



Family Resource
Center Association

FRCA

Equitable Evaluation Framework

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www.joiningvisionandaction.com

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INTRODUCTION

The Family Resource Center Association (FRCA) has demonstrated a solid commitment to make equity the backbone of all its work, including its evaluation processes. FRCA's mission is to strengthen Colorado families through collaboration and partnership. It does this by providing training, technical assistance and evaluation to strengthen Colorado's statewide network of family resource centers (FRCs) as they bring help and hope to Colorado families.

In 2020, FRCA's team started its equity journey by completing an equity, diversity and inclusion (EDI) assessment and creating draft common language to define what EDI means and how it shows up in FRCA's work. Specifically, FRCA has proposed the following working definitions:

- **Equity**—Recognizes the existence of barriers—reproduced by an individual, group and institutional actions—that prevent the full participation of some. FRCA, through our member network, works to identify and dismantle these barriers and rebuild with an equity mindset. We are committed to allocating resources, programs and opportunities for the communities we serve to remedy imbalances. This is done by creating opportunities for underrepresented and underserved populations to have equal access to member network services and contribute to our agencies.
- **Diversity**—Celebrates and affirms the value of each individual and group. We recognize and respect that people affiliate with multiple and intersecting identities, and those identities can be fluid and shift over time. Therefore, our definition of diversity will also continue to evolve. Diversity refers to the varied characteristics of the FRCA network, its member centers and the communities we serve. These characteristics include our backgrounds, lived experiences, talents, perspectives, educational attainment and identity (e.g., race, age, sexual orientation, gender identity and expression, religion/spirituality, ability), and other aspects of our cultural/sociodemographic backgrounds.
- **Inclusion**—Ensures the FRCA network, member centers and the communities we serve with different identities feel valued, respected, supported and welcomed within a given setting (e.g., work environment or community). It's about focusing on every individual's needs and ensuring the right conditions are in place for each person to achieve their potential, to promote and sustain a sense of belonging

To further build upon FRCA's equity journey, it is now interested in better understanding how its evaluation activities can be aligned with its current understanding of EDI. To facilitate the development of an equitable evaluation framework, FRCA engaged Joining Vision and Action (JVA) to design an approach to evaluation that incorporates equity.

To help inform the development of the recommendations included in this draft framework, JVA utilized a mixed-methods approach to gather feedback from stakeholders (i.e., FRCA and FRC staff) on current evaluation systems and processes to identify current strengths, while also acknowledging areas of opportunity for the incorporation of equity into FRCA's evaluation work moving forward (e.g., practices, processes and outcomes). This framework has been designed to give FRCA opportunities to build a shared understanding of what it means to practice equitable evaluation, to challenge assumptions about how evaluation is currently done, and to explore approaches to doing evaluation in more equitable ways.

The following summary presents synthesized recommendations for modifying FRCA's evaluation practices, processes and outcomes that emerged from analysis and review of the data gathered from the different stakeholders, to ultimately move the needle toward a more equitable approach to evaluation.

METHODS

To gather insights to inform development of the recommendations included herein, JVA facilitated a stakeholder meeting with FRCA's representatives and conducted an online survey that collected feedback from 15 different family resource centers. JVA also conducted three focus groups, one with FRC staff members and two with individuals served by FRCs, including Spanish speakers.

The facilitated session, held April 28 via Zoom, included Program and Evaluation Committee participants representing FRCs, as well as FRC staff. During the session, participants had conversations focused on identifying how inequities show up in current practice and policies, and brainstorming strategies and implications for FRCA's path forward.

The online survey asked respondents to rate 15 steps for accessing services at a resource center for how they might present a challenge related to equity, diversity and inclusion.¹ The survey was completed by 34 staff members at various FRCs across Colorado. See Appendix A for a summary of survey findings.

¹ For these items, survey respondents were given a three-point Likert-type scale to indicate the extent to which each step may represent a challenge related to equity, diversity and inclusion, where 1 = not at all, 2 = to a little extent, and 3 = to a large extent. Respondents who indicated a step had the potential to create a challenge to a small or large extent were provided an opportunity to explain their response.

Finally, JVA facilitated three targeted focus groups designed to help FRCA better understand what is working well and what is not with regard to evaluation data collection activities, and to identify areas where the evaluation process may be improved in order to achieve equity. Four people attended the staff focus group; four attended the focus group facilitated in English for FRC clients; and three attended the focus group facilitated in Spanish for FRC clients. See Appendix B for a summary of focus group findings.

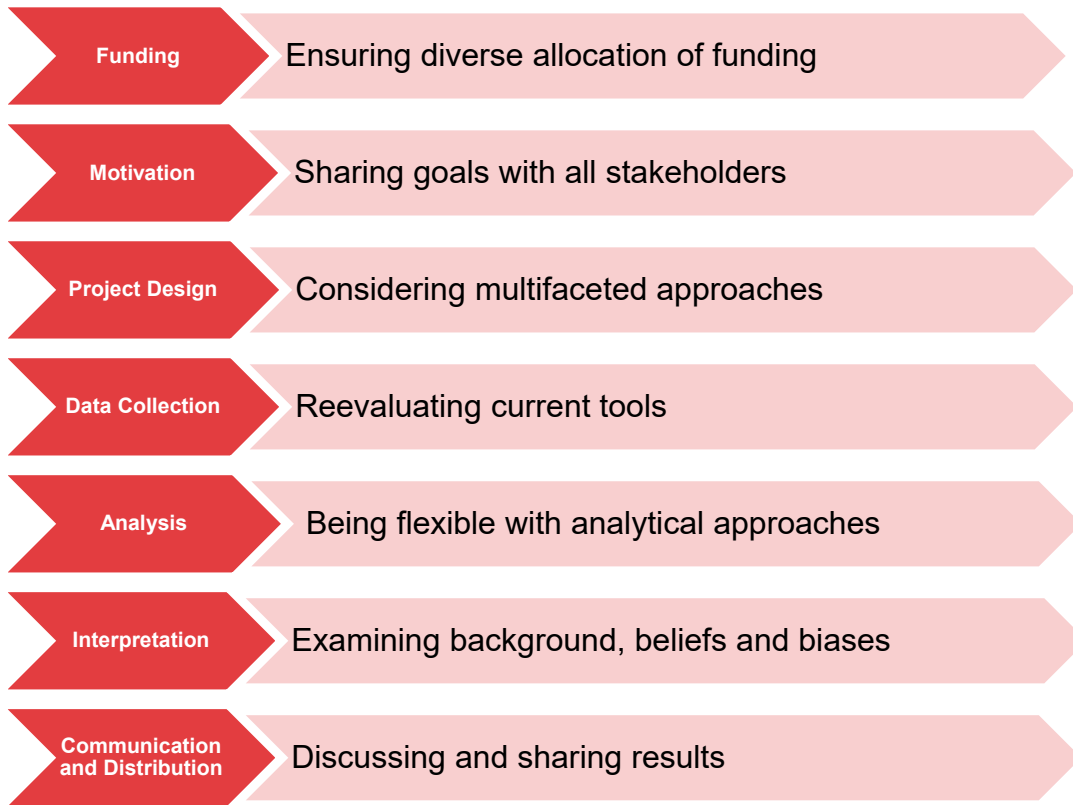
Framework Structure

FRCA's equitable evaluation journey started with an evaluation approach that places culture and the community at the center of the evaluation, helps to support community empowerment and has a goal of social justice. It goes far beyond a quantitative approach, engaging all stakeholders into a culturally responsive evaluation.

