



Colorado Family Resource Center Association 2020–2021 Evaluation Report // Executive Summary

The Colorado General Assembly established family resource centers (FRCs) in 1993 to serve as a “single point of entry for providing comprehensive, intensive, integrated, and collaborative community-based services for vulnerable families, individuals, children, and youth” in local communities. The Family Resource Center Association (FRCA) was established as a strategic statewide network for FRC advocacy and funding. Using a collective impact model, FRCA strengthens and expands Colorado FRCs through program fidelity standards; program quality monitoring; outcome measurement and reporting; state- and national-level advocacy; resource development; and organizational technical assistance and trainings, including capacity building for all its members.



Family Resource
Center Association



FRCA supports 32 member FRCs that serve communities across Colorado, working towards a vision in which every family is thriving and self-sufficient.

This executive summary presents key findings from FRCA’s 2020–2021 annual evaluation (July 2020–June 2021).¹¹ All data collected was for activities during the COVID-19 pandemic, which has significantly disrupted every aspect of life for community members seeking services, as well as for staff at FRCs providing services to meet the needs of their communities.

Key Features of Family Resource Centers

FRCs in Colorado adhere to the following standards and practices when delivering family development services in Colorado.



Quality Standards²

Focus on alignment with the Principles of Family Support and the Center for the Study of Social Policy’s Strengthening Families Protective Factors Framework³



Common Assessment

A reliable index of family functioning that obtains an objective assessment of family strengths and areas for growth and change⁴



Pathways Framework

Three primary paths through which families receive services from FRCs, each with increasing intensity of service provision



Fidelity Monitoring

A checklist and standard process to assess and improve fidelity implementation of family development core components

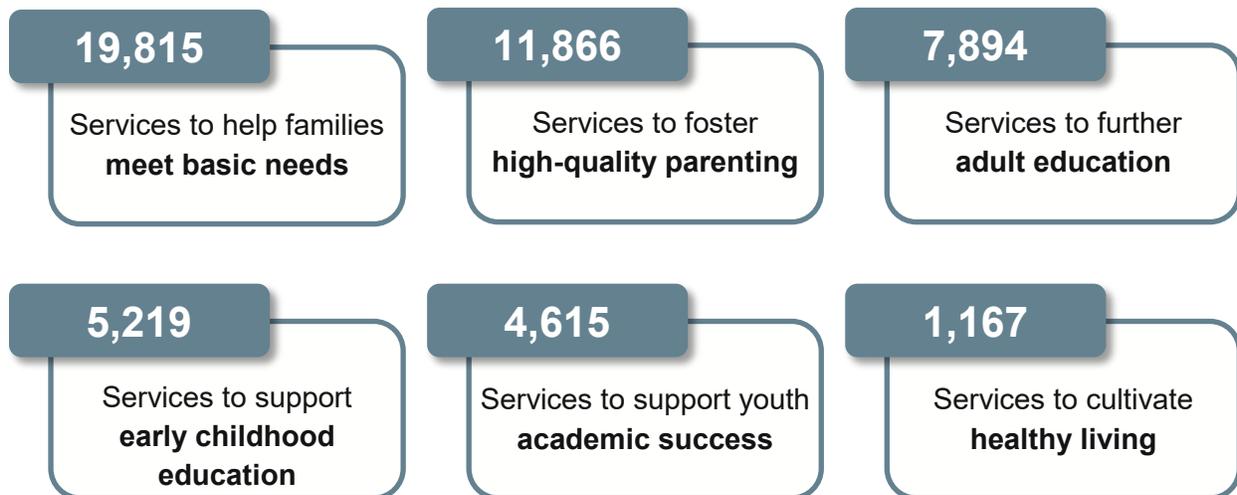
Impacts to Data Collection

All of the activities described in this report occurred during the COVID-19 pandemic, and this affected the data in this report. Overall, fewer Colorado Family Support Assessment Version 2.0 (CFSA 2.0) assessments, particularly follow-ups, were completed during the reporting period than in prior years. Requests for emergency and general services (e.g., rental assistance, basic needs, etc.) provided by FRCs increased as families faced economic hardship as a result of the pandemic. Throughout much of the reporting period, families also had competing priorities such as assisting their children in navigating online schooling or providing child care. This likely reduced many families' willingness to engage in future-focused programming and goal setting. Additionally, the increase in demand for emergency and general services led staff to spend less time documenting all the efforts of the FRCs, as data entry was deprioritized in favor of providing direct services that met needs of participants.

