify service gaps and barriers in the communities served by the FRCs. The lack of affordable housing and reliable transportation services continued to pose challenges. In response to a 2021 request for more welcoming LGBTQ+ symbols, FRCs placed "*All Are Welcome*" Pride

flag stickers at each location. The need for translation and interpretation services, including a language line, was identified in 2021 and 2022 and was successfully implemented in 2023. Additionally, partners suggested providing mental health information, mentoring, and advocacy for children and individuals experiencing homelessness.

In 2023, there was increased awareness of barriers faced by individuals with disabilities and those who are homebound. The need for more support and connections for older youth was also recognized.

Suggestions included enhancing the FRCs' and CRN program's social media presence, increasing outreach and marketing efforts, and offering a wider variety of programs, intervention, and prevention services. Additionally, there was a recommendation to hold one-on-one meetings with partners to share information and explore opportunities for collaboration.

In conclusion, the dedication of staff and partners in implementing these strategies has led to meaningful improvements, including the introduction of a language line, increased accessibility awareness, and the fostering of inclusive environments. While budget constraints, staffing shortages, and external factors like COVID-19 presented obstacles, ongoing efforts to adapt and find innovative solutions demonstrate a steadfast commitment to community well-being. Each service location has been recognized as a valuable asset to the community, providing essential support and services to families in need.

Section 5-3-1: Supportive and Non-Stigmatizing services

The third research questions for this section, I-3, examines if services are provided in a manner that is supportive and non-stigmatizing for patrons (especially marginalized and minority

populations). Data collected for answering I-3 is solicited through a variety of methods already reviewed with respect to Fidelity and Reach questions. Given that many of the data sources required for answering these questions are the same required for Fidelity and Reach questions, information/data required for I-3 are collected (in the interest of efficiency) at the same time with other SFSA questions.

Following the development of a consensus rating, individual item scores were converted — in keeping with Harnar and Tarr, (n.d.) and Tarr, Harnar, & Ahsan (2014) 3 method recommendations—to binary/dichotomous scores where 1=Agree and Strongly Agree, and 0=Disagree, Strongly Disagree, Neither Agree or Disagree, and Not Applicable. Only scores falling in the ranges of Agree and Strongly Disagree and Neither Agree or Disagree were present with patron answers for these questions. It is important to note that scores within the *"neither agree nor disagree"* range do not provide clear insight into whether respondents were truly neutral, had mixed opinions, or lacked sufficient information to form an opinion.

The Parental Resilience SFSA reports discussed three questions (1.6.5, 1.7, 1.9) related to this section (Lancaster, Perry, Evans, et al., 2022a; Perry, David-John, Benson, et al., 2021a; Perry, Lancaster, George, et al., 2021b; Perry, Snow, et al., 2021a). Question 1.6.5 (Table 3) indicates that SFSA members have a positive perception of diversity representation. Question 1.7 (Table 4) identified the need for additional translation services and for materials to be translated into Spanish, both of which were completed as a result of identified action items. The neutral score for part two of Question 1.7 makes sense given that none of the FRCs had an active parent advisory committee at the time the survey was conducted.

Table 3: Range of score for each FRC for the 1.6.5 question "The program displays diverse families and family structures in books, posters, and program materials."

Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
LPRC		
NSFRC		
SWAG FRC		

Table 4: Range of score for each FRC for the 1.7 question "An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate."

<i>1: Translated, whenever possible, into the language(s) spoken by all families in the community served.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
	LPRC	
NSFRC		
	SWAG FRC	
<i>2: Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and linguistically accessible to all families in the program.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
	LPRC	
	NSFRC	
	SWAG FRC	
<i>3: Designed or selected to reflect the culture(s) of the community served.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
	LPRC	
NSFRC		
SWAG FRC		

Question 1.9.4 (Table 5) shows that most FRCs are considered to be hiring locally, ensuring their staff represents the community.

Table 5: Range of score for each FRC for the 1.9.4 question " The program seeks to reflect the community and families it serves by: Seeking to hire staff members that provide families and children with connections to the diversity that exists in society—even if the program’s community is mono-lingual, mono-ethnic or mono-cultural."

Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
	LPRC	
NSFRC		
SWAG FRC		

The Social Connections SFSA report discussed one multi-part question (2.9) related to this section (Lancaster, Perry, Evans, et al., 2022b; Perry, David-John, Benson, et al., 2021c; Perry, Lancaster, George, et al., 2021a; Perry, Snow, et al., 2021c). See table 6 to view the ranges each FRC falls in for each question. Question 2.9 consists of six parts. Overall, the scores were positive, indicating that FRCs effectively modeled inclusive behavior, intervened to counter prejudice, and promptly addressed any instances of prejudice or wrongdoing. However, parts two, three, and five suggest that SFSA team members were generally unaware of staff training, professional development, and policy reviews. This lack of awareness may be due to the nature of patron visits, which primarily focus on addressing their identified needs.

Table 6: Range of score for each FRC for the 2.9 question "The program helps staff learn how to reduce stereotyping and bias by:"

<i>1: Modeling inclusive behavior among the staff.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
LPRC		
NSFRC		
SWAG FRC		
<i>2: Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
	LPRC	
NSFRC		
	SWAG FRC	
<i>3: Providing training and support for helping families and children resolve conflicts effectively.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
	LPRC	
NSFRC		
	SWAG FRC	
<i>4: Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing rules for fair treatment of others).</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
LPRC		
NSFRC		
SWAG FRC		

<i>5: Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
	LPRC	
NSFRC		
	SWAG FRC	
<i>6: Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
LPRC		
NSFRC		
SWAG FRC		

The Social and Emotional Competence of Children SFSA report had three multi part questions (5.9, 5.10, 5.11) and three single part questions (5.12, 5.13, 5.14) related to this section (David-John, et al., 2022a; Lancaster, Perry, George, et al., 2022b; Perry, Lancaster, Evans, et al., 2022a; Snow, Perry, Barli, et al., 2022a). Question 5.9 (Table 7) found an overall positive reception regarding FRCs implementing meaningful cultural activities and providing appropriate cultural resources. However, there was less agreement on whether families were invited to define and express their ethnicity, culture, or values. As a result, action items were created to enhance outreach to certain minority groups.

Table 7: Range of score for each FRC for the 5.9 question "The program welcomes and affirms the cultures of families it serves by:"

<i>1: Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
LPRC		
NSFRC		
SWAG FRC		
<i>2: Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
LPRC		
NSFRC		
	SWAG FRC	
<i>3: Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
LPRC		
NSFRC		
SWAG FRC		

Most responses for Question 5.10 (Table 8) and 5.11 (Table 9) fell within the "neither agree nor disagree" range, indicating that SFSA members were unaware of the training staff received.

Table 8: Range of score for each FRC for the 5.10 question "Staff receive training on how cultural differences affect social and emotional development, especially differences in:"

<i>1: How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
	LPRC	
	NSFRC	
	SWAG FRC	
<i>2: The extent to which nonverbal communication is predominant across cultures.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
	LPRC	
	NSFRC	
	SWAG FRC	
<i>3: Diverse cultural views success and appropriate child development.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
	LPRC	
	NSFRC	
	SWAG FRC	

Table 9: Range of score for each FRC for the 5.11 question "Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languages and cultural expressions through:"

<i>1: Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
	LPRC	
	NSFRC	
	SWAG FRC	

<i>2: Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
LPRC		
	NSFRC	
	SWAG FRC	
<i>3: Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.</i>		
Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
	LPRC	
	NSFRC	
	SWAG FRC	

Answers to Questions 5.12 (Table 10) and 5.14 (Table 12) also indicate that SFSA participants were unaware of programming policies, or the training staff received. Responses to Question 5.13 (Table 11) may have been influenced by the lack of on-site mental health support at the time of the SFSA process.

Table 10: Range of score for each FRC for the 5.12 question "Program policies and practices support the preservation of home languages by building upon the home languages and dialects of the children and families they serve."

Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
	LPRC	
	NSFRC	
	SWAG FRC	

Table 11: Range of score for each FRC for the 5.13 question "The program's mental health consultant offers consultation that is respectful of differences in parenting behaviors and child behaviors that stem from traditions and cultural roots."

Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
CPLRC		
LPRC		
	NSFRC	
	SWAG FRC	

Table 12: Range of score for each FRC for the 5.14 question "Staff are trained in how to address children exhibiting verbal or nonverbal indicators of racism or intolerance."

Agree or Strongly Agree	Neither Agree nor Disagree	Disagree or Strongly Disagree
	CPLRC	
	LPRC	
	NSFRC	
	SWAG FRC	

Section 5-3-2: Sense of Community

The fourth research question for this section, I-4, the extent to which a sense of community amongst patrons impact their response to—or is changed by—engagement and participation in Family Resource Center services/activities is reviewed in a few ways. Input from and utilization of the Community Strengths and Needs Assessment, the demographic survey, the SFSA, and Patron Feedback Group findings all provide some insight for this research question.

PSF has the practice of conducting Community Strengths and Needs Assessments prior to opening new Family Resource Centers, with the intention to learn about the community and what community members feel would be most beneficial to have in terms of services and programming available at a Family Resource Center. Such practice was carried out in the implementation of this project's expansion site- the NorthStar Family Resource Center (NSFRC). Prior to administering the assessment, community input was sought from members of the Resource Center Advisory Council in developing the assessment, to ensure it was adequate and appropriate for community members.

Information that was collected from RCAC members, to help develop a community Strengths and Needs Assessment was considered, as were the responses from a survey that was sent to the members of the RCAC, containing questions to help guide what information was to be included in the assessment. The survey explained how each of the services provided at PSF's Family Resource Centers are connected to one or more of the five Protective Factors, and then each protective factor was included, with a brief definition and examples of service types.

In reviewing the results from the survey administered to the RCAC members, during a RCAC meeting, other suggestions regarding the Community Strengths and Needs Assessment were discussed. One major suggestion that was provided was to shorten the Community Strengths and Needs Assessment, which was originally four pages, to a single page, to facilitate a clearer and easier experience for the community members who would complete it. The original assessment included more detailed questions, requiring short answer responses about the best and worst things about living in the community, as well as the Sense of Community Index II (SCI-2). Additional and more in-depth demographic questions were also part of the original assessment. Per the feedback received from the RCAC members, it was suggested to remove the SCI-2 from the assessment, simplify the demographic questions asked, and remove the questions requesting short answer responses about living in the community.

