



THE NORTHSTAR FAMILY RESOURCE CENTER: 2022 PROFILE OF SERVICES AND SUPPORTS

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Introduction

This report summarizes key findings from an analysis of secondary data related to services and supports received by patrons from the NorthStar Family Resource Center (NSFRC) in 2022. The NSFRC is part of a network of Family Resource Centers (FRC) operated by Partnership for Strong Families (PSF). PSF is the lead Community-Based Care agency for 13 North Central Florida Counties. In 2007, PSF began developing a network of FRCs that emphasize a strengthening families approach while utilizing a Protective Factors Framework to provide prevention services and supports to families. The NSFRC is the newest FRC operated by PSF that began serving the Lake City community in 2021. The PSF Resource Center Model is built upon a multi-system collaborative, focusing on primary prevention that works toward strengthening families with the goal of preventing child maltreatment and reducing entries into foster care.

The NorthStar Family Resource Center

The NSFRC began formal operations in March of 2021 following a significant planning and development phase and with the support/funding of the Children's Bureau. PSF has long known that Columbia County Florida, the area directly north of Alachua County (where the three Gainesville FRCs are located), has needed an increased level of intervention to combat the rising number of shelters and child maltreatment. While the population of the county is relatively low (71,958 individuals compared with Alachua County's 284,030), progressively escalating maltreatment counts in Columbia County began to rival that of Alachua County. An initial Resource Center Advisory Council was formed (of community partners, stakeholders, and leaders) to advise in the selection of a site in Lake City, FL and the development of resources and supports to provide to targeted neighborhoods. As part of an effort to develop a more comprehensive understanding of the need for the identified target population (as part of implementation plan efforts), a *Community Strengths and Needs Assessment* tool was developed and distributed (in paper form and electronically) by PSF staff and community partners to parents/caregivers in households within the targeted service area and at select community events (including, for example, non-NSFRC sponsored events at schools and local high school football games). These efforts and continued engagement with community members led to the identification of a hierarchy of needs that the NSFRC would attempt to respond to in collaboration with a variety of community partners.

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

Methods

This report summarizes findings from a descriptive analysis of secondary data obtained from the NSFRC in 2022. Analysis was conducted on de-identified data and in accordance with an approved IRB protocol¹ that was also approved by the Florida Department of Children and Families, Office of Child Welfare.

Community Module Data System

When patrons visit the NSFRC, they are asked to sign in using a Getting to Know You (GTKY) form if it's their first visit. All information collected is entered into the Community Module Data System. The GTKY form mimics the electronic system and collects the same patron information. Personal/identifying information collected (by the FRC) includes Name, Date of Birth (DOB), Age, Gender, Race, Veteran Status, Contact Information (including physical address and email), and Neighborhood of Residence. Starting March 16th, 2021, all FRCs started collecting information from patrons to self-identify if they are caregivers to children under the age of 18. Once the patron is identified as a repeat visitor, they are asked to sign in using the Resource Center Patrons Sign-in sheet and only asked to fill in a GTKY sheet to provide updates they have, if applicable. Additional information is collected regarding 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 NSFRC personnel can properly assist. When patrons visit the NSFRC 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 NSFRC to track and monitor service utilization trends and expressed needs within the neighborhoods and households served. It is these service trends (secondary data) that are the focus of this report. Following a series of data cleaning efforts, some modifications to the Community Module Data System took place between March and August 2021. These efforts occurred along with additional staff trainings related to intake/sign-in procedures and protocols that would allow for a more effective itemization of service requests and utilization trends, including an unduplicated count of patrons. Data elements/variables that remained consistent (pre-2021 to present) include: Visit ID Number, Visit Date, Resource Center Identifier, Age of Patron Requesting Service/Support, Service Category, Protective Factor Category for Requested Service, if Service/Support was Event-based, and Client ID Number². Gender and Race categories within the Community Module were expanded on March 22, 2021. Gender choice prior to March 22, 2021, included: Female / Male / Unknown. Gender choice since March 22, 2021, includes Female / Male / Transgender / Gender Non-Conforming/ Non-binary / Prefer Not to Answer. Race options prior to March 22, 2021, included: Black/African American, White, Multiracial, Hispanic, Asian, Other, Unknown. Race options since March 22, 2021, currently include: American Indian or Alaska Native / Asian/ Black or African American - non-Hispanic origin / Hispanic, Latino, or Spanish origin / Multiracial / Other / Prefer not to answer / White – non-Hispanic

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

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

origin. Ethnicity choices added March 22, 2021, include: Cuban/Mexican, Mexican Am., Chicano/ Other Hispanic, Latino, or Spanish/ Prefer not to answer/ Puerto Rican or Unknown (available when Hispanic, Latino, or Spanish origin is selected), and Asian Indian/ Chinese/ Filipino/ Guamanian or Chamorro/ Japanese/ Korean/ Native Hawaiian/ Other Asian/ Other Pacific Islander/ Prefer not to answer/ Samoan/ Unknown, or Vietnamese (available when Asian is selected).

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

Classification of Services and Supports by the Protective Factors Framework

PSF’s network of FRCs (including 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. Protective factors, as constructs, are “...conditions or attributes...” of individuals, families, communities, or the larger society that lessen the risk of maltreatment and promote the healthy development and well-being of children and families (Capacity Building Center for States, 2020b; Child Welfare Information Gateway, 2020). Strengthening and supporting families through services and activities that promote protective factors, it is held, mitigates the impact of and/or decreases the exposure to risk factors correlated with (and subsequently preventing) the likelihood of maltreatment (Administration for Children and Families, 2018; Development Services Group, Inc., & Child Welfare Information Gateway, 2015).

Although there are a number of different protective factors approaches (Child Welfare Information Gateway, 2020; Centers for Disease Control and Prevention, 2020; Center for the Study of Social Policy, 2015a; FRIENDS National Resource Center for Community Based Child Abuse Prevention, 2011; Sege et al., 2017)³ historically there were two Protective Factors models/frameworks considered as an organizing principle for services at PSF Family Resource Centers (i.e., services would be implemented to

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

address select protective factors). These included those developed by the Center for the Study of Social Policy (CSSP, 2015, n.d.-c) and the FRIENDS National Center for Community-Based Child Abuse Prevention (2018, 2011). The Center for the Study of Social Policy (CSSP) focuses upon parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need, and social and emotional competence of children (2015, n.d.-c). The FRIENDS National Center for Community-Based Child Abuse Prevention identified (initially) parallel protective factors of family functioning/resiliency, social emotional support, child development/knowledge of parenting, concrete support, with Nurturing and Attachment. An itemization of the conceptual definitions, similarities, and differences in these two models is denoted in Table 1.