Standard practice across the FRCs includes data entry into FRCA's statewide database. In July of 2020, FRCA transitioned data systems and rolled out FRCAforce (Salesforce) to 238 users. Data migration was a known challenge and may have resulted in higher sample sizes of missing data.

Evaluation Findings: Families Served

During the 2020–2021 reporting period, FRCs continued to serve families in their communities. On average, FRCs administered 4,366 services per month. Based on the data entered into the system, **FRCs provided 52,392 services to 8,880 unique individuals and families.**



Economic Challenges

Families are experiencing many barriers to economic security in the wake of COVID-19. The median household income of families served in 2020–2021 was just over 23% of the median household annual income in Colorado.⁶



Among all families served, the median household income was

\$18,000

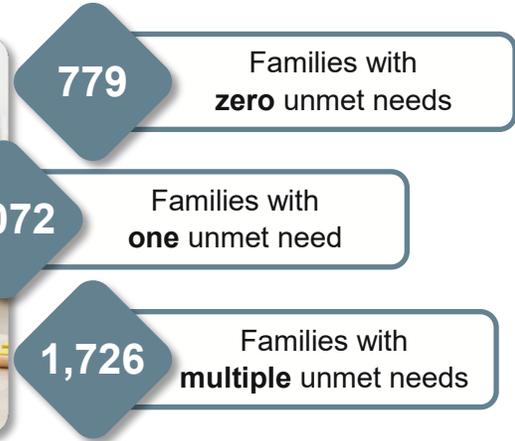


In 2019, the median Colorado household income was

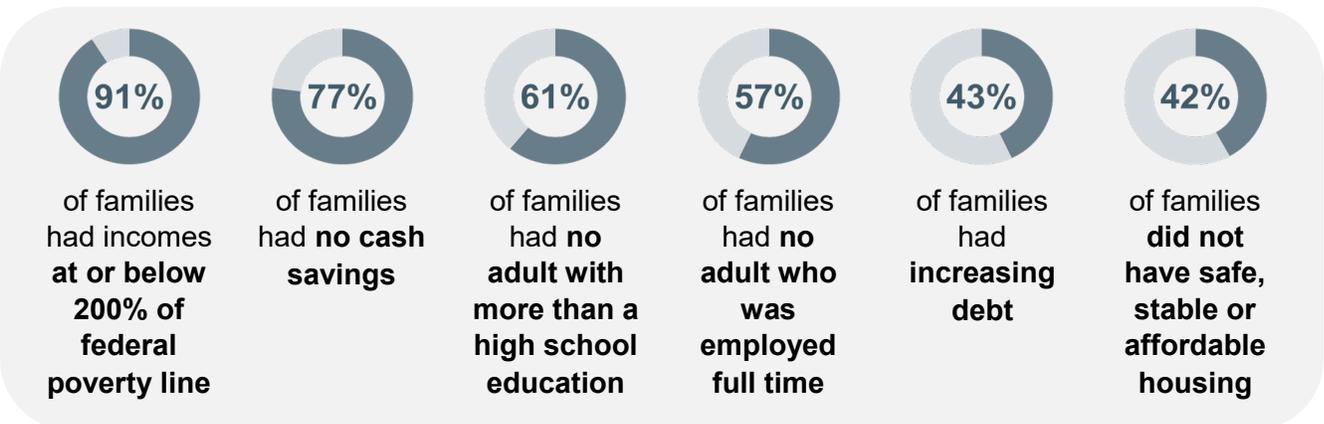
\$77,127

Unmet Needs

Of the 8,880 unique families that were served by FRCs, 3,577 completed a common screening intake form.⁵ On this form, respondents were asked yes/no questions about various needs. Many families had at least one unmet need, and nearly half had multiple unmet needs. Of families screened, 78% identified at least one unmet need, and 48% had multiple needs. The items with the **highest unmet need were employment and family insurance.**