What remained was a one-page questionnaire, listing needs (separated by Protective Factor), asking the responder to rate as not needed, enough supports available (need is met), some supports

available (need still exists); and no support available (still have need). The RCAC members also suggested to make the assessment available in an electronic format, which proved to be incredibly beneficial in collecting responses from community members.

The questions originally considered to be included as part of the Community Strengths and Needs Assessment, but were not included in the final assessment, which was completed by 339 respondents, were later administered as part of a Participant Demographic Analysis to patrons who agreed to enroll in the project's outcome evaluation. Data from the Participant Demographic Analysis highlights that individuals who feel a stronger connection to their community are more likely to engage in FRC programs, return for continued services, and actively contribute to a supportive, resource-sharing environment.

The demographic survey analysis highlights patrons' perspectives on their community's best and worst aspects and desired changes. Responses reveal both strengths—such as local resources, safety, affordability, and FRCs—and challenges, including crime, infrastructure issues, and economic distress. Patrons expressed a need for improved infrastructure, community cohesion, safety, resource expansion, and economic stability. These insights underscore the importance of ongoing support and targeted improvements, reinforcing that FRCs are strong community assets essential to fostering a more cohesive and supportive environment.

A sense of community among patrons was found to have an impact on services at NSFRC who employed key staff and dedicated volunteers with deep community ties, ensuring they reflect the families they serve. SFSA team members recognize them as trusted resources with strong, respectful relationships. For example, Dr. Phil Mobley, a local pastor and community leader, and his sister, Narrie Smith, a Columbia County School Board member and former school principal, have long-standing connections in the community. Their father, Lovett “LU” Mobley, was a respected educator and pastor. Additionally, Ms. Patricia, the office assistant, is well-known and trusted after 30 years at the Clerk of Court office.

One patron shared her experience of how the FRC changed her relationship to her community saying that FRCs are, *“Welcoming, it is welcoming. . . . People feel comfortable coming in because there's a lot of people in here that I didn't know and. . . we introduced ourselves. . . and that's very important.”* She goes on to explain that even though she has been in the community for 10 years, she didn't know a lot of people and kept to herself. Now that she's volunteering at her local FRC, she says a lot of people now know her as the *“food lady”* because she helps with food distribution.

A local provider at an the RCAC feedback group shared:

“ I just always loved the model of the resource centers ... that model of having that comfortable place that people in crisis can come to. And they know they'll be treated with dignity and somebody's going to try to help. They may not be able to have every answer, but they're going to try on your behalf. And I think that has value beyond what any data would show. So, I just, I love this model. I've always been an advocate for it. I think it will outlive all of us. ”

Discussions that came up as part of the patron feedback group included a general appreciation for the respect and environment patrons receive in relation to other community options for assistance. One patron put it like this:

It's good to have somebody that really care when you walk in the door, they don't even know you... you feel like done gave up on you. You come in here? [It makes me] feel like you a queen again, you know? I like it. [laughs] Made me feel good about myself by coming here. I can do it. I'm somebody, you know?

SFSA findings revealed that informal community events were seen as a “steppingstone to further connections.” Involvement in the local gardening group established by the FRC was reportedly seen by participants as an opportunity for “...relationships to start.” One FRC manager shared that they had seen patrons connect with each other at the food distribution activities and such events provided opportunities for connections to “happen naturally.” One community provider shared that they have seen patrons make connections while attending the Fight for Your Money class. It was noted that development of connections takes “patience” and opportunities for face-to-face interactions.

In conclusion, FRC services and supports serve as a foundation for fostering new connections among patrons, which in some cases positively influence their engagement with and response to available resources. Findings highlight the critical role of trust, social connections, and shared experiences in fostering participation and long-term involvement. Patron and provider testimonials reinforce the FRC’s role as a welcoming, supportive space where individuals can connect, access resources, and build relationships. Strategies such as employing local staff, hosting informal community events, providing volunteer opportunities, and facilitating shared activities are recognized as effective in strengthening community connections.

“The fact that you're doing this now [community based participatory research]. The fact that you're reaching out for input is so important that you're not going on assumptions, but you actually want to get some real input. From, you know, our side. And I think that alone is just... great”



Section 6: Outcome Evaluation Findings

The outcome evaluation findings are divided into two sections. Section 6-1 focuses on protective factor outcomes, presenting survey results from the PFS-2, Family Resource Scale, Perceived Stress Scale, and Strengths and Difficulties Questionnaire (SDQ). Section 6-2 covers geospatial service areas, verified maltreatment trends and comparisons, and data on patrons known to the child welfare system.

Section 6-1: Protective Factor Outcomes

A sub-group of consenting patrons agreed to complete baseline and follow-up (every 6 months) Protective Factors Surveys, 2nd Edition (PFS-2). Data collection efforts began in March of 2021 and continued until June 2024. Patrons who received services and supports (prior to the evaluation) were asked to complete (as their first survey) the Retrospective PFS-2 which requests a retrospective rating (prior to receiving services and supports from a resource center) on a series of questions that measure the level of Family Functioning/Resilience, Nurturing and Attachment, Social Supports, and Caregiver/Practitioner Relationship. The Retrospective PFS-2 survey asks patrons (with a history of service with an RC) to rate responses to questions associated with four protective factors prior to (“Before”) their involvement with the resource center. These ratings can be contrasted to current (“Now”) ratings of responses to the same questions. The “Before” time frame is not specified, it may vary based on each patron. Any consenting patron that visited each RC for the first time during the study period was asked to complete the Traditional (Pre-Post) PFS-2. The first application serves as a pre-test. The “Now” questions affiliated with the Retrospective PFS-2 parallel questions of the Traditional PFS-2 and include measures of all five protective factors. For analysis purposes, the “Now” responses (for the Retrospective PFS-2 given to continuing patrons) and the 1st application of the Traditional PFS-2 (for new patrons) can serve as baseline measures for gauging change in protective factors for all patrons over the course of the formal evaluation.

All patrons (whether continuing or new patrons) were asked to answer these questions as such applied at the time of survey completion as part of the Retrospective PFS-2 or Tradition (Pre/Post) PFS-2, with additional questions measuring the level of Concrete Supports experienced by the patron. Since NorthStar Family Resource Center began operations in 2021, only the Traditional (Pre/Post) PFS-2 was utilized at that location.

Retrospective PFS-2 Findings

Although a total of 245 continuing patrons consented to participate in the study (106, 43, 40, 56) from the SWAG FRC, LPRC, CPLRC, and NSFRC respectively, complete responses to the Retrospective PFS-2 questions and subscales ranged from 109 to 115 patrons at SWAG FRC, LPRC, and CPLRC (NSFRC began as part of the funded project with no clients with retrospective experiences. Final scoring can range from 0 to 5 with higher scores representing a stronger measure of presence of each protective factor (See Table 13).

Table 13: Retrospective Protective Factors Survey Results: Average "Before" and "Now" SubScale Scores

Family Resource Center	Family Functioning/ Resilience Scores (Before Now)	Social Supports Scores (Before Now)	Nurturing and Attachment Scores (Before Now)	Caregiver Practitioner Scores (Before Now)
SWAG (n=71-75)	2.61 2.88*	2.40 2.56*	2.92 2.86	2.85 3.02*
Library Partnership (n=27-29)	2.26 2.53	2.06 2.35*	3.07 3.05	2.93 3.08
Cone Park (n=11)	2.18 2.81	1.76 2.18	2.80 2.82	2.70 2.79
Total (All FRCs, n=109-115)	2.48 2.79*	2.25 2.47*	2.95 2.90	2.85 3.01*
* Observed differences in mean subscale scores are significantly different (at p<.05, two-sided) using a paired sample t-test. Sample sizes for each subscale may vary for each RC given valid response rates (missing data) associated with select questions.				

When the “Before” and “Now” mean scores on each protective factor are examined, a series of paired samples t-tests (two-sided) suggests a significant increase (all patrons considered) in the protective factors associated with Family Functioning/Resilience, Social Supports, and the Caregiver/Practitioner Relationship. These findings were paralleled for SWAG patrons.

A significant increase in Social Supports was reported among Library Partnership patrons. Findings are qualified by limitations with the “Before” measures serving as a valid pre-test measure, the representativeness of the study sample to the broader population of patrons, and the percentage of patrons (for each protective factor) that reported an actual increased in scores (from a low of 15.6% for Nurturing and Attachment to a high of 53.9% for Family Functioning and Resilience).

Traditional PFS-2 Findings

There are 245 consenting patrons for which baseline PSF-2 measures were completed (in whole or part) across four FRCs. Among these, there are up to 156 patrons for which matched follow-up measures exist (follow-up measures are requested every six months) for at least one subscale. Findings contrast the baseline measures against the latest follow-up measure for each patron (See Table 14).

Table 14: Baseline and Follow-up Protective Factors Survey Results: Average SubScale Scores (Total and Across Family Resource Centers)

Resource Center	Family Functioning/ Resilience Scores (Baseline Follow-up)	Social Supports Scores (Baseline Follow-up)	Nurturing and Attachment Scores (Baseline Follow-up)	Caregiver Practitioner Scores (Baseline Follow-up)	Concrete Supports Scores (Baseline Follow-up)
SWAG (n=54-63)	2.93 2.70	2.74 2.48*	2.73 3.02*	3.16 3.09	2.41 2.55
Library Partnership (n=21-22)	2.64 2.47	2.37 2.15	2.94 3.23	2.91 2.79	2.31 2.33
Cone Park (n=26-28)	2.38 2.51	2.26 2.01	2.95 2.94	2.77 2.71	2.53 2.74
NorthStar (n=42-43)	2.66 2.62	2.53 2.26*	3.01 2.94	2.95 3.11	2.85 2.87
Total (All FRCs, n=145-154)	2.71 2.61	2.54 2.28*	2.88 3.01	3.00 2.99	2.54 2.64
* Observed differences in mean subscale scores are significantly different (at p<.05, two-sided) using a paired sample t-test.					