FRCA's evaluation already has equity tools embedded, and the organization believes in ensuring there are adequate funds for its evaluation process.

With this in mind, the following summary presents recommendations to modify FRCA's evaluation activities. To provide structure to these recommendations, the framework follows the Seven Step Data Equity Framework,² beginning with examining potential changes to funding all the way through communication and distribution:

² <https://weallcount.com/the-data-process/>



FUNDING

Overview

When it comes to funding, foundations and other funders often define where and how resources are allocated, which can affect the understanding of our world and can impact how work is being done. FRCA is using its evaluation to “make the case” for funding, and it can equip individual FRCs to also utilize evaluation findings to support individual fundraising/development efforts.

Feedback

Information on the intersection of funding and evaluation, gathered through the session and the survey, showed that FRCs feel understaffed. The role of the intake staff is to assist families by determining the services and supports best suited for each family’s particular needs, but being understaffed makes it difficult to meet with all the individuals who need services. Intake staff gathers a brief screen from the family regarding its needs and strengths as well as the information necessary for referral. This enables the staff to process the intake and refer the family to the most appropriate family support service based on their needs and the availability and requirements of the service.

Initial engagement is crucial, and accessing services can be difficult because the staff is overwhelmed. Identifying funds to increase intake staff will create a streamlined process for recruitment and administration of evaluation tools and will allow FRC workers to focus all efforts on the priority of providing direct services to families. Lower salaries and lack of benefits induce higher staff rotation, affecting FRCA's evaluation process by deeply impacting relationship-building with clients and ultimately the FRCA goal of strengthening Colorado families.

Recommendations

- Invest in ongoing staff trainings on equitable evaluation. Commit to allocating resources to build a shared understanding of what it means to practice equitable evaluation based on the framework created for FRCA.
- Invest in ways for staff to prevent burnout (e.g., training in stress management at work or activities that foster better relationships between employees). FRC staff jobs involve facing clients' biggest struggles, so staff wellbeing is critical to ensuring the success of the families being served by helping leverage evaluation as a driver of health equity.
- Assign FRCA funding to improve employee salaries. Inadequate salary can become a major impediment to productivity; it can have a profound implication for employee self-worth, affecting the quality of the service employees provide to clients. Compensation strategies should lay foundations for sustainable growth by encouraging employee retention and engagement, which ultimately will benefit the evaluation processes by ensuring long-term relationships between staff and clients.

MOTIVATION

Overview

Motivation is the step where we find the “why” of the evaluation process. The motivation for FRC activities, and thus, FRCA evaluation activities, is to move families toward economic and health wellbeing and better understanding of that development. FRCA evaluation seeks to collectively contribute to the success of the families in fulfilling their goals and objectives and to analyze and organize data and other learnings to identify program characteristics that lead to success and sustainability.

Recognizing the integral role of families in supporting FRCA evaluation is a necessary component for all implementation efforts. Building strong, long-term relationships between staff and families will help fully utilize the many resources available to support FRC clients. Nurturing these positive connections will make families feel like the FRCs would like to know them better, and not just view them as “part of the data.”

Feedback

Evaluation has to go beyond conventional quantitative data to the analysis of behavioral change, complex social processes and attitudes, and collecting information on difficult-to-reach socially marginalized groups by sharing stories that recognize historical and structural power and elevate community-focused solutions.

“I have an idea we are talking about data all the time and how each center just takes what they need and that’s what they use. We talk about how the systems of the fields aren’t always relevant. We are forgetting about the narrative; it could be a mixed evaluation where it is not just quantitative but qualitative. The social context, the health context, there is so much out there not being captured by the evaluation. We are doing a lot of case management and hearing the stories of people every day, and where does that go?”—FRC staff member

Recommendations

- Review the role of cultural differences and consider client goals within that context.
- Foster positive connections with families by training staff in building relationships that start with empathy.
- Add qualitative data in the evaluation by discussing innovative strategies to further incorporate families’ perspectives; for example, incorporating stories by having the families share their experiences with FRCs through open-ended questions or facilitated interviews; consider the perspective of each family as unique, to ensure long-term relationships that will help evaluation go beyond conventional quantitative data to the analysis of behavioral change and complex social processes.
- Understand that the goal is not to collect data, but to help families and improve their conditions. The evaluation can address this by considering the contextual/background differences in the families’ economic and health wellbeing.

PROJECT DESIGN

Overview

When it comes to project design, there is a need to be conscientious about the subjective nature inherent to the process of evaluation. When it comes to equity in evaluation, there is no such thing as objective project design, especially when measuring

anything to do with people.

The project design should be sensitive to families' local beliefs and manners and act with integrity and honesty by taking into consideration differences in culture, local customs, religious beliefs and practices, personal interaction and gender roles, disability, and age and ethnicity. It should also be mindful of the potential implications of these differences when planning, carrying out and reporting on evaluations.

Feedback

The design of the evaluation has to consider multifaceted approaches to helping families and the barriers to participating in family development or center services.

“FRCA evaluation provides information around race/ethnicity and gender, but do not look at the differences within each of the groups per se.”—FRC staff member

When considering current project design (i.e., the methods), specific challenges connected to FRCA tools used for evaluations included:

- Clients may be reluctant to fill out forms or share information about themselves.
- Clients in crisis may feel there is a disconnect between questions on intake and their crisis.
- Forms are not always available digitally and in commonly spoken languages.
- Staff are not always trained on how to access and administer forms in person, digitally and in all languages.
- Some questions, particularly around educational attainment, can be intimidating to migrant families and others.

An equitable evaluation should ensure that instruments used in the evaluation are appropriate for the culture of the people of whom the questions are being asked.

Recommendations

- Train intake staff to meet clients where they are by providing flexibility and being ready to simplify intake processes when in crisis situations.
- Leverage the Program and Evaluation Committee to think through evaluation questions. Examine forms and make sure response options are as inclusive as possible.
- Seek feedback from community leaders regarding the structure, intent and language of all instruments to be used in the evaluation.

- Ensure staff know how to access and administer all evaluation forms in all languages in which they are available.
- Reevaluate the quality and inclusivity of the demographic questions on FRCA's surveys by considering what demographic questions are really needed rather than including a standard set of demographics in every questionnaire.
- Provide opportunities for feedback before, during and after surveys about review of the language contained in the forms, the stated objectives of the evaluation, expected outcomes, and ideas of what a successful outcome would look like to help strengthen and build relationships with FRC clients.

DATA COLLECTION AND SOURCING

Overview

During the process of data collection, it is important to be attentive to how we source the data to ensure equity and, ultimately, validity. Taking into account the where, why and how of any data set is crucial to equitable analysis. Equitable evaluation should move to participatory equity-focused processes that allow families participating in the evaluation to be more than just “providers” of information, ensuring that the processes and methods used serve to correct, not reinforce, patterns of inequity and exclusion.