There were six key areas of unmet needs, each reported by over 40% of families at their CFSA 2.0 baseline assessment. These areas were:



Family Development

Families with identified unmet needs can begin on the **Family Development path**. In addition to receiving general and center services, these families actively work with a family development worker to set goals and participate in assessments to track family progress toward goals. Progress toward those goals is measured via the Colorado Family Support Assessment 2.0 (CFSA 2.0). The CFSA 2.0 assesses family stability in 14 categories critical to family self-reliance. Families with children are also assessed along five factors that protect against child abuse and neglect.



1,598 families received strengths-based family development services, including the CFSA 2.0 assessment and one-on-one family-driven goal setting.

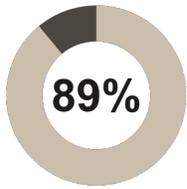
913 families completed at least one follow-up

Through the Family Development path, families identify the areas in which they would like to change. At their baseline (i.e., initial) assessment, families identified areas in which they were **most ready to make changes**. The most commonly selected areas for change and goal setting in 2020–2021 were:

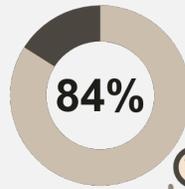


Strengths

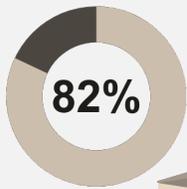
When families seek family development services, **they come equipped with many strengths.** At their CFSA 2.0 baseline assessment:



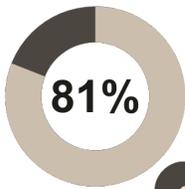
89% of families **met transportation needs** at least most of the time.



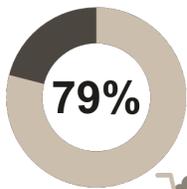
In 84% of families, **mental health concerns were not interfering** with important life activities.



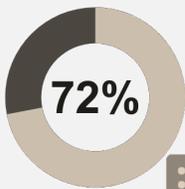
In 82% of families, children were **meeting academic and behavioral expectations** at school.



In 81% of families, **physical health concerns were not interfering** with important life activities.