Table 1: CSSP and FRIENDS Protective Factors Frameworks/Models

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

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

Sources:

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

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

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

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

PSF adopted the following protective factors as a guide for a service framework for the existing FRCs between 2016 and 2020: *concrete supports* (CSSP and FRIENDS), *knowledge of parenting and child development* (CSSP and FRIENDS), *Nurturing and Attachment* (FRIENDS), *social connections* (CSSP), and *family functioning/resiliency* (FRIENDS). The *Nurturing and Attachment* protective factor is considered a unique construct associated with the FRIENDS Protective Factors model (as measured by the Protective Factors Survey). Although the *social connections* and *family functioning/resiliency* protective factors (see above table) are specific to CSSP and FRIENDS classifications (respectively), each organization has parallel/similar classifications/constructs (*social emotional support* and *parental resilience*, respectively). Beginning in 2021, PSF aligned its conceptualization of services solely with the CSSP protective factors framework, namely, concrete support in times of need, knowledge of parenting and child development, social connections, parental resilience, and social and emotional competence of children⁵.

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

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

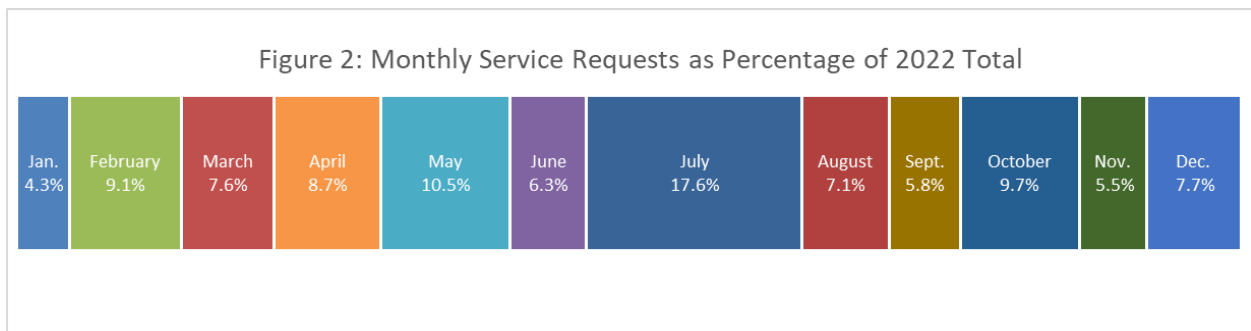
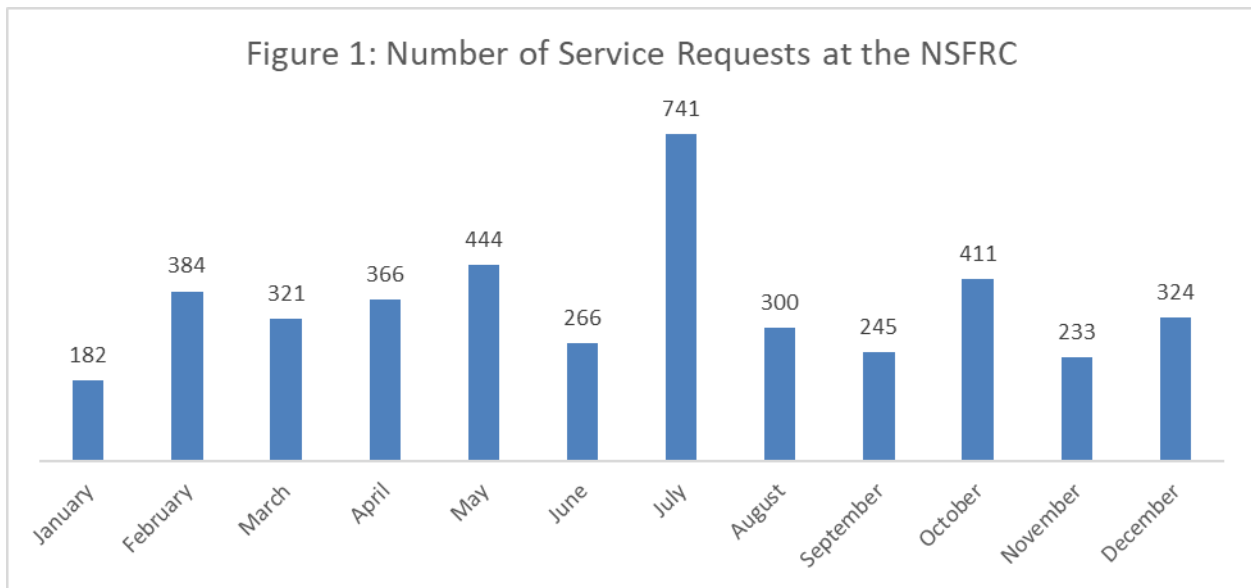
⁵ Please note that PSF FRCs typically refer to this protective factor as social and emotional competence of youth, without any change to the defining features of the construct as conceptualized by CSSP. The term "youth" has been substituted, it was thought, to reflect a broader age range of children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

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

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

Service Requests as Unit of Analysis

The first set of analyses focused on individual service requests from all patrons. At the NSFRC, there were a total of 4,217 service requests made, 3,826 individual visits by patrons in 2022. There was some variation in the number of service requests for each month, ranging from a low of 182 in January (or 4.3% of total 2022 requests) to a high of 741 (or 17.6% of total 2022 requests) in July (see Figures 1 and 2). On July 31, 2022, NSFRC partnered with a long-standing community school supply/backpack giveaway event, which brought in over 487 visitors (65.7% of all visits for July). This free, family-friendly, back to school event included the distribution of school supplies and backpacks, free haircuts from barbers, and music and food. Select other services and supports for July included a summer program for children and youth (n=58), community walks (n=38), and food events/distribution (n=27).



Since NSFRC began operations in March 2021; 2022 marked the first year services and supports were offered in every month. During 2022, concrete supports in times of need was the most often requested service and supports (n= 1,826 or 43.3% of all requests, see Figures 3 and 4). This was followed by services and supports focused on promoting social connections (n=1,325 or 31.4% of all requests), and the social and emotional competence of children (n=1,010 or 23.95% of all requests). Only 1.28% and 0.05% of service requests focused on parental resilience and knowledge of parenting and child development protective factors (respectively). Historically, concrete support in times of need have been the most requested service type at all of PSF’s FRCs, including NSFRC. This trend is to be expected as individuals must meet their own basic needs and those of their children prior to being able to effectively identify and meet other needs.

During the NSFRC's Strengthening Families Self-Assessment (SFSA) process in fall 2022, concrete support in times of need were reported to be in high demand at the NSFRC. According to Perry et al.'s (2022a), "With limited low-income housing options, no homeless shelters, and up to a two-year waitlist for low-income housing, housing circumstances are a major source of stress for families in the area served by NSFRC." Additionally, they found that "food insecurity has reportedly been, and continues to be, an issue of concern for many families within the neighborhoods served by NSFRC." Though programming is increasing for a few protective factor categories, Perry et al.'s report (2022b) explained, "NSFRC is in its early stage of operation and has initially targeted most resources toward the more immediate needs of families associated with concrete support in times of need and social connections."