“I personally don’t feel comfortable in that it will reflect the work that we did. I am not confident about my data. Overall, I feel that if we are really trying to look into the diversity and inclusion portion, we need to look into our client database. I remember the survey that was sent; we are not gathering the data we need to reflect diversity and inclusion.”—FRC staff member

In addition, it is important to be aware of power relations within the client’s cultural background. In many ethnic minorities and disadvantaged groups, certain sectors are further marginalized on the basis of factors such as age, gender or region of origin. Great cultural sensitivity is required to respect cultural norms while ensuring that all the staff is racially and culturally prepared to engage priority populations in an unbiased manner, ensuring equity-focused processes in the evaluation.

An equitable evaluation considers how staff personal values play out in the interactions and comfort with others (especially those perceived as different), the understanding of the cultural and environmental factors that shape the lives of others, and the needs and goals they might have. It allows periodic self- and/or group reflection on everyone’s values and how they manifest into perceptions, attitudes and judgments.

An equitable evaluation also takes into consideration the cultural differences among the population it serves, learning about the priorities and preferences of the culture and considering how those priorities are or are not reflected in the priorities of the project or program being evaluated.

“I agree, when we ask about education ... Our migrant families, they didn’t go to school. So that can be an uncomfortable question, so we like to ask more about skills.”—FRC staff member

Feedback

The next step in FRCA’s equitable evaluation journey will be reevaluating how current the tools are for data collection. Specifically, they may need to be more oriented toward social development, health and environmental issues. FRCA needs to ensure the instruments used in the evaluation are appropriate for the culture of those being asked the questions, but equally important is the identification of those who will conduct the evaluation.

To ensure that evaluators are able to successfully receive the messages that subjects of the evaluation are sending, all members of the evaluation team should be exposed to the culture of the population relevant to the evaluation, through conversation, personal development and multicultural training.

“I chose my response to be able to comment on the huge need for engagement skills. This is the biggest lack I see. Engagement isn’t an innate skill for everyone. The training and support needed is huge. Without communication and connection, the process stalls. People may receive services but don’t integrate them into their lives. The skills the advocate/navigator brings seem underrated. Meeting people where they’re at without judgment or directives is of vital importance. These are often entry-level positions with pay that is reflective, and staff moves on.”—FRC staff member

Staff members mentioned various challenges with some of the questions asked of clients and the forms used. For example, staff noted that some participants might think sharing financial information will affect their opportunity to get the services they need. One solution might be for staff to explain to participants the reasons their financial data is collected.

In addition, some focus group participants, including Spanish-speaking clients, reported challenges in understanding forms used by the FRCs, and a few spoke of having difficulty understanding the Likert-scale items.

Furthermore, burnout can be a factor not just for the staff, but for clients as well. Staff focus group participants reported they need to collect information from the clients each time clients approach a center. Also, clients mentioned that forms can be too lengthy.

Finally, FRC staff shared the importance of investing in ongoing staff development opportunities by creating a budget that sustains such opportunities. Ongoing and steady funding is required for the success of all steps of the FRCA equitable evaluation approach.

Recommendations

- Create a shared working definition and vision of what FRCA evaluation processes will look like through an EDI lens. Be proactive and consistent communicators with FRC participants. Ensure all stakeholders are aware of and understand the FRCA evaluation process and have access to accurate information throughout the process (e.g., through ongoing communication and sharing data results).
- Involve the community throughout the whole process. Stakeholders' buy-in, and in particular that of those served by FRCs, is important for the implementation and sustainability of an equitable evaluation approach. Ensure the stakeholders involved are diverse and represent a range of perspectives and experiences.
- Build meaningful relationships with the participants. FRC's staff should guide and support implementation and sustainability of the new FRCA Equitable Evaluation Framework efforts. Make sure FRC staff members have the proper authority and resources to support their mandate. To be successful, they need to have the right resources and the capacity to evaluate and collect data across languages and cultures.
- Look for diversity in the staff that collects data, focusing on heterogeneity in life experience, culture, race, gender, ethnicity and class.
- Consider feedback from community leaders, members of the community and clients to assess how specific characteristics of the population impact how the evaluation could be conducted.
- Incorporate a cultural relevance element to training on administration of data collection tools to help account for cultural frameworks and differences, assumptions and biases.
- Offer training to make it possible for staff to have conversations that explicitly address race and equity, with an emphasis on structural barriers, to support the personal and professional development that underpins equitable evaluation. Create vetted tools that FRCs can use to apply an EDI lens to every aspect of their operations. One gap noted by staff is the lack of financial training to better support families.

- Rethink tools for collecting data. Add open questions that invite the participant to tell their story. Consider participants' literacy level. Keep any application processes simple to encourage participation by those who face barriers related to language, immigration status, literacy, disability, etc. For demographic questions, consider offering a multi-select format or write-in options, and allow the client to skip questions that might make them feel uncomfortable. During administration of tools, make sure staff is available to explain concepts that are unfamiliar to certain groups
- Consider providing incentives for follow-up data collection and inform clients about this incentive to increase responses. Recognize the necessity of all the steps of the process and encourage all participants in implementation to commit to completing them.

Help staff learn to understand and work with people whose culture differs from their own. The training should take into account and address ways that knowledge and values are cultural and socially filtered through the interviewers. Consider the urban/rural divide, not just as an economic difference but as a cultural difference, when looking to be inclusive in service delivery. FRC staff should be aware and respectful of different behaviors and expectations their clients may have, depending on where they have lived most of their lives. Shift thinking away from a focus only on sameness to a focus on treating everyone appropriately and accommodating their differences.

- Staff could also benefit from body language training to help them recognize verbal and nonverbal nuances of the different cultures of clients. This includes learning to intently listen to responses; being aware of voice tones, hand movement and emotional changes; and respectfully clarifying follow-up questions when needed.
- Avoid staff and participant burnout when collecting data. Offer self-care tools, techniques and training to employees and be aware on how many times a client fills out forms such as the Colorado Family Support Assessment (CFSA).

ANALYSIS

Overview

Evaluations should examine how backgrounds, beliefs and biases can influence analyses, which can improve the capability of conducting evaluation using a culturally responsive and racial equity lens. An equitable evaluation approach considers whether any facet of the evaluation team's own background interferes with properly interpreted ideas, needs and goals of the clients. It provides opportunities where staff members can

assess whether there are any groups with whom they have had a negative experience or about whom they have internalized any biases. If any are identified, FRCA will need to take steps to address them so they don't impact the evaluation (e.g.: training and conversations on appreciating differences and on multicultural issues, recognizing biases).

"We talk a lot about how in evaluation ... what gets measured gets managed. So, if there are things not being measured there could be a blind spot."—FRC staff member

Feedback

Beyond simply reporting, the analyses can serve to help assemble more culturally competent teams; craft more culturally responsive evaluation designs; gain valuable perspectives from people who have previously been silent, ignored or misunderstood; and more fully understand the reach, effectiveness and impact of social investments. To accomplish this, it is key to constantly check our biases, including assumptions about who we are serving and how families have been served. Being aware of our own culture, biases and stereotypes helps us to better comprehend our feelings about and understanding of other cultures and not just **make assumptions** about who we are serving.