When the baseline and follow-up mean scores on each protective factor are examined, a series of paired samples t-tests (two-sided) suggests a significant decrease in Social Support protective factor scores for patrons at SWAG FRC and NorthStar FRC and a significant increase in Nurturing and Attachment scores with patrons at the SWAG FRC. There was no meaningful change in any protective factor scores for the remaining FRCs. Findings are qualified by the representativeness of the study sample to the broader population of patrons, the time frame for the data examined and the percentage of patrons (for each protective factor) that reported an actual increase in scores (from a low of 31.1% for Social Supports to a high of 46.5% for Concrete Supports).

Since the latest measure of each Protective Factor subscale score may differ in terms of the length of time each patron was a participant in the study and the number of repeated measures completed, a series of supplemental analyses were completed that revealed there was no significant change in any Protective Factor Subscale scores at 6 months and 12 months, apart from a significant increase in Caregiver/Practitioner Relationship scores over the course of 12 months for those that did not complete the Retrospective PFS-2; and a significant increase in Nurturing and Attachment scores over the course of 6 and 12 months for those that did complete the Retrospective PFS-2. A more detailed review of PFS-2 findings can be found in Perry (2024a).

Section 6-1-1: Family Resource Scale Outcomes

Among the 245 consenting patrons (across all Family Resource Centers) that agreed to participate in the evaluation, all (n=245) completed in whole or part the baseline measure of the Family Resource Scale. When average individual resource items are examined at baseline, only one resource (when average score is rounded, item number reported) receives a score that suggests it is “usually adequate” (18. Telephone or access to a phone) with no resource receiving a score suggesting it was “almost always adequate” On average, **resources deemed not at all adequate include:** 19.

Babysitting for your child(ren), 20. Childcare/day care for your child(ren), and 21. Money to buy special equipment/ supplies for child(ren). On average, **several resources are deemed as seldom adequate**, including: 8. Good job for yourself or spouse/ partner, 10. Public assistance (SSI, AFDC, Medicaid, etc.), 17. Time to be with spouse/partner or close friend, 22. Dental care for your family, 26. Toys for your child(ren), 27. Money to buy things for self, 28. Money for family entertainment, 29. Money to save, and 30. Time and money for travel/vacation. Many **resources were deemed sometimes adequate**, including:

1. Food for two meals a day
2. House or apartment
3. Money to buy necessities
4. Clothes for your family
5. Heat for your house or apartment
6. Indoor plumbing/water
7. Money to pay monthly bills
9. Medical care for your family
11. Dependable transportation (own car or provided by others)
12. Time to get enough sleep/rest
13. Furniture for your home or apartment
14. Time to be by yourself
15. Time for family to be together
16. Time to be with your child(ren)
23. Someone to talk to
24. Time to socialize
25. Time to keep in shape and looking nice



Follow-up measures for the Family Resource Scale (total scores and sub-scale scores) exist for up to 154 patrons. When the baseline and follow-up average scores for each resource subscale are examined, a series of paired samples t-tests (two-sided) suggests no significant change (increase or decrease) for six family resource categories for patrons within each FRC and as an aggregate, with two exceptions. Those participants that utilized the Library Partnership RC reported statistically higher levels of intrafamily support since receiving supports and services; whereas those participants that utilized Cone Park Library Resource Center had a statistically significant reduction in level of physical necessities and shelter (See Table 15).

Table 15: Baseline and Follow-up Family Resource Survey Results: Average Sub-Scale Scores (Total and Across FRCs)

PSF Family Resource Center	Family Resource Subscales					
	Average Baseline Follow-up Scores					
	Growth & Support	Necessities & Health	Physical Necessities & Shelter	Intrafamily Support	Childcare	Personal Resources
SWAG FRC (n=56-62)	25.90 24.07	20.63 20.48	29.89 28.93	6.98 6.48	2.92 3.45	5.77 5.52
Library Partnership RC (n=21-22)	22.53 23.52	20.91 20.41	27.68 30.36	5.91 7.36*	2.09 1.95	4.46 5.05
Cone Park LRC (n=26-27)	25.37 24.19	21.00 20.81	29.63 26.82*	7.33 7.78	2.70 2.89	5.48 4.89
NorthStar FRC (n=42-43)	27.33 27.31	21.48 21.05	30.37 29.32	6.42 7.17	2.35 1.65	5.14 5.40
Total (All FRCs, n=146-154)	25.73 24.93	20.98 20.69	29.66 28.88	6.74 6.85	2.60 2.64	5.36 5.31

* Observed differences in mean subscale scores are significantly different (at $p < .05$, two-sided) using a paired sample t-test.

When the average total family resource score is examined, there was no significant change (increase or decrease) between the baseline and follow-up scores (using a paired samples t-tests) for patrons within each FRC and as an aggregate. A more detailed review of Family Resource Scale findings can be found in Perry (2024c).

Section 6-1-2: Perceived Stress Scale Outcomes

The general nature of the items on the Perceived Stress Scale (PSS-10) ensure that responses are non-stigmatizing. Perception of stress as such relates to select life events can vary for each individual. There were 245 patrons (across all the RCs) that are consenting participants in the study, all of whom provided a baseline measure of the PSS-10. Follow-up measures (scheduled at 6 months) of the PSS-10 exist for 157 patrons, with 95 completing a second follow-up measure after one year, 57 at a year and a half, 25 at two years, and 4 patrons after two and a half years. Since the PSS-10 gauges stress within the previous month of the date of scale completion, comparisons of scores with a panel of patrons will use baseline and the most recent scores completed for this report.

When baseline data is considered, the average PSS-10 score (n=245) is 17.59 (S.D.=7.26) with the distribution of scores across levels suggesting 10.6%, 60.8%, and 28.6% had perceived high, moderate, and low levels of stress. When the panel (sub-sample) of all patrons for which follow-up data exists (n=157) is examined, there is no statistically significant change in the average PSS-10 score from baseline (Mean=16.98) to the most recent follow-up (Mean=17.43) using a paired samples t-test ($t = -0.91$, $df = 156$, two-sided $p = .363$). When the average baseline and follow-up PSS-

10 scores are examined for patrons within each resource center, the observed differences are not statistically significant (using paired samples t-tests) for all resource centers. The distribution of aggregate stress scores by level (low, moderate, and high) shows an increase in the percentage of patrons with high scores (9.6% to 10.8%) as well as moderate scores (57.3% to 62.4%), with a decrease in those with low level scores (33.1% to 26.8%).

These observed changes in the distribution of scores are statistically significant (with both Pearson's and Likelihood Ratio Chi-Square tests, asymptotic 2-sided $p < .001$). Significant observed changes appear to be accounted for by changes at SWAG FRC, Library Partnership RC and Cone Park Library Resource Center. There were no observed (or statistically significant) changes in the overall distribution of patrons with different levels of stress (although changes did exist for select individuals) at NorthStar FRC. A more detailed review of PSS-10 findings can be found in Perry (2024b).

Section 6-1-3: Strength and Difficulties Questionnaire (SDQ) Outcomes

The response/participation rate was low through the evaluation period. A total (across all FRCs) 54 individual children from 35 households are represented by baseline and/or follow-up measures of the SDQ. Baseline measures were available for 52 children and at least one follow-up measure for 36 children. Overall, the age range of children (at baseline) was from 3 to 16 with an average (aggregate) age of 8.86. The SDQ has established thresholds for interpreting each sub-scale and total difficulties scores using two classification methods. The four band categorization method is used for this study where each difficulty sub-scale and total difficulty score is classified as either Close to Average, Slightly Raised, High, or Very High (with respect to symptomology); and the Prosocial scale score is classified at Close to Average, Slightly Lowered, Low, or Very Low. Although the percentage (a majority) of children that score in the Close to Average range for each difficulty and strength ranges from a low of 63.5% (for Total Difficulties scores) to a high of 73.1% (for Conduct Problem scores), 50% ($n=26$) of all children score at least one high or very high rating on a difficulties scale or low or very low on the Prosocial scale.

There are 34 children for which baseline and follow-up SDQ measures exist. The table below suggests that among the 34 children rated, there is a general trend in reduction in the percentage of children that score Close to Average on SDQ each subscale and total difficulties scale, with a redistribution of scores to the other three categories (including High and Very High). A series of Chi-Square tests (Pearson's and Likelihood Ratio) suggests that these observed shifts in distribution across categories over time is statistically significant. When the change in average subscale and total difficulty scores are examined (using paired-samples T-tests), there is no statistically significant change in the average SDQ scores for each. These differences in significance using separate statistical tests are a by-product of the classification of data (for each test) and variance in the range of scores counted for each category/level of symptomology measured by the SDQ (See Table 16).



Table 16: Pre and Post Percentages of SDQ Sub-Scale and Total Difficulties Scores by Classification Level Pre and Post (N=34)

Score Classification	Emotional Problems Scores (Pre Post)	Conduct Problems Scores (Pre Post)	Hyperactivity Scores (Pre Post)	Peer Problems Scores (Pre Post)	Total Difficulties Scores (Pre Post)	Score Classification	ProSocial Scores (Pre Post)
Close to Average	73.5 55.6	70.6 55.6	67.6 61.1	67.6 58.3	61.8 55.6	Close to Average	70.6 61.1
Slightly Raised	5.9 16.7	8.8 25.0	14.7 19.4	5.9 11.3	14.7 16.7	Slightly Lowered	8.8 16.7
High	17.6 22.2	17.6 8.3	8.8 8.3	8.8 16.7	11.8 8.3	Low	8.8 11.1
Very High	2.9 5.6	2.9 11.3	8.8 11.1	17.6 13.9	11.8 19.4	Very Low	11.8 11.1
Total (All FRCs)*	99.9 100.1	99.9 100.2	99.9 99.9	99.9 100.2	100.1 100	Total (All FRCs)	100 100

* Note that total percentages may not equal 100% due to rounding error.

A more detailed review of SDQ findings can be found in Perry (2024d).