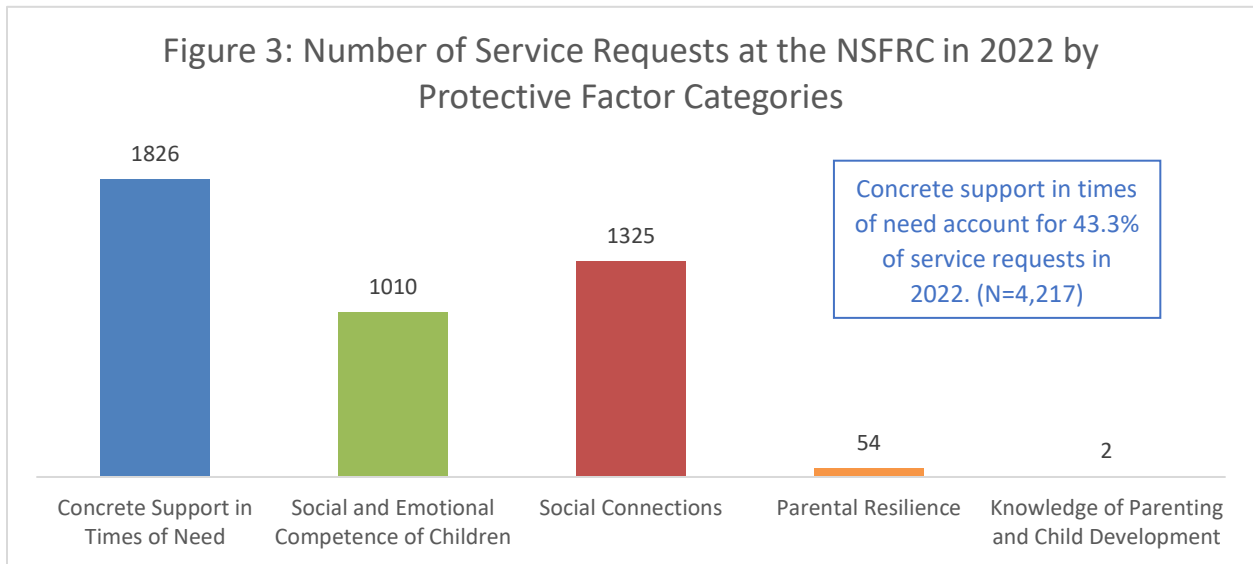
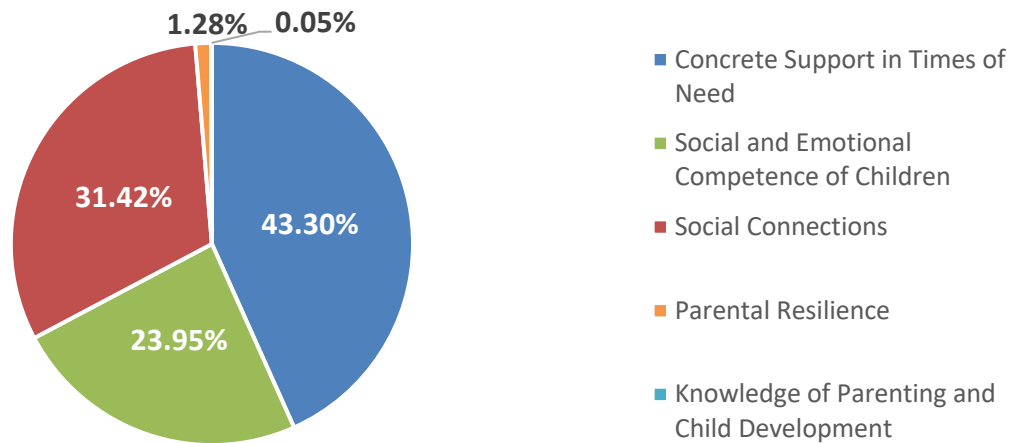


Figure 4: Percent of 2022 Service Requests by Protective Factor



Services and supports can be provided to patrons individually or as part of a specific community event. Table 2 highlights the distribution method of services and supports according to whether they were received as part of an event or provided individually to patrons. Findings suggest a fairly equal distribution of concrete support in times of need individually (n=928 or 50.8%) and as part of an event (n=898, 49.2%). However, an overwhelming majority of specific services and supports linked to promoting the social and emotional competence of children (n=949 or 94%) and social connections (1,324 or 99.9%) were provided as part of specific events. All parental resilience supports (n=54) were provided individually to patrons.

There were only two reported services/supports linked to promoting knowledge of parenting and child development in 2022; these included the provision of information and referrals related to youth education supports/initiatives within the community. The NSFRC did not provide any direct services and supports related to this protective factor in 2022. Extensive discussion was held as part of the Strengthening Self-Assessment team on the perceived need and barriers to providing these services. 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." Additionally, it was thought that using terms like parenting classes may create an adverse reaction in parents. Parent Cafés provide a safe, nonjudgmental opportunity for parents and caregivers to build their protective factors while engaging in conversations about what it means to keep their children safe and families strong, while also building parent leadership (CSSP, 2015).

| Table 2: Method of Distribution (Individual or Event-based) of Services and Supports to Patrons at NorthStar FRC in 2022 Across Protective Factor Categories | | | | |
|---|--|---|------|-------|
| 2022 | | Was Service/Support Received Part of Event? | | Total |
| | | No | Yes | |
| Protective Factor | Concrete Support in Times of Need | 928 | 898 | 1826 |
| | Parental Resilience | 54 | 0 | 54 |
| | Knowledge of Parenting and Child Development | 2 | 0 | 2 |
| | Social and Emotional Competence of Children | 61 | 949 | 1010 |
| | Social Connections | 1 | 1324 | 1325 |
| Total | | 1046 | 3171 | 4217 |

Table 3 and 4 provide additional details regarding trends associated with the days of the week select services (whether event-based or not and across protective factor categories) are requested by and/or offered to patrons in 2022. Services and supports are offered throughout the week (including select weekends), with the majority (throughout the year) being event-based (75.2% or 3,171 of 4,217). Individual-based services and supports are primarily provided during weekdays during regular scheduled hours of operation and are more frequent on Mondays through Thursdays, although even-based services and supports exceed individual-based services each day (when yearly totals are considered).