"If a family comes in with two or three of these specific problems, then do we know what XYZ is best for them? Eventually it would be nice to know what is most effective."—FRC staff member

Recommendations

- Disaggregate data to identify which client groups are experiencing growth or success in achieving goals at different rates than others.
- Incorporate analysis of qualitative data to better create whole pictures of changes and successes of clients.
- Recognize the limitations in collecting quantitative data and establish protocol for analyzing qualitative data to consider context.

INTERPRETATION

Overview

A diverse evaluation staff, rather than a homogeneous staff, allows for multiple perspectives to influence the evaluation process and findings and support the process of equity in the interpretation; considering a variety of perspectives and recognizing

opinions as opinions acknowledges their value.

Feedback

This step assigns meaning to the data analysis and how it relates to FRCA evaluation goals and its implications to the evaluation work. All stakeholders are called to share thoughts, opinions and experiences. The results will inform and be integrated into the dialogue and decision-making about the impact of race, class and culture on FRCA evaluation work and the mission it serves.

*“How to create systemic or policy changes. If we don’t hear those stories, how can we make those changes? I was thinking that one thing I should consider is that all the factors, they are interconnected, and if we miss some factors, we may draw incorrect conclusions.”—
FRC staff member*

Recommendations

- Utilize client stories and anecdotes to help provide a complete picture of the client experience.
- Identify potential patterns that exist to identify the factors that led to success and the factors that led to a lack of success.
- Have a stakeholder brainstorming session to examine results and get multiple perspectives on what the results mean for decision-making moving forward.
- Use multiple people to interpret the data to help avoid biases by bringing different approaches to the interpretation to help define the consistencies between the interpretations.

COMMUNICATION AND DISTRIBUTION

Overview

Communication and distribution are also about presenting evaluation findings. A key challenge is to try to make sure that FRC clients who view these findings can also see the underlying analysis of why these differences exist, and how they might be addressed.

Feedback

FRCs are actually using their own data and could probably share best practices around using data effectively.

“We have a process for disseminating the report every year. We have a webinar about the highlights from the report. We could expand that to have more public-facing dissemination for the report. Thinking about the data that we already collect, but including participant feedback.”—FRC staff member

Sharing the outcomes and the impact of the programs and the results of the evaluation with the families and between FRCs would allow opportunities to clarify, highlight and share new ways of seeing the data.

Feedback from FRCA’s focus groups revealed that families are contacted at least twice a month and sometimes weekly depending on their participation in classes. Families shared that this is a good number of times, adding that the best channels of communication are text message and phone calls. Email was mentioned as the least preferred.

Recommendations

- Let participants know there will be an opportunity to learn the results of evaluations they participate in. FRCA can offer follow-up sessions with the families and open community meetings to discuss the impacts of their evaluation.
- Acknowledge audience diversity. Share with the families who provided the information for the evaluation using a language and narrative they can understand.
- Set possible dates and times available for opportunities to share findings and results of the evaluation with participants.
- Have staff collect information on best ways to connect with participants. The COVID-19 pandemic has affected the ability to meet and make connections. Plan on a digital communication approach (Zoom) or phone apps (WhatsApp) that can help people stay connected. When the opportunity arises and it is safe to meet in person, consider a change of scenery. New surroundings can revitalize and refresh people and encourage new perspectives while allowing the opportunity to have different options of meeting places to accommodate participants.

EQUITABLE EVALUATION FRAMEWORK

Informed by the Seven Step Data Equity Framework, the results of the FRC staff survey and the recommendations above, the following are the primary challenges FRCA faces in ensuring its evaluation process is equitable, as well as potential solutions to consider in the development of an equitable evaluation.

FRCA equitable evaluation framework challenges and solutions

Step	Current Challenges	Proposed Solutions
Funding	Lack of funding leads to understaffing. Being understaffed makes it difficult to meet client needs and follow FRC protocols (e.g., follow-up contact). Staff members feel overwhelmed and may lose motivation to perform their job to the best of their ability, or quit the job. Staff disengagement and turnover undermine efforts to connect authentically with clients, which in turn becomes a barrier to FRCs achieving the goal of strengthening families.	Use evaluation findings to make the case for allocating funds toward hiring additional staff and improving staff support. Support staff through increased salaries and ongoing training, including stress management.
Motivation	Clients are an integral part of FRC evaluation, but families sometimes feel they are seen by the FRC as “data” rather than as individuals with unique experiences, needs and strengths. This can make families reluctant to respond to questions and to engage as fully in FRC supports.	Engage staff and clients in goals; review the role of cultural differences and consider client goals. Train staff in building relationships that start with empathy, considering the perspective of each family as unique. Find strategies to further incorporate families’ perspectives, such as having the families share their experiences with FRCs. Understand the goal is not to collect data, but to help and advance the conditions of the families. Bear in mind the contextual differences in the families’ economic and health wellbeing.
Project design	Clients may be reluctant to fill out forms or share private information. Clients in crisis may not see the relevance of some of the intake questions. The Common Screening Survey (CSS) is not available in Spanish or available digitally. Some questions, particularly around education, can be intimidating to migrant families.	Train staff to adjust intake process to meet client needs, especially for those in crisis. Review forms to ensure response options are as inclusive as possible. Create all of FRCA’s forms in multiple languages. Reconsider what demographic questions are really needed for each questionnaire. Provide opportunities for feedback before, during and after surveys to help strengthen and build relationships with FRCA clients.

Step	Current Challenges	Proposed Solutions
Data collection	<p>Families are currently “providers” of data rather than full participants in the evaluation process. Current methods are not specifically designed to acknowledge existing power imbalances and might inadvertently reinforce patterns of inequity and exclusion.</p> <p>Staff may not have been trained to have conversations that explicitly address race and equity or have been exposed to the culture of the population relevant to the evaluation.</p>	<p>Incorporate cultural sensitivity into data collection tools and procedures (e.g., language translation, add narrative). Train staff on proper use of these tools and procedures.</p> <p>Hire diverse staff to collect data.</p> <p>Ensure staff is available to explain unfamiliar concepts when tools are administered.</p> <p>Standardize procedures for when follow-up occurs and for the number of outreach attempts.</p> <p>Consider incentives for follow-up data collection to increase responses.</p> <p>Find ways to expose the evaluation team to cultures of the community, through conversation, personal development and multicultural training.</p>
Analysis	<p>Biases may be built into the process as a result of the backgrounds and beliefs of those conducting the analysis.</p>	<p>Avoid assuming information.</p> <p>Hire staff from multiple backgrounds and cultures, and use multiple people to interpret the data.</p> <p>Recognize the existence of blind spots and the limitations of quantitative data.</p> <p>Disaggregate data to identify which client groups are experiencing growth or success in achieving goals at lower rates than others.</p> <p>Incorporate analysis of qualitative data to create more complete pictures.</p>
Interpretation	<p>The backgrounds, biases and beliefs of the predominantly white staff will shape its interpretation of data.</p>	<p>Diversify staff.</p> <p>Recognize the value of stories/ anecdotes and cases in interpreting data.</p> <p>Thoroughly investigate and interpret the motives/ variations that led to your results.</p> <p>Engage a variety of stakeholders to examine results and get multiple perspectives on them.</p>
Communication & distribution	<p>Information stays at each center.</p> <p>There is no sharing with families.</p>	<p>Hold follow-up sessions with the families and open community</p>

Step	Current Challenges	Proposed Solutions
	FRCA clients who view these findings should also see the underlying analysis of why these differences exist, and how they might be addressed.	meetings to discuss the impacts of evaluation. Distribute information through a variety of channels.