Gauging Representativeness of Existing Outcome Study Sample

The number of study participants (n=245) is very low in contrast with the total number of non-duplicate (verified) count of total patrons (2.0% of N=12,343) that received services across all FRCs between 2021 and 2023. Participation was voluntary. The response rate was low despite developed efforts to engage with (including the use of incentives) and inform all patrons seeking services of evaluation efforts, including participation in the collection of outcome data involving survey activities. Limited participation was influenced by a number of factors, including (but not limited to): the impact of COVID upon service delivery and in-person dissemination and engagement efforts, the fact that 48.5% (n=5,991) of total (identified) patrons sought services only once during the three year period, and general resistance/inherent concern of patrons within the communities served

(corroborated through qualitative means/interviews) to participate in research/evaluation studies and/or disclosure of personal information to any third party.

Regardless, equivalency tests were conducted to aid in understanding how the study sample differs from the total population of patrons on select variables. The percentage of females represented in the study (79.8%) was significantly higher from those patrons that were not in the study (67.5%), with the percentage of males in the study (20.2%) being significantly lower than the proportion of males not in the study (31.9%). Among the three most represented race/ethnic groups, the percentage of patrons in the study versus not in the study that self-identified as Black or African American (non-Hispanic origin) (75.6% and 65.3% respectively) and White (non-Hispanic) patrons (14.0% and 21.7% respectively) were significantly different with an overrepresentation of Black patrons and underrepresentation of White patrons in the study. The observed differences in representation of Hispanic, Latino, or Spanish origin in versus excluded from the study (6.2% and 7.3% respectively) did not differ significantly.

A series of independent samples t-tests found a significant difference in the average age of patrons, where those in the study were (on average) older (Mean=47.13 years) than those not in the study (Mean=39.81 years).

Those in the study (see Table 17) also had a significantly greater average number of service requests at resource centers between 2021 and 2023 for services associated with Concrete Supports, Parental Resilience, Knowledge of Parenting and Child Development, Social Connections, and all Protective Factor categories combined. For example, on average, study participants requested 27.24 Concrete Supports and 35.58 total services between 2021 and 2023 in contrast to 3.35 and 5.11 (respectively) from non-study patrons. Study participants had accessed services and supports on an exponentially greater scale than non-participants suggesting a higher level of expressed need and greater contact and familiarity with FRC operations.

Table 17: Average Number of Service Request Comparisons Between Patrons Enrolled in Outcome Evaluation and Other Patrons (2021-2023)

Protective Factor Service Categories	In Study Group	Mean / Average	Std. Deviation	Std. Error Mean	T-Test Statistic (Unequal Variance Assumption)	p-value (two-sided)
Concrete Support in Times of Need	No (N=12,097)	3.35	7.132	0.065	-11.32	<.001
	Yes (N=245)	27.24	32.988	2.108		
Parental Resilience	No (N=12,097)	0.23	0.768	0.007	-7.67	<.001
	Yes (N=245)	2.47	4.552	0.29		
Knowledge of Parenting and Child Development	No (N=12,097)	0.07	0.599	0.005	-4.3	<.001
	Yes (N=245)	0.53	1.688	0.108		
Social and Emotional Competence of Children	No (N=12,097)	1.16	12.417	0.113	1.04	0.297
	Yes (N=245)	0.9	3.359	0.215		
Social Connections	No (N=12,097)	0.3	4.992	0.045	-2.58	0.01
	Yes (N=245)	4.45	25.127	1.608		
All Categories of Services Combined	No (N=12,097)	5.11	15.831	0.144	-10.07	<.001
	Yes (N=245)	35.58	47.294	3.022		

Understanding Outcome Survey Results

Findings using outcome surveys suggest that retrospectively (prior to the study), the sample of patrons (overall) perceive FRCs as enhancing Protective Factors associated with family functioning/resilience, social support, and the caregiver/practitioner relationship. However, when data and reflections related to potential changes in protective factors, perceived stress, family resources, and the strengths and difficulties of a (non-representative group of) children are examined over the course of the project, null findings are generally observed. This may be a by-product of the representativeness of the study sample or level of sensitivity of chosen outcome measures specifically for FRC patrons. Alternatively, since equivalency tests suggest that study participants have exponentially higher levels of expressed need (given the average number of service visits and support requests made) than non-study patrons, perhaps the null findings represent a stabilization of levels of concern related to each survey construct while patrons continue to live in neighborhoods of need and are required to cope with environmental stresses beyond their control.

In this regard, measures of perceived stress and other community resources may not change (as well as scores on applicable measures) but utilization of FRC services and supports may aid in better coping with these realities. Findings generated from select process evaluation activities (e.g. the SFSA Team reviews, Patron Feedback Groups) and analysis on child welfare system outcomes (see below) for this same group of patrons may give credibility to such an interpretation.

Section 6-2: Community-Level Research Question

Efforts were made to study trends with select child welfare system outcomes (i.e., the rate of verified maltreatment and out-of-home placements) within the geographic (community) areas served by FRCs. In addition, trends related to child welfare system involvement (prior to and following receipt of FRC services and supports) among a sub-group of consenting patrons was conducted.

FRC Geospatial Service Areas

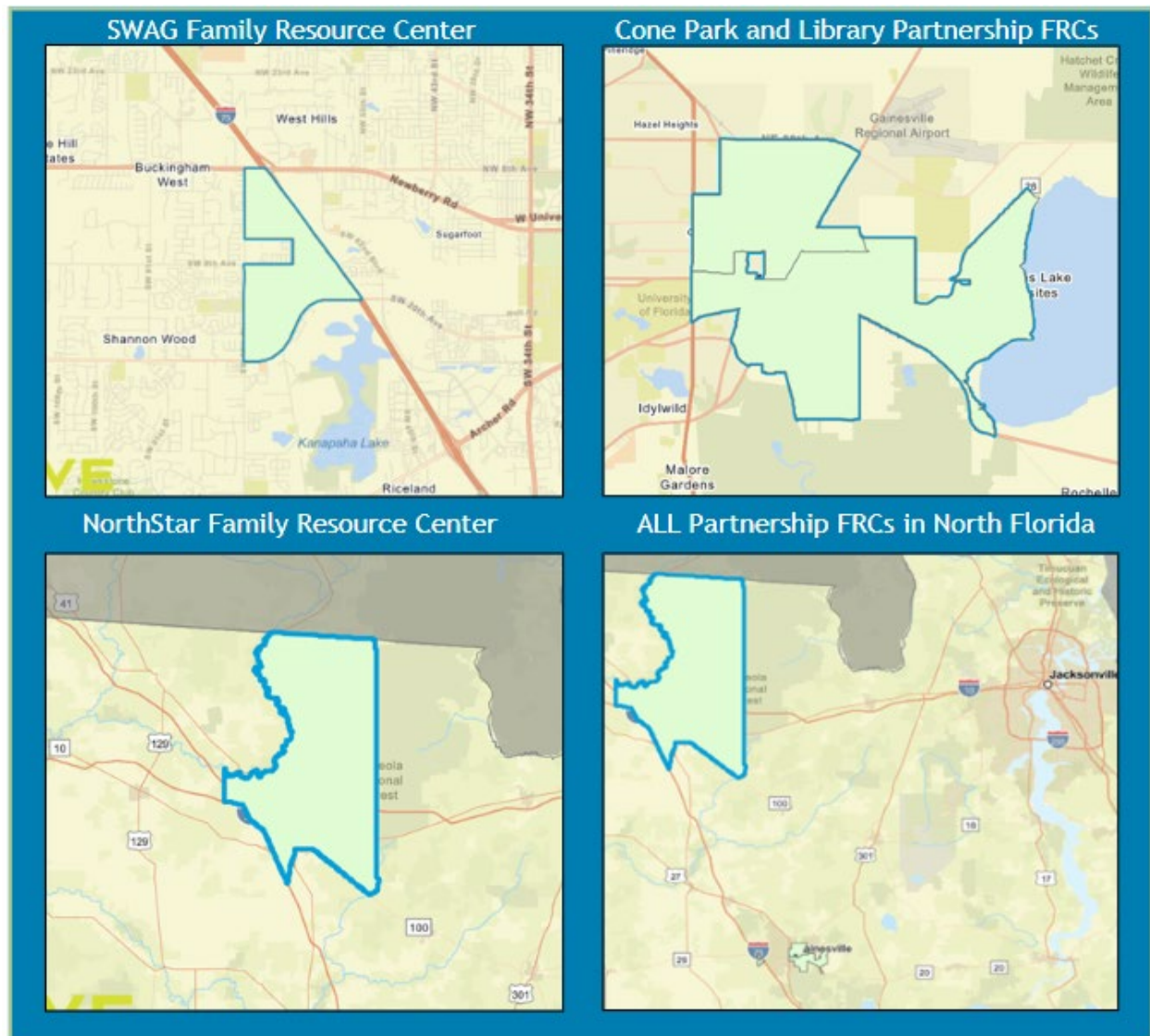
A revised validation of the geospatial service areas/communities served by each FRC was conducted. PSF directly contracted with Community Attributes Incorporated (CAI) for use of their geospatial mapping software/platform to aid in determining the specific geospatial service area for each FRC using available address data/markers on patrons served (in 2020 and 2021). These processes resulted in a unique/custom geospatial area for each FRC, that could be linked to specific Census Bureau block and tract identifiers and allow for population estimates (including children) within each area using American Community Survey data available from the Census Bureau. Address markers associated with verified maltreatment and out-of-home placement data within FSFN could then be matched with the parameters (Census tract and block identifiers) affiliated with each unique FRC service area, as well as select city and county areas/identifiers (See Figure 15).

The initial evaluation plan included an examination of trends associated with the number of hotline calls. Since not all hotline calls are investigated or “screened in” and not all investigated calls result in a verified maltreatment, it was determined that address data in FSFN (for all hotline calls) was not sufficiently reliable and valid, as address corrections/verifications within FSFN are typically done only for calls that are investigated with a finding determination. Since consistently reliable and verified address data was needed to identify whether each hotline call was within an established FRC geospatial service area, analyses on this data element were not conducted.