Services and supports were provided on select weekends throughout 2022 and were primarily event-based. The 487 patrons served on Sundays is represented by one event, the Back to School Bash, a school supply giveaway (a concrete support in times of need service) event on July 31, 2022; an annual event well attended by children, youth, and their parents/caregivers. As highlighted in Table 3, 596 patrons received services and supports on Saturdays via events. These events took place on eight separate Saturdays between February and December 2022. Six of the events were focused on promoting social connections. These included two events in February associated with the preparation (on February 5; other planning and organizing activities took place on other days of the week) and implementation (on February 26) of the **Remembering Richardson High School Historical Marker Dedication and Ceremony**. In total, eleven planning sessions allowed community ambassadors and stakeholders to align in a common goal of building social connections while planning for this event. This accomplishment brought a meaningful event to the community. Two additional days were set aside to collect video footage of Richardson High School students recalling their fond memories of the school. This footage was shared at the event, along with other memorabilia, photos, a recitation of the school anthem, the unveiling of the historic marker, and proclamations from the City of Lake City, Columbia County, Columbia County School Board, US Representative Al Lawson, and FL House of Representative Charles Brannen. The event was a great success with 125 participants reminiscing about their shared history of family, friends, teachers, and principals (Chase, 2022). The group of event planners came together for a follow-up meeting to remark on what went well and what could have gone better, celebrating each other for their shared efforts. Other social connection events included an outreach/tabling at Columbia County Housing Authority community event (on April 23) and the NorthStar Family Fun Day (on May 28), which included cornhole, volleyball, and kickball, along with a bounce house, shaved ice, and more. This was an opportunity for families and children to get to know

each other and build healthy relationships. Two additional community events included the *Buy Nothing Garage Sale* (August 6; similar to the clothing giveaway, it included several household items, and everything was free to the community), and the Toys for Tots Giveaway (December 17). NSFRC hosted a Toys for Tots Giveaway where the Richardson Gym was converted into a shopping space, and patrons were given three Christmas bucks (symbolic money) per child to spend, one per toy.

The two Saturday events that focused on concrete support in times of need, included the Saturday Clothing Giveaway on June 25 (note, the NSFRC also hosts a Clothing Closet that can be regularly accessed on weekdays during the year) and a Community Health and Wellness Fair (October 22) where patrons and their families were provided information and invited to participate in a variety of health and wellness activities. Individual services and supports were isolated occurrences for select patrons, took place on the same days of events, and typically involved the distribution of flyers, calendars, and information, along planned tutoring of a child concurrent with a planned event.

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

| Service Request Type | Day of the Week | | | | | | | Total |
|----------------------|-----------------|---------|-----------|----------|--------|----------|--------|-------|
| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | |
| Individual | 245 | 210 | 244 | 191 | 144 | 12 | 0 | 1046 |
| Event | 380 | 659 | 415 | 453 | 181 | 596 | 487 | 3171 |
| Total | 625 | 869 | 659 | 644 | 325 | 608 | 487 | 4217 |

Table 4 findings suggest that, for the most part, services and support are requested and offered each weekday across all protective factors, with the exception of knowledge of parenting and child development supports (not a current focus at NSFRC). When weekdays are considered, concrete support in times of need are more frequent (n=1,221) than services and supports linked to protective factors associated with promoting the social and emotional competence of children (n=1,009), social connections (n=836), and parental resilience (n=54).

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

| Protective Factor Category | Day of the Week | | | | | | | Total |
|--|-----------------|------------|------------|------------|------------|------------|------------|-------------|
| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | |
| Concrete Support in Times of Need | 220 | 454 | 243 | 174 | 130 | 118 | 487 | 1826 |
| Parental Resilience | 13 | 11 | 14 | 7 | 9 | 0 | 0 | 54 |
| Knowledge of Parenting and Child Development | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 2 |
| Social and Emotional Competence of Children | 207 | 219 | 256 | 278 | 49 | 1 | 0 | 1010 |
| Social Connections | 183 | 185 | 146 | 185 | 137 | 489 | 0 | 1325 |
| Total | 625 | 869 | 659 | 644 | 325 | 608 | 487 | 4217 |

There were a variety of specific services and supports linked to each protective factor. For example, in 2022, there were a total of 26 services and supports provided (that were documented within the Community Module Data System) that were linked to the **concrete support in times of need** protective factors. These included (alphabetically listed): Broadband/Internet Connection, Cash Assistance, Clothing, Clothing Closet – EVENT, Community Health – EVENT, Computer Use, Family Planning, Fax, Flyer/Calendar, Food, Food – EVENT, Food Stamps, Housing Assistance, Infant Care Products, Job Board, Medicaid, Notary Services, Phone Use, Printer / Copier, Rent Assistance, Replacement Identification, School Supplies, School Supply Giveaway, Social Security Benefits, Utility Assistance, and Youth Scholarship. This is a plethora of services and supports linked to the concrete support in times of need protective factor. Within Table 5, the highest ranked concrete support in times of need and services requested and provided are summarized, including their distribution method (individual or event-based). The highest number of concrete supports in times of need received were associated with the School Supply Giveaway event and isolated distribution of school supplies. Food assistance was provided (individually and as part of a weekly Panera Bread pastry giveaway event, along with assistance securing food stamps) to 353 patrons. To address the food insecurity highlighted by the SFSA team, an action item was developed by the team that NSFRC would “continue efforts at securing an on-site food pantry at NSFRC and explore the feasibility of facilitating regular food distribution to families while ensuring

there is support (community, food, volunteers, etc.) to implement food distribution in an efficient manner” (Perry et al., 2022a). The next highest number of services were linked to the use of computers, printers, and copiers (n=341), clothing assistance (n=121), housing, rent, and utility assistance (n=115), fax use (n=78) and the distribution of information flyers and NSFRC calendars to patrons (n=76).

The following represents a list of specific services and supports offered (on-site or by collaborative partners) in response to requests from patrons during 2022 that were linked to the **parental resilience** protective factor: CRC Visit, Health Info, Job Searching, Legal Assistance, Resume / Job Application Assistance, Safety Information, and Tutoring for Adult. As denoted in Table 4, there were 54 documented service and support requests affiliated with this protective factor. Of these, 25 (46.3%) requests were for individual-based job and employment assistance (this included services classified as “Job Searching” and “Resume / Job Application Assistance”). These requests were followed by CRC visits (n=17), and the provision of health/medical information (N=6), all of which were provided individually.

As denoted earlier, the NSFRC did not provide any direct services and supports that were classified as associated with the **knowledge of parenting and child development** protective factor. The two reported services/supports linked to this protective factor involved isolated individual referrals for grandparents regarding youth education supports within the community.

The following service requests associated with the **social and emotional competence of children** protective factor: Counseling for Child, Family Counseling, Homework Help, Summer Program – EVENT, Teen Activity and Tutoring for Child. Among the 1,010 service/support requests linked to this protective factor, 78.1% were associated with the Homework Help program. Caregivers of youth in 1st to 8th grade can sign up for this program and their child can receive one-on-one homework support and a snack Monday through Thursday during the school year. An additional 97 services and supports were classified as teen activities, followed by 63 participants in a summer program event, 51 instances of children and youth receiving individual tutoring, with an additional seven families and three children referred/connected to counseling/mental health services. The teen activities were all a part of Let’s Talk Events which were put on by the NSFRC Youth Leadership Council (YLC) in collaboration with The Proximity People who provide high-touch training and coaching, consulting, and perception services for organizations. The YLC at the NSFRC was created to provide direct support and guidance to program participants, with the goal of further developing teens and youth in the areas of diversity and inclusion. Through the “Community Collaborations to Strengthen and Preserve Families Grant”, a time-limited grant funded position (Nov 2021-September 2022) known as the “Community Leadership/Equity Coordinator” was created at the NSFRC to accomplish this. The summer program spans several weeks over the summer holiday and allows for enrichment activities such as reading books and using laptops during this time.