79% of families had **enough quality, variety and quantity of food.**



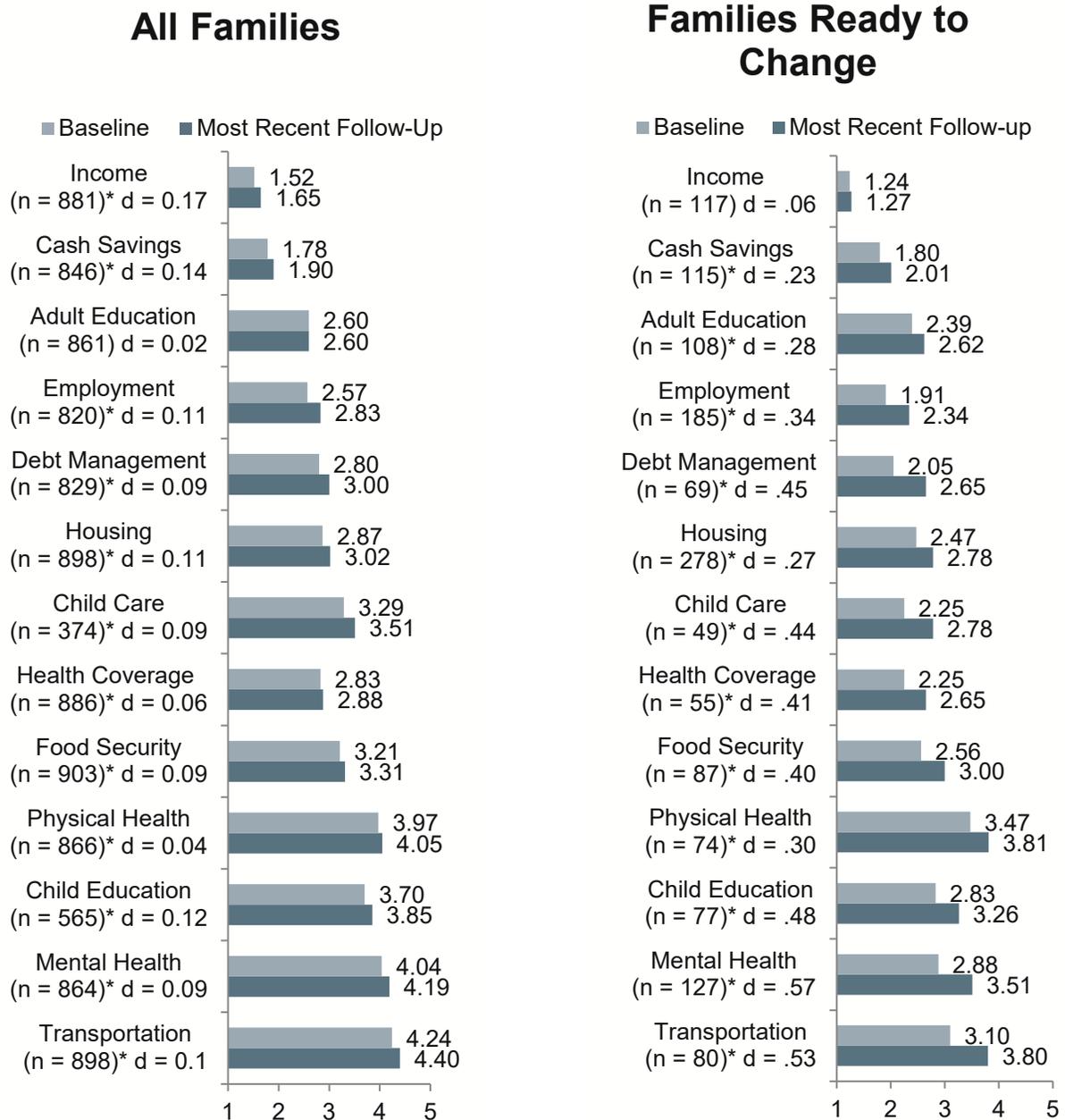
72% of families had health coverage for all members.



Family Improvements

In almost all domains, growth was observed between baseline and follow-up CFSA 2.0 assessments for families overall and for families ready to change. Both baseline and follow-up domain mean scores were lower for families ready to change than for families overall. Those who indicated they were ready to change experienced more growth, as evidenced by both a larger increase in mean scores between baseline and follow-up scores and larger effect sizes.⁷