The smallest geospatial service area is affiliated with SWAG Family Resource Center, operating in an impoverished neighborhood on the west side of Gainesville boarding I-75 highway. The Cone Park Library Resource Center (closed in August of 2023) and the Library Partnership Resource Center (remains open) had service areas that overlapped on the east side of Gainesville. Although situated in specific neighborhoods, patrons from an expanded area sought services and supports from both FRCs. Given the overlap in service areas (and inability to distinguish an exclusive set of Census blocks and tracts for each), data from both service areas are combined for analyses.

The geographic service area for the NorthStar Family Resource Center (NSFRC) was expansive and occupied a large portion of Columbia County. Although located in Lake City, patrons from throughout the county (both urban and rural) sought services and supports from NSFRC.

Figure 15: FRC Geospatial Service Areas for each FRC



Verified Maltreatment Trends and Comparisons

The table on the next page displays the rate of verified maltreatment victims per 1000 children in the population (using FSFN and Census Bureau data) between 2015 and 2023 for the counties served by the Partnership for Strong Families and specific areas served by project FRCs. Rates for FRC service areas represent estimates given available FSFN and Census Bureau data (See Table 18).

Table 18: Rate of Verified Maltreatment Victims Per 1000 Children Across PSF Counties and Family Resource Center Service Areas

County	2015	2016	2017	2018	2019	2020	2021	2022	2023
Alachua	16.18	10.84	7.12	5.40	5.47	5.98	5.82	4.42	4.06
Baker	14.59	7.62	10.26	10.31	9.06	7.48	4.51	5.32	2.49
Bradford	18.83	18.39	16.47	9.47	8.49	4.81	8.73	8.22	9.28
Columbia	22.62	17.89	14.39	7.58	8.65	9.45	6.79	4.95	6.20
Dixie	22.63	20.61	13.40	15.73	4.66	9.89	7.79	11.73	12.97
Gilchrist	11.09	10.78	7.62	10.11	7.23	6.14	5.51	9.75	4.93
Hamilton	16.73	13.26	8.45	6.99	6.59	7.64	4.41	4.42	5.06
Lafayette	9.56	8.25	8.20	2.03	3.69	4.71	5.01	8.13	3.43
Levy	12.93	10.22	12.66	15.85	11.58	4.87	5.51	8.78	9.09
Madison	14.47	9.70	8.45	1.14	6.35	8.53	4.15	2.78	4.66
Suwannee	15.36	11.83	13.65	8.59	6.37	4.95	7.14	5.47	5.11
Taylor	24.23	16.06	14.13	5.67	7.17	9.77	6.11	5.97	6.28
Union	7.93	20.03	13.48	2.77	4.79	4.24	3.12	1.20	5.76
Service Area									
SWAG FRC	40.49	27.14	23.26	16.64	23.41	23.00	14.00	24.23	21.68
LPRC and CPLRC Combined	45.51	32.49	24.13	14.74	14.54	13.23	12.02	14.47	12.02
Gainesville ALL FRC Areas	44.05	30.70	23.84	15.20	16.64	15.66	12.38	15.92	13.45
Alachua County Non-FRC Area	12.40	8.25	5.00	3.97	4.01	4.75	5.01	3.06	2.97
NorthStar FRC	82.58	45.16	40.96	36.46	27.71	22.64	13.55	11.55	13.79
Columbia County Non-FRC Area	10.79	12.32	8.63	3.90	4.42	6.24	5.00	3.30	4.26

Data from the above table clearly suggest that the FRCs are placed in locations where need for primary child maltreatment initiatives are of paramount importance. With respect to FRCs in Gainesville (Alachua County) gauging the impact of FRCs as available data do not include data for years prior to the start of operations in the neighborhoods served (2009, 2012, and 2014 for LPRC, SWAG FRC, and CPLRC respectively). Subsequently, valid time series modelling is not possible; findings and interpretations of trends are qualified by this fact. Regardless, the rate of child maltreatment victims in the areas served by the FRCs (SWAG FRC, LPRC and CPLRC combined, and all Gainesville FRCs combined) is exponentially higher than the rate observed for all other areas of Alachua County (including Gainesville) not served by FRCs for all years. Between 2015 and 2018, there appears to be a step decline in the rate of child maltreatment victims in the areas served by SWAG FRC (from 40.49 to 16.64 per 1,000 children) and LPRC and CPLRC combined (from 45.51

to 14.74 per 1,000 children); however, concurrent reductions (in rates) are observed for areas in Alachua County not served by FRCs. When the ratio of child maltreatment rates in FRC areas to non-FRC areas (in Alachua County) is examined, there is notable fluctuation in these ratios when SWAG FRC data is considered. The SWAG FRC rate is 3.27 times larger (than Non FRC areas in Alachua County) in 2015 and gradually increases to 5.84 times larger in 2019 before reducing (after the funded project begins and concurrent with the COVID-19 outbreak) to only 2.80 times larger in 2021. The rate ratio/difference then spikes to 7.93 and 7.30 higher for SWAG FRC in 2022 and 2023 respectively. When the ratio of child maltreatment rates in areas served by LPRC and CPLRC to non-FRC areas (in Alachua County) is examined, there is greater stability with the rate fluctuating between 3.67 and 4.83 times higher for the FRC area served between 2015 and 2018. This rate difference gradually reduces to 2.40 times greater by 2021, and spikes to 4.73 and 4.05 higher for LPRC and CPLRC (combined) in 2022 and 2023 respectively.

As with the FRCs in Alachua County, NorthStar Family Resource Center (NSFRC) serves an area where the rate of verified child maltreatment is exponentially higher than the rate observed in all areas within Columbia County. Implementation planning for NSFRC began in 2020, with the facility beginning operations in 2021. Prior to the opening of NSFRC there was a gradual reduction of the rate of child maltreatment from 82.58 per thousand children (in 2015) to 22.64 per thousand children in 2020. This rate continued to decline after NSFRC opened to 11.55 in 2022 prior to a slight increase to 13.79 per thousand children in 2023. When the ratio of child maltreatment rates in areas served by NSFRC to non-FRC areas (in Columbia County) is examined, the rate varies from a low of 3.67 (in 2016) to a high of 9.35 (in 2018) times higher for the NSFRC area served between 2015 and 2019. This rate difference gradually reduces to 2.71 times greater by 2021, before slightly increasing to 3.50 and 3.24 times higher for NSFRC in 2022 and 2023 respectively.

Out-of-Home Placement Trends and Comparisons

The table below displays the rate of out-of-home placements per 1000 children in the population (using FSFN and Census Bureau data) between 2015 and 2023 for the counties served by the Partnership for Strong Families and specific areas served by project FRCs. Rates for FRC service areas represent estimates given available FSFN and Census Bureau data (See Table 19).

Table 19: Rate of Out-of-Home Placements Per 1000 Children Across PSF Counties and Family Resource Center Service Areas

	2015	2016	2017	2018	2019	2020	2021	2022	2023
Alachua	1.58	2.20	1.31	1.99	2.56	2.74	2.50	3.54	4.06
Baker	2.21	2.24	1.19	3.88	5.94	1.95	2.86	6.84	6.46
Bradford	1.85	3.19	2.93	1.46	1.66	4.44	2.91	6.58	8.93
Columbia	4.67	2.24	2.76	3.07	3.49	2.80	4.61	8.62	11.29
Dixie	0.00	2.66	4.25	5.90	2.33	5.27	4.22	12.73	29.17
Gilchrist	0.85	0.28	0.85	0.28	1.34	1.28	2.20	4.18	5.97
Hamilton	2.91	1.47	1.10	0.74	1.46	1.46	0.37	10.32	6.14
Lafayette	1.06	3.85	3.83	4.58	3.16	1.77	0.63	6.78	11.68
Levy	0.87	1.37	1.13	3.02	1.89	2.12	3.83	4.39	8.75
Madison	1.32	3.77	1.13	0.85	1.16	2.65	2.07	4.94	8.39
Suwannee	1.49	2.02	1.27	2.09	2.93	2.74	2.77	8.26	10.22
Taylor	3.46	6.88	2.55	2.83	1.85	9.06	4.70	17.67	18.85
Union	2.76	1.38	2.07	1.39	2.05	3.18	2.50	5.38	4.24
Service Area									
SWAG FRC	4.91	2.17	5.10	6.66	6.80	9.64	8.00	15.31	14.03
LPRC and CPLRC Combined	6.32	9.56	6.85	6.19	18.52	10.29	6.56	9.79	14.02
Gainesville ALL FRC Areas	5.91	7.08	6.28	6.31	15.75	10.13	6.82	10.61	14.02
Alachua County Non-FRC Area	0.99	1.56	0.68	1.36	0.84	1.80	1.97	2.70	2.90
NorthStar FRC	12.74	5.60	6.27	15.63	10.66	5.00	8.82	17.96	27.58
Columbia County Non-FRC Area	3.08	1.55	2.00	1.47	1.89	2.27	3.50	6.27	7.13

The rate of out-of-home placements in the areas served by the FRCs (SWAG FRC, LPRC and CPLRC combined, and all Gainesville FRCs combined) is exponentially higher than the rate observed for all other areas of Alachua County (including Gainesville) not served by FRCs for all years. Apart from a decline in rate between 2015 to 2016 (from 4.91 to 2.17 per 1000 children) for the area served by SWAG FRC, there is a steady increase in the rate of out-of-home placements (with minor fluctuations) between 2017 through 2022 (to 15.31 per 1000 children) followed by a slight decline in the rate (to 14.03 per 1000) in 2023. This pattern of steady increase in the rate of out-of-home placements for children is observed for non-FRC areas in the remainder of Alachua increasing from 0.84 (per 1000 children) in 2019 to 2.90 (per 1000 children) in 2023. There is notable fluctuation across individual years in the ratio of SWAG FRC to Alachua County Non-FRC areas rates of out-of-home placement from a low (in 2016) of 1.39 times to a high (in 2019) of 8.08 times greater for SWAG FRC (in contrast to non-FRC areas in Alachua County). There seems to be less predictability in the trend and ratio of out-of-home placement in areas served by LPRC and CPLRC to non-FRC areas (in Alachua County). The out-of-home placement rates varies from a low of 6.19 (in 2018) to a high of 18.52 (in 2019) per 1000 children with the ratio of rate difference fluctuating between a low of 3.32 times higher (in 2012) to a high of 22.06 times greater (in 2019) in areas served by LPRC and CPLRC in contrast to non-FRC areas in Alachua County.