Table 5 details the three service activities requested and delivered in 2022 associated with the **social connections** protective factor. These include the Community Walk (n=634 participants; represents duplicate patron count as walks are frequent throughout the year), community events (n=538 participants; descriptions provided above), community meetings (n=152) and an isolated (n=1) activity for families. The Community Walk is a daily walk-through a nearby neighborhood that is open to all patrons. Community meetings at the NSFRC have included preparation and follow up planning meetings for the Remembering Richardson Highschool event, meetings with the Columbia Childrens Partnership Council, the Resource Center Advisory Council and Richardson Roundup planning. They have also

included the SFSA orientation and the first meeting, a social based “Let’s Talk” Event, and planning for a Walk a Mile in their shoes Domestic Violence event and the Columbia/Hamilton Baby Shower event.

| Protective Factor and Services | | Service Receipt Method | | Total |
|--|---------------------------------|------------------------|-------|-------|
| | | Individual | Event | |
| Concrete Support in Times of Need | School Supplies | 7 | 487 | 494 |
| | Food Assistance | 63 | 290 | 353 |
| | Computer/Printer/Copier Use | 341 | 0 | 341 |
| | Clothing Assistance | 62 | 59 | 121 |
| | Housing/Rent/Utility Assistance | 115 | 0 | 115 |
| | Fax Use | 78 | 0 | 78 |
| | Flyer/Calendar | 76 | 0 | 76 |
| Parental Resilience | Job/Employment Assistance | 25 | 0 | 25 |
| | CRC Visit | 17 | 0 | 17 |
| | Health/Medical Information | 6 | 0 | 6 |
| Knowledge of Parenting and Child Development | Youth Education – Info | 2 | 0 | 2 |
| Social and Emotional Competence of Children | Homework Help | 0 | 789 | 789 |
| | Teen Activity | 0 | 97 | 97 |
| | Summer Program – EVENT | 0 | 63 | 63 |
| | Tutoring for Child | 51 | 0 | 51 |
| | Family Counseling | 7 | 0 | 7 |
| | Counseling for Child | 3 | 0 | 3 |
| Social Connections | Community Walk | 0 | 634 | 634 |
| | Community Events | 0 | 538 | 538 |
| | Community Meeting | 0 | 152 | 152 |
| | Activities for Families | 1 | 0 | 1 |

Service Delivery and Providers

As denoted earlier, revisions to the Community Module Data System were made in 2021 to aid (in part) with a more effective and detailed itemization of service delivery and provider indicators associated with each service request; providing staff document these data on an ongoing and reliable manner. Of the 4,217 service requests in 2022, information related to whether requested services and supports were delivered exists for 956 requests (or 22.7% of 2022 service requests) of which 941 were confirmations of service delivery. Events-based requests (N=3171) are not recorded in the module due to software limitations. All event-based requests are delivered because it is the staff protocol to only enter a patron on an event log if they are at the event and therefore receive the service of that event. There were only 15 indications of non-service delivery for any request, but data was missing (on this indicator) for 8.8% (n=92) non-event service requests. Staff attest that most service requests are addressed. The delivery rate among valid data (excluding delivery status data missing for 92 individual requests) is 97.8% (n=4,125 of 4,217 service requests).

Individual Patrons as Unit of Analysis

As denoted earlier, each individual patron is provided a unique “ClientID” number within the Community Module Data System upon making their first service/support request. Patrons are asked to sign in upon subsequent visits; this is a voluntary activity that assists the NSFRC in identifying service trends and associated needs of individual patrons, select households, and the community at large. However, services and supports are provided to patrons regardless of their willingness to identify themselves during the sign-in process when making each service request. Additionally, patrons are not given a ClientID if their account is not considered “complete”, including First Name, Last Name, Date of Birth, Gender, Race & Ethnicity, and Zip Code. Subsequently, there may not be a ClientID number affiliated with every service request documented within the Community Module Data System. For example, in 2022, among the 4,217 service requests, “ClientID” numbers are not affiliated with 946 of these requests⁷. Regardless, “ClientID” numbers exist for 77.6% of all service requests for 2022 at the NSFRC. These data allow for the analyses of service trends for a subgroup of a non-duplicated count of patrons. The remaining findings relate to a non-duplicated count of patrons with ClientID’s linked to 3,271 service requests. In sum, 3,271 service requests were made by 849 individual patrons with ClientID’s (non-duplicated count); these patrons represent approximately 77.6% of all service requests received by NSFRC in 2022. When the estimate of patrons affiliated with the service requests without ClientIDs (n=246, see footnote 7 below for calculation estimate) is added to confirmed patrons, the estimated number of non-duplicate patrons served in 2022 is 1,095. Findings presented for the remainder of the report apply only to the confirmed number of non-duplicate count of patrons (n=849).

⁷ It is unknown if the patrons affiliated with these service requests are among those identified with other service requests and, subsequently how many non-duplicated counts of patrons are represented by these 946 requests. Should this number of patrons parallel the non-duplicated rate affiliated with data with known Client IDs (where the ratio of known non-duplicated count of patrons to their service requests is $849/3,271$ or $.26$), then it might be conjectured that an additional 246 patrons are possibly represented by these 946 service requests (where $946 \times .26 = 245.96$). This is a potential notable amount, findings in this section of the report are qualified by this fact.

| Annual Service Requests | Number of Patrons | Percent of Patrons |
|-------------------------|-------------------|--------------------|
| 1 | 544 | 64.1 |
| 2 | 114 | 13.4 |
| 3 | 46 | 5.4 |
| 4 | 26 | 3.1 |
| 5 | 24 | 2.8 |
| 6 to 10 | 43 | 5.2 |
| 11 to 15 | 13 | 1.6 |
| 16 to 20 | 13 | 1.6 |
| 21 to 30 | 11 | 1.3 |
| 31 to 50 | 6 | 0.6 |
| 51 to 100 | 6 | 0.6 |
| 100 + | 3 | 0.3 |
| Total | 849 | 100 |

The number of service requests across this subgroup of patrons ranged from a low of 1 to a high of 205 during the year with an average of 3.85 service requests per patron. In some cases, frequent services by patrons were due to participation with recurring events such as the daily community walk. In total, 64.1% (n=544) patrons made 1 service request during 2022, with an additional 18.8% (n=160) making 2 or 3 requests (see Table 6) with 94.0% of all patrons making between 1 and 10 service and support requests in 2022.