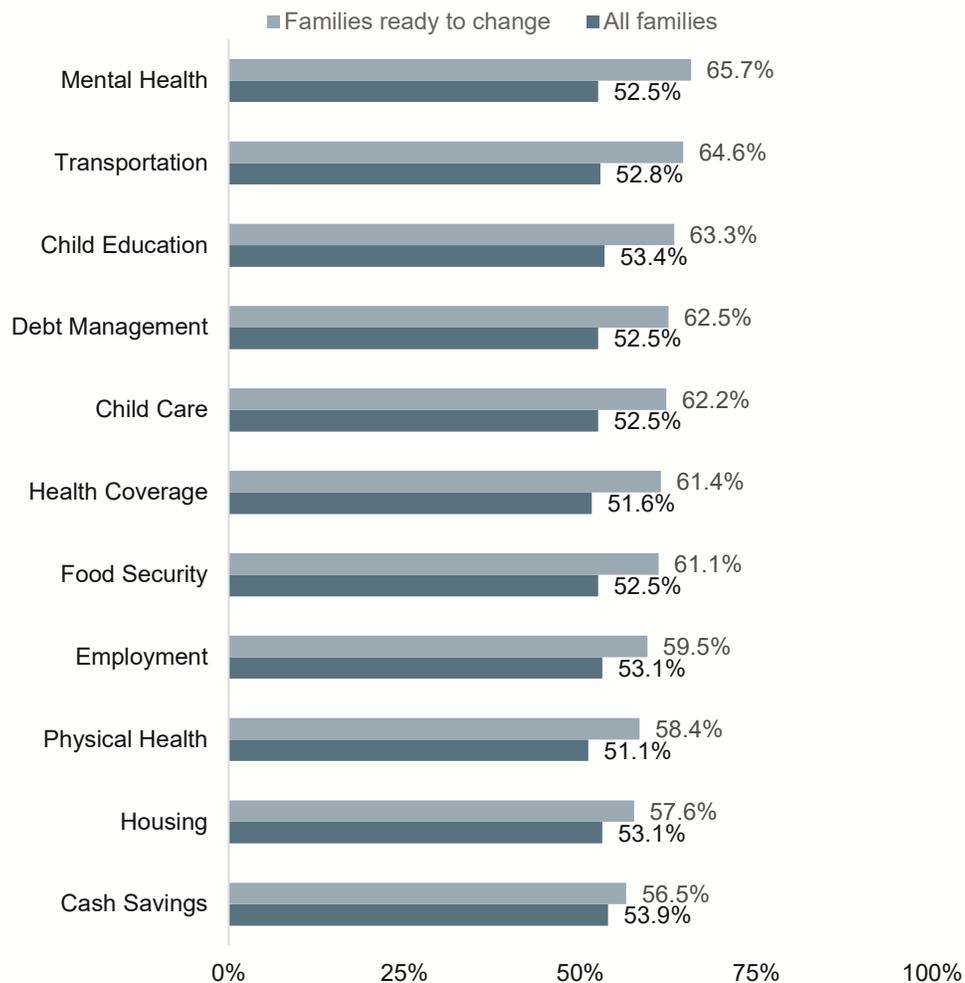
Figure 1. Mean scores of CFSA 2.0 domains at baseline vs. last follow-up for all families and for those who indicated a readiness for change



One way to frame the change seen in mean scores is by examining effect size, or the strength of the relationship between score changes over time, through a calculation known as the “probability of superiority” (PS). The PS tells us how likely it is that if one random selection was made from each of two groups being compared, one group would have a higher score than the other.

In this analysis, the PS indicates the likelihood that a randomly pulled follow-up assessment would have a higher domain score than a randomly pulled baseline assessment domain score. For example, as shown in Figure 2, in the domain of mental health for all families, the likelihood that a randomly selected follow-up score was higher than a randomly selected baseline score was only slightly higher than a coin flip (52.5%). But for families ready to change in the domain of mental health, there was nearly a two-thirds (65.7%) chance that a randomly selected follow-up score in the mental health domain would be greater than a baseline score.

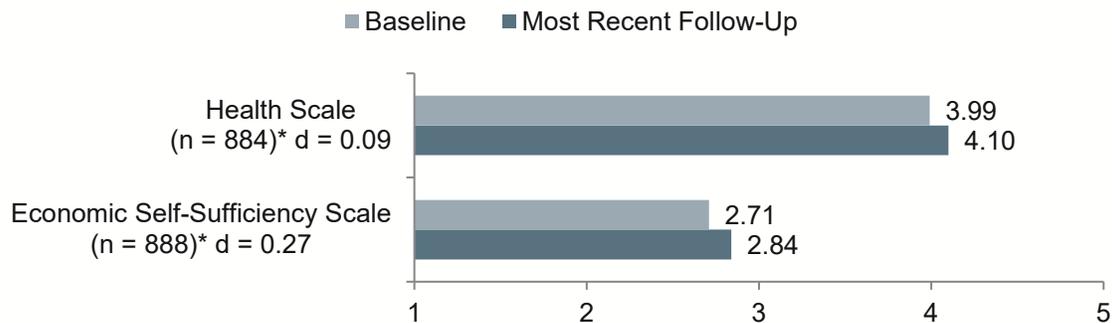
Figure 2. Probability of superiority for CFSA 2.0 domains for all families and families ready for change