As with the FRCs in Alachua County, NorthStar Family Resource Center (NSFRC) serves an area where the rate of out-of-home placements is exponentially higher than the rate observed in all other areas within Columbia County.

Implementation planning for NSFRC began in 2020, with the facility beginning operations in 2021. Prior to the opening of NSFRC there was fluctuation in the out-of-home placement rate between 2015 through 2020, from a low of 5.00 per thousand children in 2020 (during the first year of the COVID pandemic) and 5.60 in 2016 to a high of 15.63 (per 1000 children) in 2018. Beginning in 2021, the rate increased dramatically from 8.82 to 27.58 out-of-home placements per thousand children in 2023. Parallel trends in rate increase (at much lower levels) were observed (between 2020 and 2023) for areas of Columbia County not served by NSFRC. When the ratio of out-of-home rates in areas served by NSFRC to non-FRC areas (in Columbia County) is examined, the rate reduces from 4.13 times higher in 2015 to 3.14 times higher in 2017, before spiking at 10.61 times higher in 2018, followed by a gradual reduction to 2.2 times higher in 2020. This rate gradually increased from 2.52 to 3.87 times higher for NSFRC in 2021 through 2023.

Although some desired trends in child welfare system metrics in areas served by FRCs are observed over time, impact findings are inconclusive given the lack of data on trends for years prior to the start of FRC service and support delivery in Gainesville (Alachua County) FRCs, and concurrent trends (at lower levels) within areas not served by FRCs—suggesting the possible influence (individual or compounded) of other environmental and systemic factors on observed changes in select metrics.

The above analyses utilize available aggregate data from secondary data sources and identify general trends on outcome measures within the broader community and neighborhoods served by Partnership for Strong Families' FRCs. It is not known (from these data) how many individual cases (or family members) within the general population over time were patrons of any FRC. Thus, the impact of each FRC within the broader community may not be fully understood or muted should there be a notable portion of the population, with past involvement with the child welfare system, which have not utilized services and supports of an FRC.

Patrons Known to the Child Welfare System

Among the 245 patrons that consented to participate in the outcome evaluation, 169 patrons gave consent to access and review any history of involvement with the child welfare system (in Florida) using the statewide child welfare information system known as the Florida Safe Families Network (FSFN). These 169 consenting patrons were matched with information within FSFN to determine level and type of past involvement with any case that involved a call to the Florida Abuse Hotline and subsequent child maltreatment investigation where the patron was identified as an alleged perpetrator. Among the 169 individuals who gave consent to access any history of involvement with the child welfare system using FSFN, 76 patrons (45% of consenting patrons) were involved (as an alleged perpetrator in at least one case reported to the Florida Abuse Hotline in the past, the earliest taking place in 2006 and latest in 2023. Analyses of child welfare system involvement data, along with FRC involvement for these 76 patrons, may help with an examination of the potential influence of FRCs in mitigating child welfare system involvement in the future. Since access to child welfare data was limited to consenting patrons, it is unknown how many FRC patrons had past involvement (and outcomes) with DCF. This limitation qualifies the findings.

Florida Abuse Hotline Calls

There was a total of 297 Florida Abuse Hotline calls linked to these 76 patrons, of which 225 were screened in for investigation that involved 487 children and 757 maltreatment allegations. The number of abuse hotline calls ranged between 1 and 13 across all patrons between 2006 and 2023 with 35 (46.1%) being a subject of 1 or 2 calls. An additional 23 patrons (30.3%) were subjects of 3 to 5 calls, 14 (18.1%) were affiliated with 6 to 10 calls, and 4 (5.2%) patrons were a party to 11 to 13 calls. The average number of abuse hotline calls associated with each consenting patron was 3.89 (S.D.=3.21). Among the 76 patrons, there were 4 patrons (associated with six abuse hotline calls) for which no abuse hotline call was screened in for investigation, resulting in 72 patrons affiliated with at least one child maltreatment investigation.

Screened-In Calls for Investigation

When only screened in calls are considered (n=72 patrons), 40 (55.5%) patrons (as alleged perpetrators) were affiliated with 1 or 2 investigations, 19 (26.4%) were involved in 3 to 5 investigations, 11 (15.3%) were associated with 6 to 10 investigations, and 2 patrons (2.8%) were linked to 11 investigations. The average number of screened in hotline calls associated with these 72 consenting patrons was 3.12 (S.D.=2.55). With screened in calls, a formal child abuse investigation commences. Findings related to each investigation outcome (for each maltreatment type allegation; there can be multiple per child, per investigation) are classified in one of three ways. These include a determination that the alleged maltreatment was: “Verified”, “Not Substantiated”, or “No Indicators.” (State of Florida Department of Children and Families, 2024 a; 2024b).

A total of 107 (of 757) or 14.1% of all allegations of maltreatment were verified, 206 (27.2%) were not substantiated, and 416 (55%) allegations were determined to have no indicators of maltreatment. There were an additional 28 maltreatment allegations for which an investigation outcome was missing or not known from a review of FSFN data.

Child Welfare System Involvement Pre and Post FRC Engagement

Information related to the date of first service/support received from any FRC by each consenting patron was obtained from the Community Module database (a data management system used at the FRCs). The initial FRC service date was integrated with data documenting the date of the initial screened-in abuse hotline call, all subsequent hotline call dates (through December 31, 2023), along with additional FSFN data/child welfare system and investigation data (e.g., number and type of allegations, number of children subject to an investigation, investigation outcomes, number of out-of-home placements) that allowed documentation of the history of child welfare system involvement prior to and following initial engagement of the patron with a FRC affiliated with the Partnership for Strong Families.

The table below details the results of a series of statistical analyses conducted to determine if there was any meaningful change in child welfare system metrics for patrons (with a history of involvement with Florida DCF as an alleged perpetrator) prior to and following the start of their engagement/receipt of services and supports from FRCs.

Table 20: Distribution of Child Welfare System Metrics for Patrons and Significance of Change Prior to and Following Engagement with Family Resource Centers

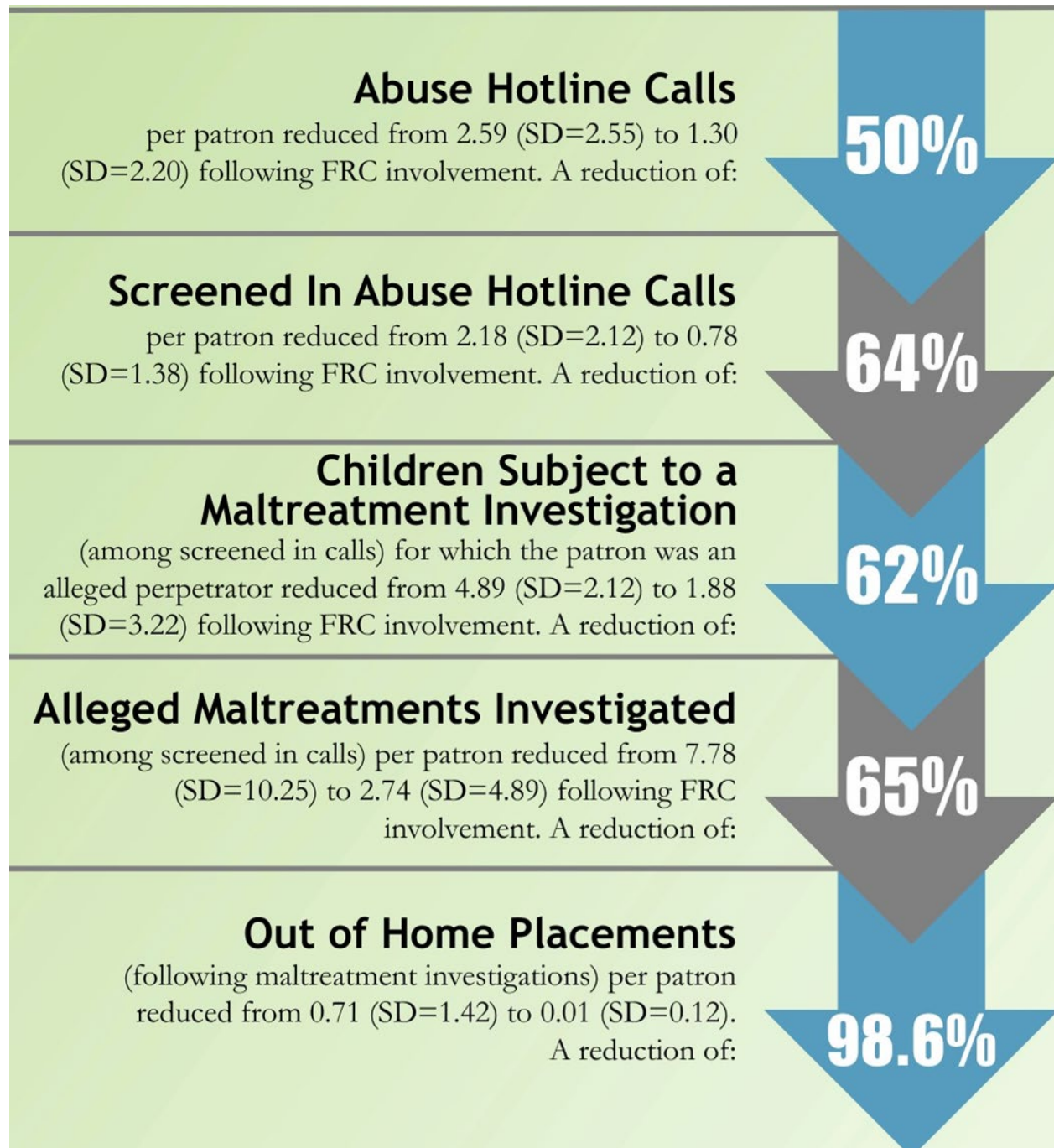
Indicator of Child Welfare System Involvement (Number of Patrons)	Patron Average Prior to FRC Service Engagement (Standard Deviation)	Patron Average After FRC Service Engagement (Standard Deviation)	t value	Degrees Freedom	2-Tailed Significance
Number of Calls to the Abuse Hotline (n=76)	2.59 (2.55)	1.3 (2.20)	3.19	75	0.002
Number of Screened In Abuse Hotline Calls (n=76)	2.18 (2.12)	0.78 (1.38)	4.94	75	<.001
Number of Children Subject to Maltreatment Investigations (n=72)	4.89 (6.53)	1.88 (3.22)	3.82	71	<.001
Number of Alleged Maltreatments Investigated (n=72)	7.78 (10.25)	2.74 (4.89)	3.94	71	<.001
Number of Child Out-of-Home Placements (n=72)	0.71 (1.42)	0.01 (0.12)	4.15	71	<.001