CONCLUSIONS

Through the feedback processes and subsequent synthesis of information, it is clear that FRCA's evaluation has to go beyond collection of conventional quantitative data; thus, it is important to **recognize the value of stories**, anecdotes and specific cases and take into account social processes and context. One of the first steps in FRCA's equitable evaluation journey is to show commitment through **resource allocation** to build a shared understanding of what it means to practice equitable evaluation; for example, by **investing in staff development** and trainings that make it possible to have conversations to address race and equity.

Funding resources should be invested into **staff support and training opportunities**. Staff members interviewed repeatedly stressed the importance of recruiting and retaining dedicated staff. Staff serve as the hub for information exchange, innovation and communication among all stakeholders so that the evaluation processes can adapt and continue to move toward a diverse, inclusive and equitable approach that considers and serves the community's evolving needs.

Training opportunities: Focus group participants noted that assessment trainings are available. The following opportunities for staff development were also mentioned:

- **EDI training:** Create vetted tools that FRCs can use to apply an EDI lens to every aspect of their operations to transform their culture so all staff and customers feel welcomed, supported, included and valued by staff and each other. Even though this is already part of the FRC staff development, it is important to have ongoing trainings to offer tools, resources and support to help staff build their EDI capacity and increase FRC staff's intercultural development.
- **Wellness services:** Consider delivery of culturally responsive wellness services to staff members to provide them with resources and support to mitigate burnout, minimize day-to-day harms and build resiliency.
- **Financial trainings:** Consider connecting employees to financial training so they are better equipped to support clients.

FRCs may wish to **review their evaluation tools**, including identifying any biases in the questions and orienting them toward social development, health and environmental issues. Look for ways to address barriers such as language, and review questions on demographics and educational attainment that might intimidate some participants. Think about which demographic questions are really needed rather than including a standard set of demographics in every questionnaire. Consider how they will be used for each individual study and what steps will be taken to protect the confidentiality and/or anonymity of respondents.

In addition, look into ways to **ensure that demographic questions are inclusive** enough to capture all potential responses, e.g., to include family structures led by same-

sex couples or grandparents, and to allow identification with more than one response, e.g., with regard to race and ethnicity. Tools for this purpose may include surveys with a multi-select format, allowing participants to check more than one response, and write-in options that allow participants to self-identify as they choose. Respondents may also be given the option of skipping some questions that make them feel uncomfortable; including an explicit option such as “I prefer not to answer this question” could offer helpful insight.

It is important to continually re-evaluate and adapt FRC survey instruments. While there is no perfect way to capture participant identity in a survey, these strategies can simplify the process of crafting inclusive and effective demographic questions.

Additionally, FRCA’s evaluation approach should **be participatory and empowering**. This can be accomplished by increasing the diversity of planning conversations and engaging families to add their valuable voices in the development of evaluation design tools and questions, and in decision-making processes. An equitable evaluation provides families with the tools and resources they might need to be able to be part of the conversation (e.g., translation, childcare and transportation).

When gathering input, **set a common understanding of your vision, principles and goals for the evaluation process**. Community feedback will allow the building of strong relationships that will ensure its EDI foundation. The active participation of the community allows the identification, sharing of the resources already in place, and the exploration of other potential resources. It also creates opportunities for networking.

FRCs can also recognize the integral role of families and be **mindful of differences in culture**, local customs, religious beliefs and practices, personal interaction and gender roles, disability, age and ethnicity; and the potential implications of these differences when planning, carrying out and reporting on evaluations.

An equitable approach **will consider participants’ literacy level**, being respectful of the client’s literacy, reading and comprehension skills, which can be an obstacle in filling out forms. Keep any application processes simple to encourage participation by those who face barriers related to **language, immigration status, literacy, disability**, etc. Staff should be prepared to explain the questions and offer help when needed. It can also be helpful to prompt the client to ask questions during the process.

In addition, recognizing that participants might believe that sharing financial information will affect their opportunity to get services, staff should **explain to participants why their financial data is collected**.

Further, it is necessary to **recognize the existence of blind spots** and the sometimes incomparability in collected data. This is why, particularly in the interpretation of the findings, evaluators need to examine their own backgrounds, beliefs and biases and improve the capability of conducting evaluation using a culturally responsive and racial equity lens.

Finally, it will be important to **discuss evaluation results with the families** who provided the information for the evaluation **and incorporate their perspectives**. This information should be shared using a language and narrative they can understand, and both the FRC staff and clients should discuss the impacts of the evaluation.

Equitable evaluation will help FRCA address the power dynamics that have undervalued the voices, knowledge and capacities of participants, especially those who belong to marginalized groups. Use of the Seven Step Data Equity Framework will help FRCA to develop an evaluation approach that builds on current systems and leverages current strengths, while also acknowledging room for the incorporation of equity into FRCA's evaluation framework to improve equitable access to, engagement in and family outcomes of FRC services.

Next Steps

Specific priorities for FRCA's next steps in aligning its evaluation activities with its understanding of EDI will be established through upcoming meetings with all stakeholders to flesh out the above recommendations and develop concrete plans. However, based on feedback to date, potential to effect significant change, and complexity of implementation, JVA recommends an initial focus on the following:

- Leverage the Program and Evaluation Committee to **think through evaluation questions**; look at the evaluation forms and make sure response options are as inclusive as possible. Standardize procedures for follow-up.
- **Provide opportunities for feedback** before, during and after surveys to help strengthen and build relationships with FRCA clients, and consider incentives for follow-up data collection. **Be aware of power dynamics**: It's great for people across sectors to be at the table together, although there are definitely power dynamics to be aware of. Try to be cognizant of the burden for families to participate, for example, and make sure that others aren't dominating the conversation.
- For solutions to be successful, they will need to **incorporate trusted community organizations and voices**; meet people where they are; ensure low-cost options; be culturally responsive; use simple, straightforward language; and be focused on longer-term strategies.
- **Cultivate personal awareness of cultural frameworks**, assumptions and biases among the staff. Focus on having all members of the team exposed to the culture of the population relevant to the evaluation, through conversation, personal development and multicultural training, which allows the staff to examine their own backgrounds, beliefs and biases and improve their capability to conduct evaluation using a culturally responsive and racial equity lens.

- **Engage client** and/or community input in the evaluation design and decision-making processes.
- **Allocate funds toward hiring additional staff and improving staff support** (training) to ensure FRCA staff are able to successfully receive the messages that subjects of the evaluation are sending.
- **Develop formal policies promoting EDI** for recruitment and hiring of staff, and **hire more diverse staff**. Having diverse staff will create a welcoming environment where participants can develop culturally meaningful relationships. It will help staff to collect evaluation data and help address language barriers. Having employees with diverse backgrounds can also benefit FRCA centers by providing access to different perspectives in the workplace, helping to recognize and address any disparities between staff and those they serve.
- **Develop designs, protocols and tools** that produce evaluation questions capable of teasing out nuances that are now overlooked by FRCA evaluation processes, by incorporating cultural sensitivity into data collection tools and procedures (e.g., language translation, added narrative). Train staff on proper use of these tools and procedures to ensure that instruments used in the evaluation are appropriate for the culture of the people of whom the questions are being asked.