Change in Economic Self-Sufficiency and Health

The Economic Self-Sufficiency scale of the CFSA 2.0 assesses family stability across income, employment, housing, transportation, food security, adult education, cash savings and health coverage. The Health scale assesses the degree to which family members' physical and/or mental health is impacting important areas of health. Figure 3 shows mean scores for both the Economic Self-Sufficiency and Health scales at baseline and most recent follow-up. Both show improvement from baseline to most recent follow-up, and for both, the difference is statistically significant, meaning the observed difference is most likely a pattern and not random. Although the effect size (denoted as d) was rather small for the Health scale, the Economic Self-Sufficiency Scale had an effect size of .27. This means there was a 57.6% chance that a randomly selected follow-up score—after services were received—would be higher than a randomly selected baseline score. This increase is driven by improvements in the multiple domains that make up the Economic Self-Sufficiency scale.

Figure 3. Mean scores for Economic Self-Sufficiency and Health scales for all FRCs



Movement Above and Below Prevention Line

Family movement above and below the “prevention line” (a score of 2 or below indicates vulnerability; 3 or above indicates a safer situation) was also examined. Table 1 shows families’ relationship with the prevention line from baseline CFSA 2.0 to their most recent assessment. Families ready to change (those who intentionally worked toward goals with a family development specialist) achieved greater increases toward a more stable situation than all CFSA 2.0 families across most domains.⁸

Table 1. Percentage of families who either moved or stayed above or below the prevention line

Domain		Moved Below	Stayed Below	Stayed Above	Moved Above
 Child Care	All CFSA respondents (n = 304)	5%	18%	65%	12%
	Families ready to change (n = 49)	2%	43%	22%	32%
 Food Security	All CFSA respondents (n = 884)	4%	9%	75%	12%
	Families ready to change (n = 87)	2%	20%	49%	29%
 Debt Management	All CFSA respondents (n = 782)	8%	26%	50%	16%
	Families ready to change (n = 69)	3%	36%	33%	28%
 Child Education	All CFSA respondents (n = 521)	3%	9%	79%	9%
	Families ready to change (n = 77)	3%	19%	53%	25%
 Mental Health	All CFSA respondents (n = 834)	3%	8%	81%	8%
	Families ready to change (n = 127)	3%	21%	51%	25%
 Health Coverage	All CFSA respondents (n = 869)	3%	22%	69%	6%
	Families ready to change (n = 55)	2%	44%	33%	22%
 Employment	All CFSA respondents (n = 788)	7%	40%	38%	15%
	Families ready to change (n = 185)	6%	58%	17%	19%
 Cash Savings	All CFSA respondents (n = 806)	5%	67%	18%	10%
	Families ready to change (n = 115)	5%	68%	10%	17%
 Transportation	All CFSA respondents (n = 874)	2%	6%	87%	5%
	Families ready to change (n = 80)	5%	14%	64%	17%
 Physical Health	All CFSA respondents (n = 839)	5%	12%	76%	7%
	Families ready to change (n = 74)	4%	12%	69%	15%
 Adult Education	All CFSA respondents (n = 826)	6%	55%	32%	7%
	Families ready to change (n = 104)	3%	50%	33%	14%
 Housing	All CFSA respondents (n = 876)	8%	27%	50%	15%
	Families ready to change (n = 278)	7%	24%	56%	13%
 Income	All CFSA respondents (n = 866)	2%	86%	7%	5%
	Families ready to change (n = 117)	0%	97%	3%	0%

Changes on the Protective Factors Survey

To examine whether families increased factors that protect against child abuse and neglect, mean scores for the four protective factor scales and the items that assess knowledge of parenting and child development are presented for both baseline and most recent follow-up. As shown in Figure 4 below, families made small gains in each of the four protective factor scale items, but none was found to be statistically significant. However, there was statistically significant growth shown in the knowledge of parenting areas related to losing control while disciplining their child and helping their child learn.