There was a statistically significant improvement in ALL child welfare system engagement and outcome metrics among patrons following their involvement with FRCs. Using a series of paired sample t-tests with the panel of patrons with past involvement with the Florida child welfare system, the following was found:

- The average number of **abuse hotline calls** per patron reduced from 2.59 (SD=2.55) to 1.30 (SD=2.20) following FRC involvement, a **50% reduction that was statistically significant** (t=3.19, df=75, two-sided p=.002). There was a total of 197 abuse hotline calls associated with 66 patrons prior to FRC service engagement and 99 abuse hotline calls associated with 33 patrons after FRC service engagement.
- The average number of **screened in abuse hotline calls** per patron reduced from 2.18 (SD=2.12) to 0.78 (SD=1.38), a **64% reduction that was statistically significant** (t=4.94, df=75, two-sided p<.001). There was a total of 166 screened in abuse hotline calls associated with 65 patrons prior to FRC service engagement and 59 screened in abuse hotline calls associated with 28 patrons after FRC service engagement.
- The average number of **children subject to a maltreatment investigation** (among screened in calls) for which the patron was an alleged perpetrator reduced from 4.89 (SD=2.12) to 1.88 (SD=3.22) following FRC involvement, a **62% reduction that was statistically significant** (t=3.82, df=71, two-sided p<.001). There was a total of 352 children subject to a maltreatment investigation associated with 65 patrons (as alleged perpetrators) prior to FRC service engagement and 135 children subject to a maltreatment investigation associated with 28 patrons after FRC service engagement.
- The average number of **alleged maltreatments investigated** (among screened in calls) per patron reduced from 7.78 (SD=10.25) to 2.74 (SD=4.89) following FRC involvement, a **65% reduction that was statistically significant** (t=3.94, df=71, two-sided p<.001). There was a total of 560 alleged maltreatments investigated associated with 65 patrons (as alleged perpetrators) prior to FRC service engagement and 197 alleged maltreatments investigated associated with 28 patrons after FRC service engagement.

- The average number of **out-of-home placements** (following maltreatment investigations) per patron reduced from 0.71 (SD=1.42) to 0.01 (SD=0.12), a **98.6% reduction that was statistically significant** ($t=4.15$, $df=71$, two-sided $p<.001$). There was a total of 51 child removals/out-of-home placements associated with 20 patrons (as alleged perpetrators) prior to FRC service engagement and 1 child removal/out-of-home placement associated with 1 patron after FRC service engagement.

Figure 16: From Crisis to Prevention: Average Hotline Calls, Investigations, and Placements Reduced by 50-99% After FRC Engagement



When the distribution of investigation findings is examined (see table below) involving consenting patrons, there is a statistically significant reduction in the average number (per patron) of maltreatment findings classified as “Verified” ($t = 4.22$, $df=71$, $p<.001$) and “No Indicator” ($t=2.08$, $df=71$, $p=0.04$). In fact, among the 107 verified cases of maltreatment associated with the study sample, 104 were documented prior to FRC engagement and only 4 afterward. Given that there were 166 screened-in calls/investigations prior to FRC engagement and 59 screened-in calls/investigations after FRC engagement, the likelihood of a verified maltreatment finding per investigation (using aggregate data) was 62.7% (104 of 166) prior to patron engagement with an FRC versus 6.8% (4 of 59) following engagement with an FRC.

The date of initial visit/engagement with an FRC varied across years (between 2013 and 2023) for the 76 patrons (with involvement with the child welfare system as alleged perpetrators), with the smallest number of patrons observed in the 2023 (year of initial engagement) cohort ($n=2$) and the largest in 2021 cohort ($n=18$). Apart from the 2013 cohort of patrons, the majority of patrons for remaining cohorts continued to visit FRCs for the majority of years that followed the year of initial engagement. Please see (Perry, Lancaster, and Spoliansky, 2025) for more detailed information regarding these child welfare system outcomes and any data and finding qualifications.

Although additional study is warranted, these findings are very promising and highlight the importance of FRCs as a potential long-term solution in strengthening families and reducing the likelihood of continued involvement of families with Florida DCF and rates of child maltreatment.

Table 21: Distribution of Child Maltreatment Investigation Findings for Patrons and Significance of Change Prior to and Following Engagement with Family Resource Centers

Child Welfare Investigation Finding Category (Number of Patrons)	Patron Average Prior to FRC Service Engagement (Standard Deviation)	Patron Average After FRC Service Engagement (Standard Deviation)	t value	Degrees Freedom	2-Tailed Significance
Number of Not Substantiated Findings ($n=72$)	1.79 (3.37)	1.07 (2.24)	1.64	71	0.106
Number of No Indicator Findings ($n=72$)	3.79 (6.13)	1.99 (4.21)	2.08	71	0.041
Number of Verified Findings ($n=72$)	1.44 (2.78)	0.04 (0.26)	4.22	71	<.001





“They're very interactive with the kids. Even when the kids are in a bad mood, which happens to all kids, you know they didn't get enough sleep, they're hungry, or whatever. And there's always toys out there for them to play with and little books and, you know, pamphlets of all kinds of information in the community where you go to get help.”

Section 7: Lessons Learned

The implementation of the "Community Collaborations to Strengthen and Preserve Families" grant provided invaluable insights across several key themes. Below are the detailed lessons learned from the project's various components.

Implementation:

Expanding into a new community, particularly through the creation of the NorthStar Family Resource Center (NSFRC) in Lake City, demonstrated the importance of patience and understanding. The team learned that taking time to build trust with the local community and stakeholders is critical for success. This trust was cultivated through consistent engagement, addressing community-identified needs, and ensuring that services were culturally relevant and responsive. The creation of and collaboration with the Resource Center Advisory Council was an essential component of this expansion.

Hiring Family Resource Center (FRC) staff from within the local community emerged as a significant factor for success. Local hires brought an innate understanding of the community's culture, values, and challenges, enabling the delivery of services that felt more genuine and tailored to patrons. This approach also enhanced the credibility of the FRCs and strengthened connections between the centers and the communities they served.

At the same time, the closure of the Cone Park Library Resource Center (CPLRC) underscored the challenges of sustainability in the face of external financial pressures.

This closure happened three years into the project period and came as part of a budget reduction plan (unrelated to the project) implemented by PSF, in response to several external challenges, with the unprecedented costs associated with out-of-home care for children being the most significant factor. This change was made after much thoughtful consideration by PSF leadership, with a commitment to minimizing the impact on our patrons. While the impact of the closure was mitigated through strategic communication and alternative service options, it highlighted the need for contingency planning and adaptable service models to maintain continuity for patrons.

Research:

Community-Based Participatory Research (CBPR) methods were integral to ensuring that the evaluation process remained community-driven and inclusive. However, the project underscored the necessity for flexibility in administering CBPR methods. Time constraints within communities often required adaptive scheduling and approaches to data collection to ensure meaningful participation without imposing undue burdens on participants.

Honoring and recognizing participants' time and commitment was essential for fostering trust and engagement.

Providing incentives, such as gift cards, headshot photos, and letters of appreciation, reinforced the value placed on participants' contributions. Moreover, incorporating their feedback into actionable steps strengthened the overall research process and improved outcomes.

Additionally, data collection efforts demonstrated the importance of tailoring research instruments to the target population. Simplifying tools, offering support for participants with varying levels of technological literacy, and ensuring confidentiality were key to obtaining accurate and comprehensive data.

Finally, the Evaluation Team's analysis of community outcome data using FSN data provided valuable insights into the impact of the FRCs. However, the process underscored the importance of robust data management systems to ensure accuracy and efficiency in data analysis. The findings revealed trends that helped guide program improvements and decision-making, but the experience also highlighted challenges related to data sharing and access. Building stronger data-sharing agreements and improving infrastructure for real-time data analysis would enhance future evaluations and allow for more timely adjustments.

Budget Management:

Implementing an expenditure tracker and holding monthly financial meetings were critical strategies for maintaining adherence to the project's budget. These practices enabled the team to monitor spending in real-time, identify potential issues as they arose, and make necessary adjustments to avoid overages or inefficiencies. This level of financial oversight also enhanced transparency and accountability, ensuring that resources were allocated effectively to meet project goals.

The importance of clear communication between program and finance teams cannot be overstated. Regularly scheduled meetings ensured alignment between programmatic needs and financial capabilities, creating a more seamless implementation process.

Partnerships and Contracts:

While many partnerships proved instrumental to the project's success, the collaboration with CAI for a data mapping project revealed the importance of thoroughly vetting external partnerships. The project's challenges with CAI highlighted the need for clear objectives, aligned expectations, and an understanding of potential risks before entering into formal agreements. Future initiatives should include comprehensive evaluations of prospective partnerships to avoid resource misallocation and ensure alignment with the project's goals.