APPENDIX A: SURVEY FINDINGS



Family Resource
Center Association

FRCA Equitable Evaluation *Survey Writeup*

Prepared by Joining Vision and Action (JVA)

www.joiningvisionandaction.com

For Family Resource Center Association

cofamilycenters.org

May, 2021



FRCA EQUITABLE EVALUATION SURVEY

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FRCA EQUITABLE EVALUATION SURVEY

INTRODUCTION

In order to gather feedback on how Family Resource Center Association's (FRCA) screening, referral, assessment and goal-setting steps for participation at a resource center potentially contribute to challenges related to equity, diversity and inclusion for individuals and families seeking resources, an online survey was created and administered to staff at various family resource centers across Colorado. This report contains the findings from this effort.

METHODOLOGY

The online survey listed 15 steps for accessing services at a family resource center and asked respondents to rate each for how it might present a challenge related to equity, diversity and inclusion.¹ The 15 steps were split into two sections, the screening and referral steps, and the assessment and goal-setting steps (Table 1).

Table 1.

Screening and Referral Steps	Assessment and Goal-Setting Steps
The account creation/intake interview process (engaging participants in completing intake forms)	Offering family development (family accepting or declining family development) (if applicable)
The delivery method of the Common Screening Survey (CSS) (introducing CSS to participants, paper version, electronic version, etc.)	The administration of the Colorado Family Support Assessment 2.0 (CFSA) (engaging participants in completing CFSA)
The completion of the Common Screening Survey (engaging participants in completing the CSS)	The CFSA follow-up (not only the follow-up meeting but also how many calls before it is determined participant is not interested anymore)
The needs matching review from the Common Screening Survey (reviewing responses, clarifying with participants and determining what to offer)	The sharing of the CFSA data (reviewing responses, clarifying with participants, and affirming strengths and areas of change)
The service referral process (referring internally or externally to service providers)	The goal creation tools (i.e. Part C, Family Goal Tree, or family development plan)
Availability of service providers	The goal creation decision-making process (participant-led, prioritizing, SMART)

¹ For these items, respondents were given three response options: not at all, a small extent, a large extent.

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Screening and Referral Steps	Assessment and Goal-Setting Steps
The service referral follow-up process (not only the follow-up call but also how many calls before it is determined participant isn't interested anymore)	Goal check-in process (not only the follow-up meeting but also how many calls before it is determined participant isn't interested anymore)
	The service closure process (deciding when to close, communicating closure, etc.)

For each section (equity, diversity and inclusion), respondents were presented with FRCA's working definitions. Each time that survey respondents selected "a small extent" or a "large extent," they were then presented with an open-ended text box where they could explain their answers. These responses can be found in Appendix A.²

A total of 34 responses are included in this report. However, not all 34 of the respondents completed the entire survey. The completion rate for participants who clicked into the survey was 59%.³ Respondents who did not complete the survey are included, because the feedback they provided for items is still of value. As a result, between 22 and 34 respondents rated each item.

FINDINGS

Who We Heard From

Overall, 34 respondents are included in this report. Of the responses, 27 were from individuals who were reached via a direct email effort, and seven clicked into a shared link.

Responses by Resource Center Location

Survey respondents represented a total of 15 different family resource centers. The FRC of the Roaring Fork School District had the most respondents, with a total of nine.

- FRC of the Roaring Fork School District (9)

² Numerous survey participants appear to be referencing portions of the Colorado Family Support Assessment 2.0 (CFSA) for items related to the Common Screening Survey (CSS). This would indicate there was some confusion among survey respondents between the two tools. This has implications for both the interpretation of the survey findings but also the open-ended responses that follow.

³ A total of 37 respondents clicked into the survey. Three did not provide any answers, and 12 did not complete the survey.

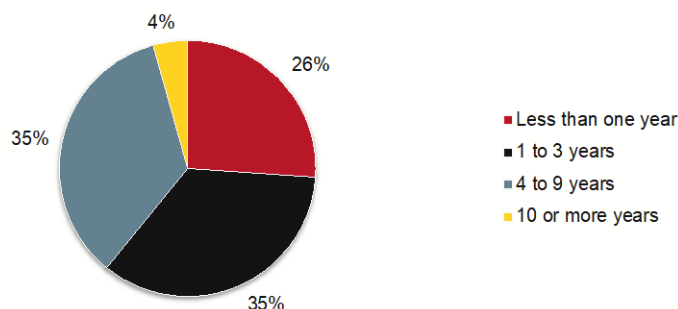
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- Community Partnership Resource Center (3)
- Denver Indian Family Resource Center (3)
- Mountain Resource Center (3)
- Focus Points Family Resource Center (2)
- Sterling Family Resource Center (2)
- Prairie Family Center (2)
- Hilltop (2)
- La Puente Home, Inc. (2)
- Catholic Charities of the Diocese of Pueblo (1)
- Aurora Community Connection (1)
- Mountain Family Center (1)
- Delta County Family Resource Center (1)
- The Family Center/La Familia (1)
- The Piñon Project (1)

How Long Respondents Had Been in their Current Position

Survey respondents were asked how long they had been in their current position. The most common response was one to three years (35%). Only 4% of respondents indicated they had been in their current position for 10 or more years (Figure 1).

Figure 1. Percentage of responses for how long respondents have been in their current position (n = 22)

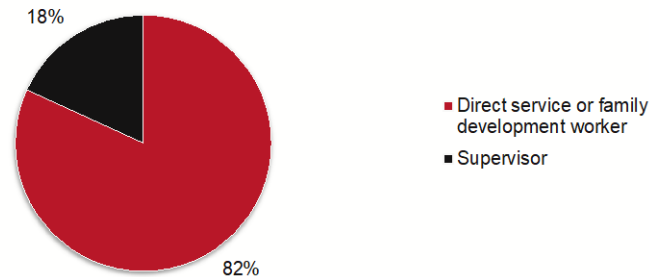
*Respondents by Role*

Survey respondents were also asked about their current role. The majority of respondents (82%) indicated they were involved in direct service or a family development worker (Figure 2).