Figure 4. Change in mean scores between baseline and most recent follow-up for Protective Factor scales

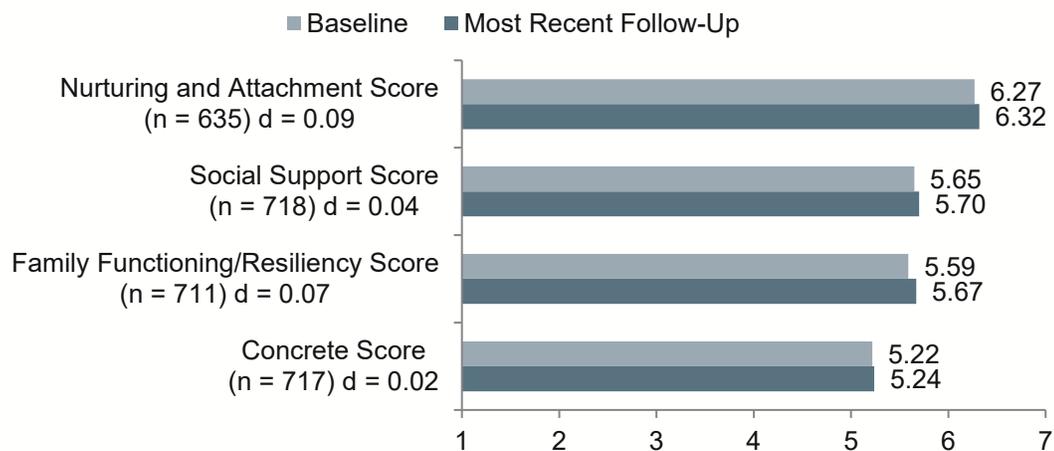
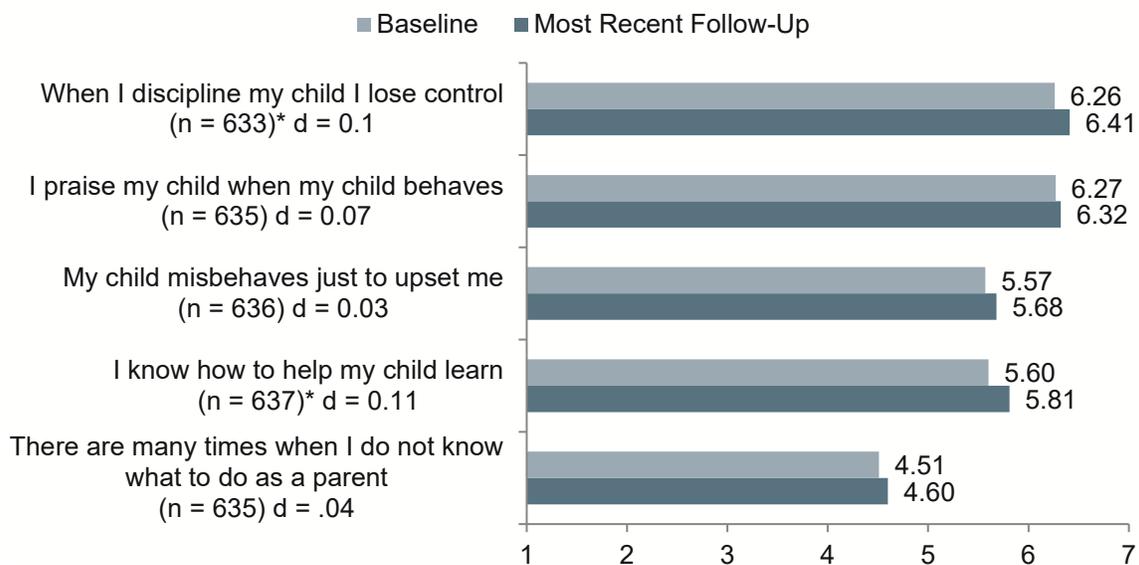


Figure 5. Change in mean scores between baseline and most recent follow-up in knowledge of protective factor items



Conclusion

Between July 2020 and June 2021, across Colorado, FRCA-member FRCs documented serving 8,880 individuals and their families. These individuals and their families had low incomes and faced a number of unmet needs when they engaged with their local FRC. Over the course of the year, FRCs documented the delivery of 52,392 services, most frequently in the areas of helping families meet basic needs, fostering high-quality parenting and furthering adult education.