A summary of the average and range of service requests across protective factor categories for the total number of patrons (n=849) is denoted in Table 7. Although patrons on average made 3.85 service requests in 2022, this average is influenced by the need and utilization of concrete support in times of need and services offered at NSFRC. On average, patrons made 1.62 requests for **concrete support in times of need** services in 2022 (see Table 7) with 64.9% of all patrons making at least one request for concrete supports and services (see Table 8). In total, 43.4% (n= 368) of all patrons made one request for concrete supports and services, 15.9% (n=136) made between 2 and 5 requests, 2.3% (n=20) made between 6 and 10 requests, and 2.8% (n=47) made more than 10 requests (between 11 and 45) in 2022.

On average, patrons made 0.92 service requests in 2022 for services related to promotion of the **social and emotional competence of children** (see Table 7), 88.0% of all patrons did not make any request for services for this protective factor (see Table 8). It important to note that the social and emotional competence of children services are intended for children and youth; however, caregivers can request these services for their children. There were 102 patrons that received these services in 2022, although there were 309 unduplicated patrons (36.7% of all) that were under the age of 18.

The low average annual rates per patron for services linked to the **parental resilience** (0.06 requests) and the **knowledge of parenting and child development** (0.002 requests) protective factors in 2022 are impacted by the percentage of patrons that did not make any requests for these services (95.5% and 99.8%, respectively) (see Table 8). There were only 41 and 2 patrons that requested services associated with parental resilience and the knowledge of parenting and child development (respectively). There were 327 (38.5% of all) patrons that sought services associated with promoting **social connections** of which 274 sought these services once in 2022 (see Table 8). The average number of social connection

services and supports across all patrons (Average=1.19 requests, SD=9.59, see Table 7) is skewed given select outliers. For example, four patrons are documented as having between 70 and 185 social connection service requests. Each of these were patrons who participated in community walks throughout the year. The community walks are weekday events where patrons meet at the center when it opens and take a one to two-mile walk as a group through nearby neighborhoods. This provides an excellent opportunity for staff and patrons to share life's joys and struggles while boosting their health in a supportive environment. Regular community walkers are often among the first to provide assistance for events.

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

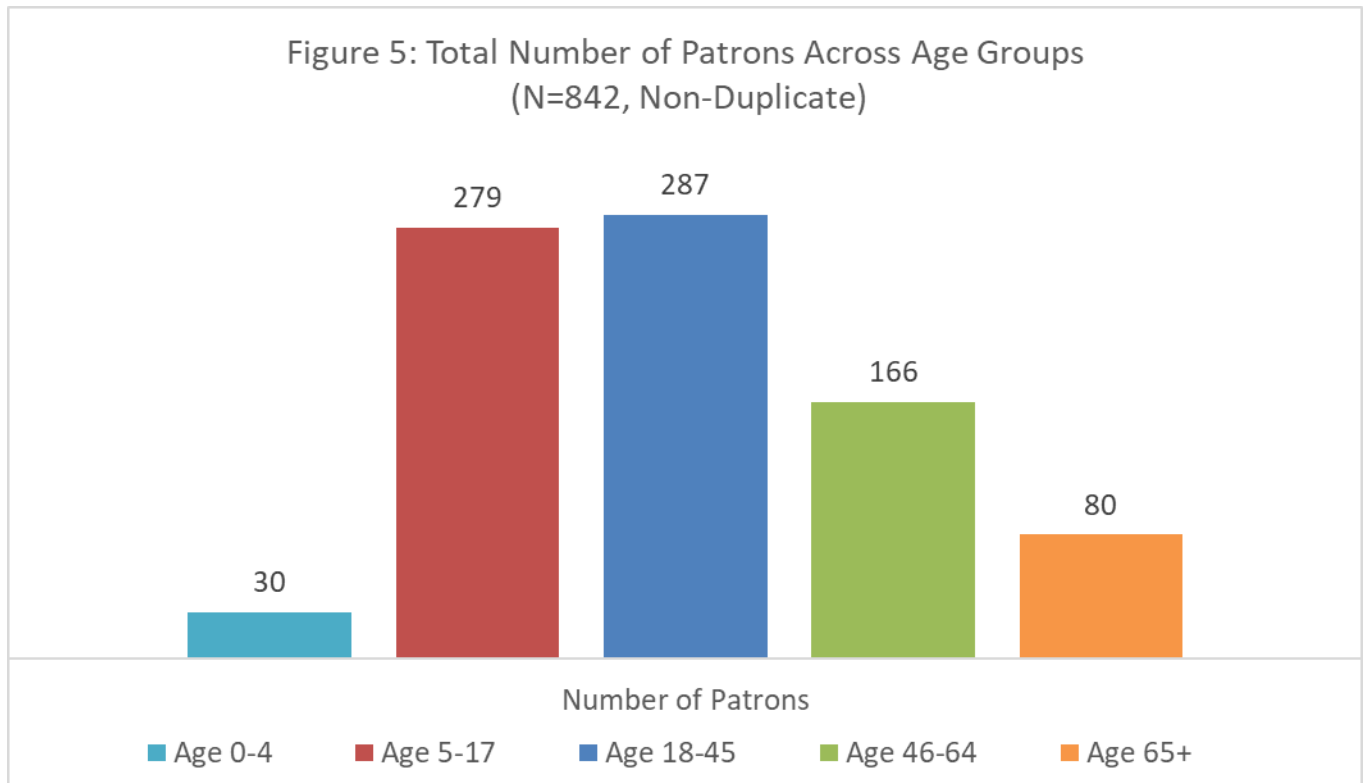
| Service Category | Average | Grouped Median | Range | Std. Deviation |
|--|---------|----------------|-------|----------------|
| Total Service Requests | 3.850 | 1.46 | 1-205 | 12.54 |
| Concrete Support in Times of Need | 1.620 | 0.83 | 0-45 | 3.93 |
| Parental Resilience | 0.060 | 0.05 | 0-3 | 0.28 |
| Knowledge of Parenting and Child Development | 0.002 | 0.00 | 0-1 | 0.05 |
| Social and Emotional Competence of Children | 0.920 | 0.13 | 0-64 | 5.05 |
| Social Connections | 1.190 | 0.41 | 0-185 | 9.59 |