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Figure 2. Percentage of survey respondents by current role (n = 22)

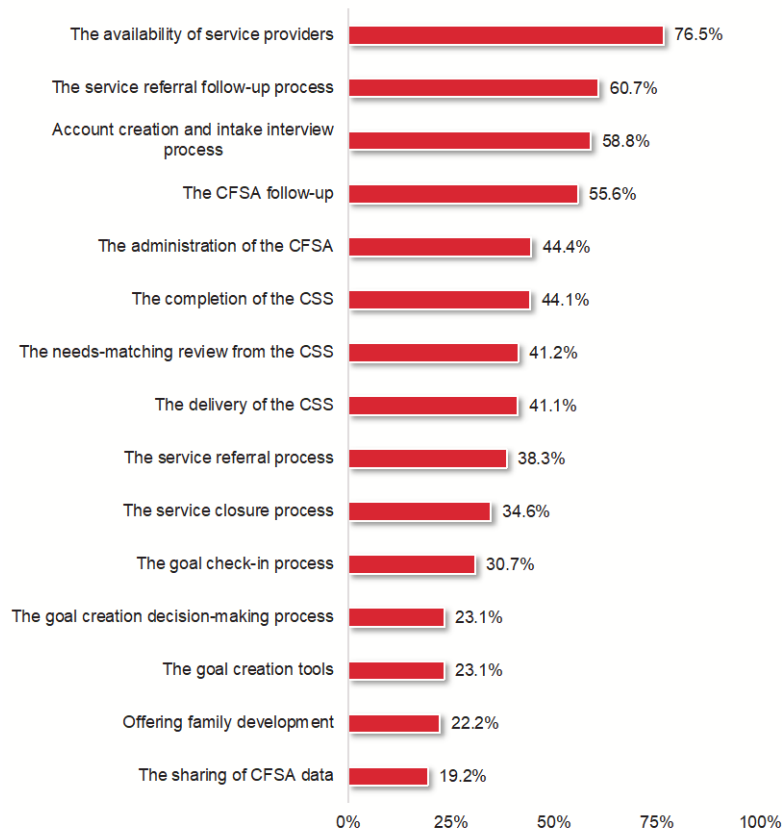


Equity Overall Findings

In an examination of the percentage of responses indicating that any step in accessing services at a resource center may create a barrier for individuals (to either a small or a large extent), the steps with the highest percentage of respondents indicating they could be a barrier were availability of service providers (76%), the service referral follow-up process (60.7%), the account creation and intake interview process (58.8%), and the CFSA follow-up (55%). The goal creation decision-making process (23.1%), the goal creation tools (23.1%), offering family development (22.2%), and the sharing of CFSA data were the items with the lowest percentage of respondents indicating they had the potential to create barriers to accessing services (Figure 3).

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Figure 3. Percentage of survey respondents who indicated each step to accessing services at a resource center could potentially contribute to barriers to accessing services, to either a small or a large extent



Diversity Overall Findings

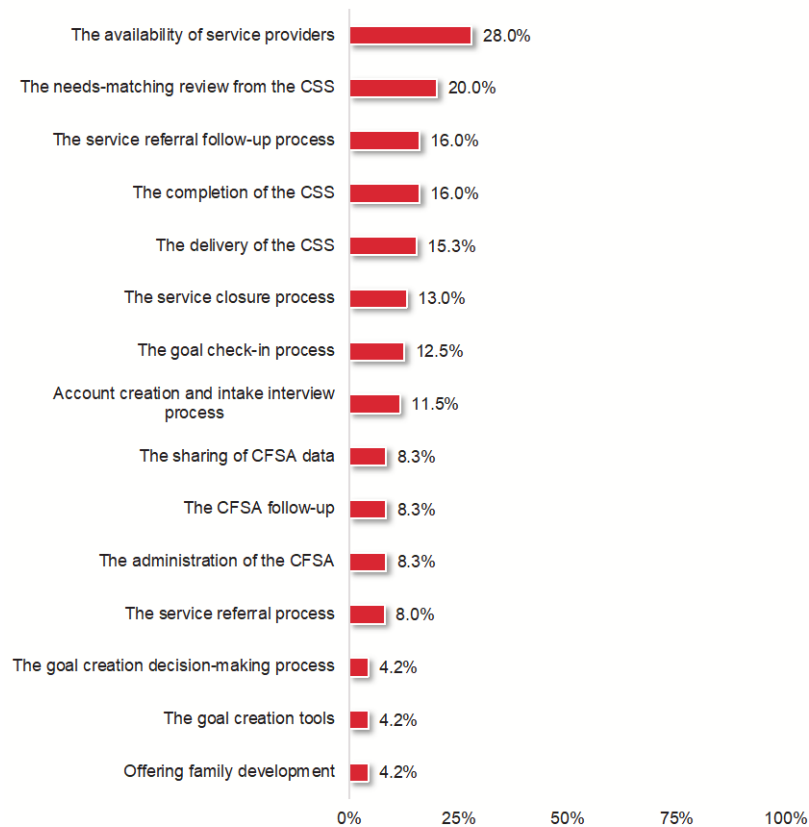
Overall, a lower percentage of survey respondents indicated that the steps to accessing services at a resource center had the potential to make individuals feel their identity was not celebrated or affirmed (diversity), compared with findings for steps having the potential to create a barrier to accessing services (equity). Only the availability of service providers (28%) had more than one-fourth of respondents indicating it potentially contributed a large or small extent to individuals not feeling their identities were celebrated or affirmed. The goal creation decision-making process, the goal creation tools and offering family development had the lowest percentages of respondents

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indicating they had the potential to contribute to individuals not feeling their identity was celebrated or affirmed, with 4.2% each (Figure 4).

Figure 4. Percentage of survey respondents who indicated each step to accessing services at a resource center could potentially contribute to either a small or large extent to individuals not feeling their identities were celebrated or affirmed



Inclusion Overall Findings

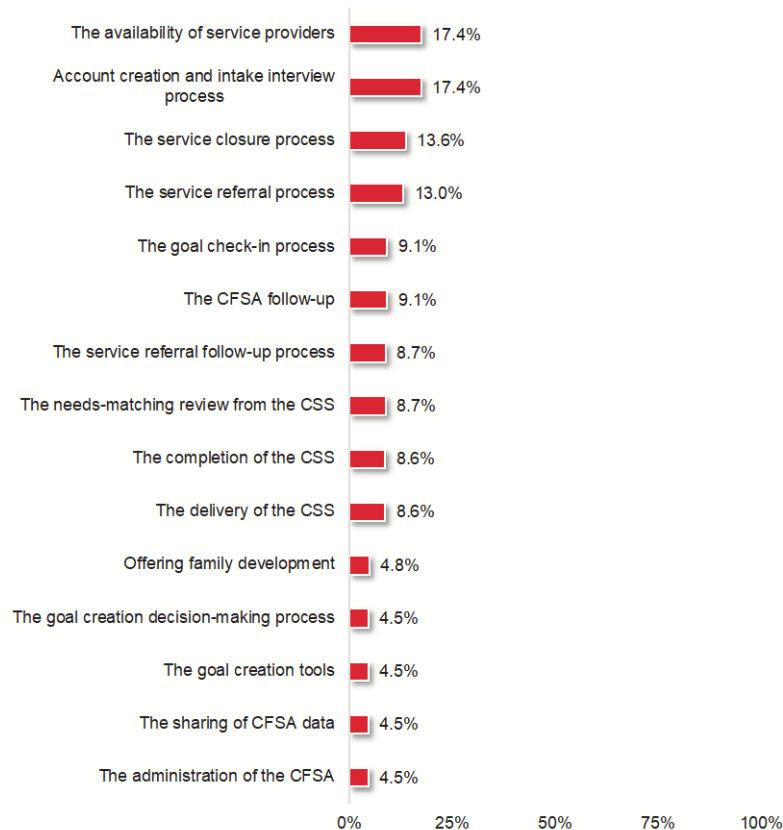
Similarly, the percentage of respondents who indicated that the steps for accessing resources had the potential to contribute to a small or large extent to individuals feeling as though they did not belong (inclusion) was much lower than the percentage who indicated that steps had the potential to present barriers to participation (equity). The availability of service providers and account creation and intake interview process were the most frequently selected items for potentially contributing to individuals feeling they

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do not belong, with 17.4% each. The goal creation tools, the goal creation decision-making, the administration of the CFSA and the sharing of CFSA data were the items selected the least frequently for potentially contributing to individuals feeling as though they do not belong (Figure 5).