During the reporting period, a total of 1,598 individuals completed a one-on-one strengths-based and goal-setting CFSA 2.0 baseline assessment on behalf of their families. Of these individuals, 913 completed at least one follow-up CFSA 2.0. From these results, a series of analyses were conducted to determine the effect that their involvement with their local FRC had on them and their families across the domains and areas within the CFSA 2.0.

Individual CFSA 2.0 Domains

In an examination of the results for **all families** who completed both a baseline and a follow-up CFSA 2.0, statistically significant differences were observed for 12 of the 14 domains.⁹ This indicates that families involved in the Family Development pathway, as a whole, tended to see improvements across multiple domains over the course of their involvement with the path. This finding is also reflected in the statistically significant growth observed in the **Economic Self-Sufficiency and Health factor scales** derived from the domains between baseline and follow-up assessments.

Families that identified a domain as an area in which they were **ready to make a change** tended to have **lower baseline mean scores** in that domain compared with the baseline mean scores of all families. This was true for all domains,¹⁰ and it suggests that families identified areas for change based on need.

Families that indicated being ready to change in any specific domain experienced statistically significant growth in that domain, with the exception of income and substance abuse. Compared with families overall, families ready to change **experienced more growth** in mean scores between baseline and follow-up assessment for all domains, with the exception of income and substance abuse.

The domains that experienced the greatest amount of growth for families ready to change were:¹¹

- Mental health
- Child education
- Debt management
- Child care
- Health coverage
- Food security

However, families ready to change, despite the increased amount of growth in each domain, also had a **lower mean score than families overall at the time of their most recent follow-up assessment**, suggesting that despite the growth observed, there is still room for further growth.

Child Abuse Prevention

Marginal amounts of growth were observed for the Protective Factors Survey items, with no statistically significant growth seen when comparing mean scores between baseline and follow-up for the nurturing and attachment, social support, family functioning/ resiliency or concrete factor items.

For the individual items related to knowledge of parenting, statistically significant growth was seen for the items related to losing control when disciplining their child and knowing how to help their child learn. For both of these items, follow-up mean scores were higher than baseline scores.

In summary, in serving their community members in need, FRCA-member FRCs are helping families experience growth along critical domains. Families engaged with services through the Family Development path demonstrate positive growth in economic self-sufficiency and health.

¹ Data are for families served from July 2020 to June 2021.

² Standards of Quality for Family Strengthening and Support, <https://www.nationalfamilysupportnetwork.org/standards-of-quality>

³ The Strengthening Families Protective Factors Framework, <http://www.cssp.org/reform/strengtheningfamilies>

⁴ The Protective Factors Survey is embedded within the CFSA 2.0, www.cofamilycenters.org

⁵ Unmet needs are assessed with the common screening tool at center entry. It includes eight yes/no items that assess family need in employment, housing, transportation, food security, adult education, health insurance, child care and children's education.

⁶ Median income data is from American Community Survey 2019 one-year estimates, <https://www.census.gov/programs-surveys/acs/data.html>

⁷ Denoted by a Cohen's d and calculated as the mean difference divided by the standard deviation of the difference

⁸ The substance abuse domain is removed from this table because no families identified it as an area they were ready for change in. For all families, 2% moved below, 4% stayed below, 93% stayed above and 2% moved above (n = 788).

⁹ The two domains where statistically significant differences were not seen were substance abuse and adult education.

¹⁰ The only exception was substance abuse. No families with both a baseline and a follow-up score in this domain indicated it was an area in which they were ready to make change.

¹¹ As indicated by at least 20% of families moving from below to above the prevention line and effect sizes of .4 or greater