Table 8: Number and Percentage of All Patrons (N=849) Making Select Service Requests in 2022 Across Protective Factor Categories

| Annual Service Requests | All Protective Factors | Concrete Support in Times of Need | Parental Resilience | Knowledge of Parenting and Child Development | Social and Emotional Competence of Children | Social Connections |
|-------------------------|------------------------|-----------------------------------|---------------------|--|---|--------------------|
| 0 | 0 (0.0%) | 298 (35.1%) | 808 (95.5%) | 847 (99.8%) | 747 (88.0%) | 522 (61.5%) |
| 1 | 544 (64.1%) | 368 (43.4%) | 34 (4.0%) | 2 (0.2%) | 48 (5.7%) | 274 (32.3%) |
| 2 | 114 (13.4%) | 64 (7.5%) | 6 (0.7%) | 0 (0.0%) | 8 (0.9%) | 28 (3.3%) |
| 3 | 46 (5.4%) | 46 (5.4%) | 1 (0.1%) | 0 (0.0%) | 7 (0.8%) | 6 (0.7%) |
| 4 | 26 (3.1%) | 19 (2.2%) | 0 (0.0%) | 0 (0.0%) | 5 (0.6%) | 4 (0.4%) |
| 5 | 24 (2.8%) | 7 (0.8%) | 0 (0.0%) | 0 (0.0%) | 5 (0.6%) | 4 (0.4%) |
| 6 to 10 | 43 (5.2%) | 20 (2.3%) | 0 (0.0%) | 0 (0.0%) | 11 (1.4%) | 4 (0.4%) |
| 11 to 15 | 13 (1.6%) | 10 (1.1%) | 0 (0.0%) | 0 (0.0%) | 1 (0.1%) | 2 (0.2%) |
| 16 to 20 | 13 (1.6%) | 8 (0.8%) | 0 (0.0%) | 0 (0.0%) | 4 (0.4%) | 0 (0.0%) |
| 21 to 30 | 11 (1.3%) | 5 (0.5%) | 0 (0.0%) | 0 (0.0%) | 6 (0.6%) | 0 (0.0%) |
| 31 to 50 | 6 (0.6%) | 4 (0.4%) | 0 (0.0%) | 0 (0.0%) | 3 (0.3%) | 1 (0.2%) |
| 51 to 100 | 6 (0.6%) | 0 (0.0%) | 0 (0.0%) | 0 (0.0%) | 4 (0.4%) | 1 (0.1%) |
| 100 + | 3 (0.3%) | 0 (0.0%) | 0 (0.0%) | 0 (0.0%) | 0 (0.0%) | 4 (0.4%) |

Patron Demographics

When demographic characteristics are observed (see Figure 5), the age group most represented (the modal group) are those aged 18 through 45 (n=287 or 34.1%)⁸. This is closely followed by those aged 5 through 17 (n=279 or 33.1%). In contrast with other PSF Resource Centers, the NSFRC has a larger proportion of patrons that are children and youth. Among the 279 children and youth between 5 and 17 years old, 273 (97.8%) received services and supports through events, including (but not limited to) the school supply giveaway (n=162), planned community events (n=69), afterschool homework help (n=36), and summer camp programs (n=19). The next age group most represented are adults between 46 and 64 (n=166, 19.7%), followed by seniors 65 and older (n=80, 9.5%), and children 4 and under (n=30, 3.6%). Figure 5 does not include 7 patron who did not identify their age (i.e., missing data).



Supplemental analyses explored the number of unique/individual visits associated with patrons within each age group and the likelihood of these patrons returning to the NSFRC for services and supports after a first visit during 2022. Findings in Table 9 identify patrons that were 65 and over to have the highest average number of unique/individual visits (6.63) to the NSFRC, followed by patrons aged 46 through 64 (average = 5.72), 5-17 (average = 3.43), 18-45 (average = 2.49, and those between 0-4 years of age (average = 1.37). The high average number of return visits of those 65 and over, as well as those 46-64 is skewed by select outliers of patrons with high visit counts, hence the large standard deviations (SD = 23.15 and 19.62 respectively) in the distribution of average number of revisits/returns to the NSFRC. Many of the daily walkers at NorthStar FRC are retired, placing them at the top of frequent

⁸ Please note that since the age of a patron may change over the course of the year and time frame for which they requested services, the age used for this analysis was the patrons' age at time of the first service request in 2022.

visitors to the center. When the percentage of patrons that make at least one return visit to the NSFRC is examined in 2022 (see Table 9), the highest percentage of patrons revisiting the NSFRC are among those 65 and older (50.0%), followed by those aged 46-64 (44.6%), those aged 18-45 (37.3%), those 5-17 (26.2%), and those 0-4 years of age (23.3%). In total, 35.7 of all patrons (identified non-duplicated count) returned at least once to the NSFRC for services and supports in 2022. A series of analyses revealed statistically significant differences in the average number of unique/individual visits and the distribution of number/percentage of those patrons likely to return to NSFRC in 2022⁹.

Table 9: Average Number of Unique Visits and Percentage of Patrons Returning to NSFRC Across Age Groups in 2022 (N=842)

| Age Group | N | Mean / Average | Std. Deviation | Std. Error | Minimum Visits | Maximum Visits | Number (%) Returning |
|-----------|-----|----------------|----------------|------------|----------------|----------------|----------------------|
| Age 0-4 | 30 | 1.37 | 0.81 | 0.15 | 1 | 4 | 7 (23.3%) |
| Age 5-17 | 279 | 3.43 | 7.90 | 0.47 | 1 | 65 | 73 (26.2%) |
| Age 18-45 | 287 | 2.49 | 4.36 | 0.26 | 1 | 47 | 107 (37.3%) |
| Age 46-64 | 166 | 5.72 | 19.62 | 1.52 | 1 | 176 | 74 (44.6%) |
| Age 65+ | 80 | 6.63 | 23.15 | 2.59 | 1 | 205 | 40 (50.0%) |
| Total | 842 | 3.79 | 12.46 | 0.43 | 1 | 205 | 301 (35.7%) |

Given the number of age groups (5) and variation in average visits (and their standard error) and likelihood (percentage) to return the NSFRC in 2022, differences between each age group were more closely examined (see Table 10)¹⁰. Findings in Table 10 suggest that the average number of revisits/returns to the NSFRC by those aged 5 through 17 (Mean = 3.43) are significantly lower than the average number of visits by those aged 46 to 64 (Mean =5.72, Tests Statistic= -73.4, p=.003) and those 65 and over (Mean=6.63, Tests Statistic= -107.08, p<.001). In addition, the average number of visits by those 0-4 years of age (Mean=1.37) was significantly lower than the average number of visits observed for those 65 and over (Mean=6.63, Tests Statistic= -137.4, p=.02 (see Table 10; using adjusted significance with the Bonferroni correction).¹¹

⁹ Initial ANOVA models (fixed and random effects) were run examining the average number of unique/individual visits to the NSFRC across age groups. Although the result was statistically significant (F=3.19, df=4, p=.013), the sample was unbalanced with a violation of the homogeneity assumption (Levene Statistic=7.90, p<.001). Given such, a parallel non-parametric test was done (Independent-Samples Kruskal-Wallis Test) that proved significant (Test Statistic=26.10, df=4, p<.001, asymptotic 2-sided test), suggesting the observed distribution in the average number of unique visits across age groups is significantly different.

¹⁰ The Kruskal-Wallis Test with Pairwise Comparisons was computed using asymptotic significances (2-sided tests) and significance levels of .05 for hypotheses testing. Each row in Table 8 summarizes a test of the null hypothesis that the Sample 1 and Sample 2 distributions are the same. Adjusted significant tests should be used where the adjusted p<.05 would require a rejection of the null hypothesis.