Key Takeaways for Future Initiatives:

1. **Engagement with Communities:** Expanding into new communities requires a foundation of trust, built through genuine relationships and a commitment to understanding local needs.
2. **Staffing from Within the Community:** Hiring local staff enhances credibility, ensures cultural responsiveness, and strengthens ties with the community.
3. **Flexible and Inclusive Research Practices:** Adaptable CBPR methods and meaningful participant engagement are critical for successful data collection and program evaluation.
4. **Data Infrastructure:** Strengthening data management systems and agreements facilitates more effective evaluation and programmatic adjustments.
5. **Financial Oversight:** Tools such as expenditure trackers and consistent financial reviews are essential for maintaining budget adherence and accountability.
6. **Partnership Vetting:** Formal partnerships should be carefully evaluated to ensure alignment with project goals and to minimize the risk of wasted resources.

The lessons learned from this project will serve as a guide for future efforts, ensuring that best practices are applied, and challenges are proactively addressed to maximize impact.



“What I noticed [is] how the children just love it [homework help] when you see them enjoying...that's important.”

Section 8: Key Accomplishments

The implementation of the Community Collaborations to Strengthen and Preserve Families grant led to significant achievements that advanced the project's goals and strengthened community support systems. Below are the detailed key accomplishments:

1. Establishment of the Resource Center Advisory Council (RCAC):

The creation of the RCAC was a pivotal achievement in ensuring that the NorthStar Family Resource Center (NSFRC) reflected the needs and priorities of the Lake City community. The RCAC included stakeholders from diverse sectors, including nonprofits, government agencies, local businesses, community leaders, and patrons. This inclusive structure allowed the council to gather a broad spectrum of perspectives and insights, ensuring that the center's services addressed real, community-identified needs.

One of the RCAC's early accomplishments was guiding the development of the Community Strengths and Needs Assessment. By incorporating feedback from stakeholders and community members, the assessment provided critical data to shape the NSFRC's service offerings and priorities. The RCAC's consistent engagement with the community ensured that services were responsive, culturally relevant, and aligned with the Protective Factors Framework. The council's collaborative approach also fostered strong relationships between the NSFRC and local organizations, laying the foundation for sustainable partnerships and continued community involvement.

2. Expansion: Opening of the NorthStar Family Resource Center (NSFRC):

The successful opening of the NSFRC on March 18, 2021, marked a major milestone in expanding

the Family Resource Center network to Columbia County. Designed to replicate the proven Gainesville FRC model while addressing the unique needs of Lake City residents, the NSFRC quickly became a cornerstone for family support in the community. The center's services focus on strengthening families through programs that promote parental resilience, social connections, and access to concrete supports during times of need.



The NSFRC's launch was met with strong community support, evidenced by high attendance at the ribbon-cutting ceremony and ongoing engagement with its programs. The center offers a wide range of services, including academic assistance, job readiness support, faxing, computer, and internet access, health and wellness programs, community activities and events, and an emergency clothes and food pantry. Its location within the Richardson Community Center further enhances accessibility, providing families with a central and familiar space to access resources and supports.

The NSFRC's establishment also underscored the importance of stakeholder collaboration. The Resource Center Advisory Council played a

critical role in its development, and the center's success was bolstered by partnerships with local organizations and service providers. The NSFRC's impact on the community remains evident through increased service utilization and positive feedback from patrons, who highlight the center's welcoming environment and the relevance of its offerings.

3. Improvement of Data Collection in the Community Module:

Refining the Community Module was essential to ensuring effective service delivery and evaluation across all Family Resource Centers. This management information system allowed staff to track service utilization, demographic data, and outcomes for patrons. By improving the accuracy and functionality of the Community Module, the project enhanced its ability to align services with the Protective Factors Framework and respond to community needs in a timely manner.

Key enhancements to the Community Module included adding additional demographic fields to better identify patrons, simplifying data entry processes, integrating additional fields for tracking outcomes and service delivery, and providing training for staff to ensure consistent and accurate data collection. These improvements enabled more detailed reporting on service usage and outcomes, which informed strategic decision-making and program adjustments. For example, data from the Community Module helped identify trends in patron needs, allowing the centers to prioritize services such as mental health support and job readiness training.

Moreover, the enhanced data collection capabilities facilitated more robust evaluations of the FRCs' impact, demonstrating the effectiveness of their programs in strengthening families and reducing risk factors for child welfare involvement. The improved system also supported grant reporting requirements, ensuring

transparency and accountability to funders and stakeholders.



4. Refinement of Services and Programming via Strengthening Families Self-Assessment (SFSA) and Patron Feedback Groups:

The use of the Strengthening Families Self-Assessment (SFSA) tool and patron feedback groups was instrumental in refining and improving services across the FRCs. The SFSA process involved regular reviews of each center's programs and services to ensure alignment with the Protective Factors Framework. Action items identified through the SFSA process were revisited every six months, resulting in 18 comprehensive updates over the course of the project. These updates highlighted areas of progress and opportunities for further improvement, fostering a culture of continuous quality enhancement.

Patron feedback groups provided a valuable platform for gathering qualitative insights directly from those who used the centers' services. These groups allowed patrons to share their experiences, identify unmet needs, and suggest changes to programs and activities. For example, a patron came up with an idea for the center and the FRC manager responded, "I didn't think of that ... thank you so much ... we'll get on it ... It would be kind of good for us, the

neighborhood” (Perry, Pegram, Lancaster & Spoliansky, 2024).

The combination of SFSA and patron feedback groups also strengthened relationships between FRC staff and patrons, as participants felt their voices were heard and valued. This approach not only improved the quality and relevance of services but also reinforced the centers’ commitment to being community-driven and responsive to the evolving needs of families. The lessons learned through these activities will serve as a foundation for future initiatives, ensuring that FRCs remain adaptive and impactful.

All of these accomplishments demonstrate the project’s success in building stronger, more resilient families and communities. By prioritizing community engagement, data-driven decision-making, and continuous improvement, the project has laid a solid foundation for sustainable, long-term impact.



“Family Resource Centers have been kind of like that Justice League. Because when you come to them and say, ‘Look, I need a little bit of help,’ they don't just give you something — they show you how to get help, how to help yourself... how to be your own hero.”



Section 9: Sustainability and Next Steps

The [Community Collaborations to Strengthen and Preserve Families](#) initiative has laid a strong foundation for sustainable operations and future development of the Family Resource Center (FRC) network. Below are detailed plans for sustaining and enhancing the FRC model:

1. Sustaining Operations Through Diversified Funding Sources:

As of December 2023, the Children's Trust of Alachua County (CTAC) expanded its support for PSF's Family Resource Center Network, funding the majority of operational expenses at the two Gainesville locations. These funds cover essential costs such as personnel, rent, and equipment rentals, ensuring continuity of services post-grant period.

In addition to CTAC funding, other grants and donor contributions have strengthened the network's financial sustainability:



- **Opioid Abatement Grant** (\$167,466, 7/1/2024 – 6/30/2025): Supports operational expenses at NSFRC and includes a 15-passenger van for expanded service delivery.
- **United Way of Suwannee Valley Grant** (\$15,836, 7/1/2024 – 6/30/2025): Provides emergency financial support (e.g., rent, utilities) for patrons at NSFRC.
- **CAPP Grant** (Alachua County Board of County Commissioners, \$18,237 annually for three years, starting 10/1/2024): Ensures additional support for programmatic expenses at the two Gainesville locations.

These diverse funding streams demonstrate the project's commitment to maintaining the accessibility and quality of its services, with the ability to maintain all FRCs open and operating post-grant funding.

2. Utilizing PSF Staff for Continuous Improvement:

To maintain the quality and impact of FRC services, PSF staff will take on critical roles in sustaining and enhancing operational efficiency:

- **Data Management and Analysis:** A designated staff person (funded by CTAC) will continue to refine the Community Module system, ensuring accurate and comprehensive data collection to monitor service utilization and outcomes. Enhancements to the system will enable more detailed reporting and facilitate timely adjustments to programs and services.
- **Quality Improvement Through the SFSA Action Items:** The Strengthening Families Self-Assessment (SFSA) process and its associated action items will serve as a roadmap for continuous quality improvement. It has been recommended to the agency that regular updates to these action items continue to be made, thus ensuring that services remain aligned with the needs and priorities of the communities served.

3. Expanding Training and Consultation Services:

CTAC's funding of the [FRC Consulting Program](#) enables PSF to offer training, coaching, and consultation services to other municipalities interested in developing or enhancing Family Resource

Centers. This program not only diversifies revenue but also promotes the replication of the FRC model in other communities, amplifying the program's impact.

4. Ongoing Assessment of Evaluation Practices:

The project recognizes the importance of robust evaluation practices to measure the impact of FRC services on children, families, and communities. When presented the opportunity, ideal evaluation processes will include:

- **Mixed-Methods Approach:** Incorporating both qualitative and quantitative methods to assess program outcomes, with a focus on caregiver protective factors and social determinants of health.
- **Stakeholder Input:** Ensuring that patrons, community members, and other stakeholders continue to have a voice in shaping evaluation tools and processes.
- **Outcome Measurement:** Prioritizing tools that effectively capture the long-term impact of FRC services, including reductions in stress, improvements in family resilience, and enhanced social connections.

5. Strategic Use of Local Resources and Partnerships:

The FRC network will continue to leverage local partnerships to enhance service delivery and expand its reach. The CTAC-funded Community Resource Navigation Program and Help me Grow programs, for example, are helping PSF to extend services to underserved areas of Alachua County. Collaborative efforts with local agencies, schools, and faith-based organizations will further strengthen the network's ability to meet community needs.

6. Strengthening Patron Relationships:

Continuous engagement with patrons will remain a cornerstone of the FRC model. Regular feedback groups, satisfaction surveys, and informal input mechanisms will ensure that services are responsive to the evolving needs of families. Efforts to build trust and foster a sense of community will be central to sustaining patron involvement and loyalty.

Conclusion:

The sustainability and next steps for the Family Resource Center network are firmly rooted in the strengths of its community-driven approach, diversified funding, and commitment to continuous improvement. By leveraging these resources and strategies, PSF is well-positioned to sustain and grow its impact on families and communities for years to come."

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Endnotes

ⁱ Incidents of child abuse show the count of verified maltreatments, meaning confirmed cases of abuse or neglect based on credible evidence.

ⁱⁱ For more information regarding CSSP's Strengthening Families and Protective Factors Framework, please see: [link](#), and Harnar & Tarr (n.d.).



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