¹¹ **Understanding Statistical Significance:** In evaluation and research studies, statistical analyses are frequently done to objectively understand the distribution and relationship among and between different variables of interest and/or populations and/or subgroups. Different statistic tests/models exist for different hypotheses and for different types of variables and given assumptions and knowledge about how the data were collected and how representative the data is of specific populations or subgroups. Most statistical tests are structured to help determine whether a null hypothesis should be accepted or rejected. A null hypothesis is an assertion that there are no significant differences, effects, and/or relationships between select variables and/or populations under study (using available/observed data). A p-value (or probability-value associated with each statistical test) aids in decisions about whether to accept or reject a null hypothesis and is, thus, a measure of statistical significance. The

Table 10: Pairwise Comparisons of Age Groups in Terms of Number of Unique Visits/Revisits to NSFRC in 2022 (N=842)

| Sample 1 Sample 2 | Test Statistic | Std. Error | Std. Test Statistic | Sig. | Adj. Sig.* |
|-----------------------|----------------|------------|---------------------|-------|------------|
| Age 0-4 Age 5-17 | -30.32 | 39.98 | -0.76 | 0.448 | 1.000 |
| Age 0-4 Age 46-64 | -103.72 | 41.28 | -2.51 | 0.012 | 0.120 |
| Age 0-4 Age 18-45 | -66.99 | 39.93 | -1.68 | 0.093 | 0.934 |
| Age 0-4 Age 65+ | -137.40 | 44.55 | -3.08 | 0.002 | 0.020 |
| Age 5-17 Age 46-64 | -73.40 | 20.40 | -3.60 | <.001 | 0.003 |
| Age 5-17 Age 18-45 | -36.67 | 17.50 | -2.10 | 0.036 | 0.361 |
| Age 5-17 Age 65+ | -107.08 | 26.39 | -4.06 | <.001 | 0.000 |
| Age 46-64 Age 18-45 | -36.73 | 20.29 | -1.81 | 0.070 | 0.703 |
| Age 46-64 Age 65+ | -33.68 | 28.32 | -1.19 | 0.234 | 1.000 |
| Age 18-45 Age 65+ | -70.41 | 26.31 | -2.68 | 0.007 | 0.074 |

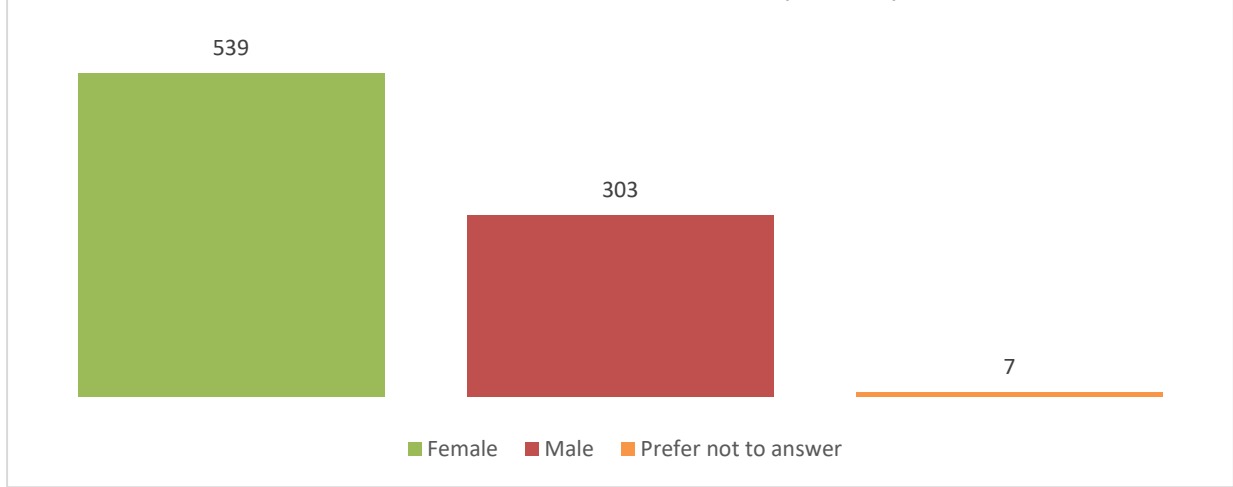
* Significance values have been adjusted by the Bonferroni correction for multiple tests.

Highlighted findings indicate statistically significant differences in average number of visits between compared age groups.

When the gender of patrons requesting services in 2022 is examined (see Figure 6), the majority self-identify as female (n= 539, 63.5%) followed by males (n= 303, 35.7%). There were seven patrons that preferred not to answer this question.

p-value represents the probability that observed results (or those more extreme/greater) would happen if the null hypothesis was true. Research and scientific norms typically use a p-value < .05 as a threshold standard for rejecting the null hypothesis for a specific statistical test, thus accepting an alternative hypothesis related to what is being studied making the finding statistically significant.

Figure 6: Gender of Patrons (Non-duplicated) requesting Services from NSFRC in 2022 (N=849)



Black or African American (Non-Hispanic) patrons represented 56.2% of the total patrons seeking services in 2022 (see Table 11). An additional 273 (32.2%) patrons were White (Non-Hispanic origin) followed by 25 (2.9%) self-identified as Hispanic, Latino, or Spanish origin. The NSFRC is in the 32055 zip code. This was the preliminary area of focus for the NSFRC when the site was first considered; however, speculation suggested that the geospatial area would be more focused as formal implementation of activities unfolded in the first year. Should zip code data from the Census Bureau be considered¹², the ethnic/racial distribution of the population in the 32055 zip code is 63.4% White (non-Hispanic origin), 30.6% Black or African American (non-Hispanic origin) and 3.6% Hispanic, Latino, or Spanish origin perhaps suggesting an underrepresentation of White patrons requesting service at the NSFRC and potential over representation of Black or African American (Non-Hispanic) patrons. However, caution needs to be exercised prior to making such an assertion. The geospatial area served is a broad estimate based on limited data related to the addresses of intended patrons that would seek offered services and respond to initiatives promoted by the NSFRC during its first year of operations. It is hoped the planned utilization by PSF and its Resource Centers of geo-spatial software to help better identify community need and service utilization trends, more valid estimates of the representative nature of patrons requesting service (and variation of need) across demographic characteristics can be made.

¹² 2020 American Community Survey 5-Year Estimates Data Profile; available at: <https://api.census.gov/data/2020/acs/acs5/profile>

Table 11: Race and Ethnicity of Patrons (N=849) Requesting Services at NorthStar FRC in 2022

| Race/Ethnicity | Number of Patrons | Percent of Patrons |
|--|-------------------|--------------------|
| American Indian or Alaska Native | 5 | 0.6 |
| Asian | 3 | 0.4 |
| Black or African American - Non-Hispanic | 476 | 56.1 |
| Hispanic, Latino, or Spanish origin | 25 | 2.9 |
| White - Non-Hispanic origin | 273 | 32.2 |
| Multiracial | 30 | 3.5 |
| Other | 7 | 0.8 |
| Prefer not to answer | 27 | 3.2 |
| Missing | 3 | 0.4 |
| Total | 849 | 100 |

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