Figure 5. Percentage of survey respondents who indicated each step to accessing services at a resource center could potentially contribute, to either a small or large extent, to individuals not feeling a sense of belonging



The Account Creation and Intake Interview Process

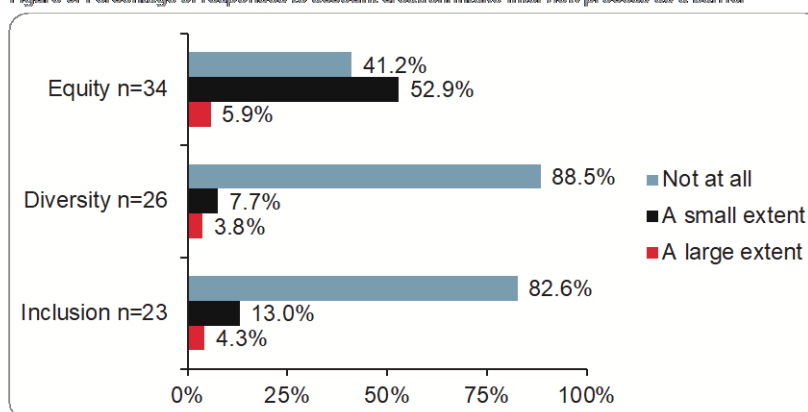
Examining responses to survey items related to the account creation and intake interview process reveals the following trends (Figure 6):

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- **Equity:** A total of 58.8% (5.9% a large extent and 52.9% a small extent) of survey respondents indicated the account creation and intake interview process had the potential to create a barrier to participating in services.
- **Diversity:** A total of 11.5% (3.8% a large extent and 7.7% a small extent) of survey respondents indicated the account creation and intake interview process had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 17.3% (4.3% a large extent and 13.0% a small extent) of survey respondents indicated the account creation and intake interview process had the potential to contribute to making individuals not feel a sense of belonging.

Figure 6. Percentage of responses to account creation/intake interview process as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the account creation and intake interview process had the potential to create a barrier to access noted:

- Clients may be reluctant to fill out forms or share information about themselves
- There are a limited number of Spanish-speaking life coaches available, and the forms are in English only
- The time it takes to fill out necessary paperwork
- Their center is still learning how to create accounts in FRCA Force
- A lack of funding for intake staff

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- Clients in crisis may feel there is a disconnect between questions on intake and their crisis

Respondents who indicated the account creation and intake interview process had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- That gender and sexual identity should be honored in the intake form

Respondents who indicated the account creation and intake interview process had the potential to make individuals not feel a sense of belonging noted:

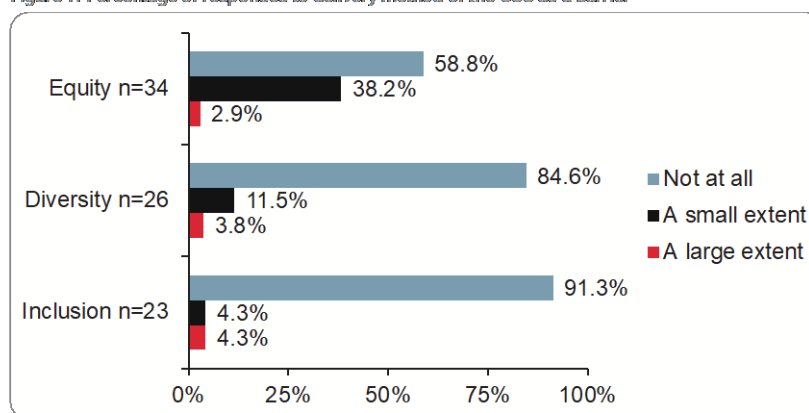
- The need to make families feel as though they are not just “part of the data” but that the center would like to know them better
- The need for more culturally diverse staff

The Delivery of the CSS

Examining responses to survey items related to the delivery of the Common Screening Survey (CSS) reveals the following trends (Figure 7):

- **Equity:** A total of 41.1% (2.9% a large extent and 38.2% a small extent) of survey respondents indicated the delivery of the CSS had the potential to create a barrier to participating in services.
- **Diversity:** A total of 15.3% (3.8% a large extent and 11.5% a small extent) of survey respondents indicated the delivery of the CSS had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 8.6% (4.3% a large extent and 4.3% a small extent) of survey respondents indicated the delivery of the CSS had the potential to contribute to making individuals not feel a sense of belonging.

Figure 7. Percentage of responses to delivery method of the CSS as a barrier



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Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the delivery of the CSS had the potential to create a barrier to access noted:

- The time required for clients to complete the CSS can be difficult for clients
- There is no electronic version of the CSS, and there can be inconsistencies between answers given on paper versions vs. intake done over the phone
- The CSS is only in English
- Some clients may not receive the CSS mailed to their home

Respondents who indicated the delivery of the CSS had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- There is not an electronic version of the CSS

Respondents who indicated the delivery of the CSS had the potential to make individuals not feel a sense of belonging noted:

- For parents who have lost custody of their children, answering the questions specific to their child protective factors can be challenging

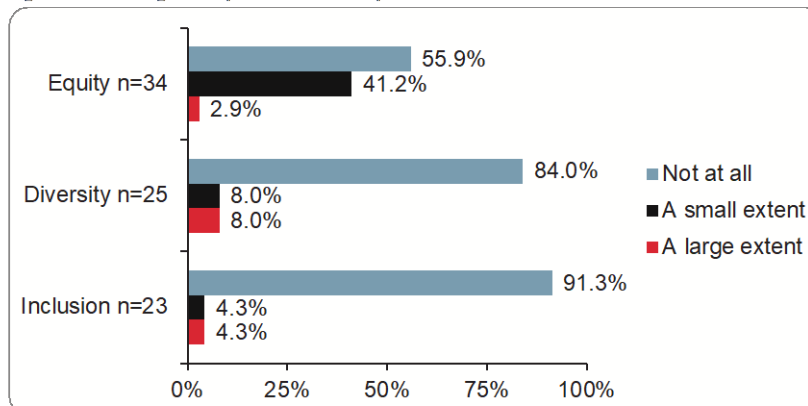
The Completion of the CSS

Examining responses to survey items related to the completion of the CSS reveals the following trends (Figure 8):

- **Equity:** A total of 44.1% (2.9% a large extent and 41.2% a small extent) of survey respondents indicated the completion of the CSS had the potential to create a barrier to participating in services.
- **Diversity:** A total of 16.0% (8.0% a large extent and 8.0% a small extent) of survey respondents indicated the completion of the CSS had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 8.6% (4.3% a large extent and 4.3% a small extent) of survey respondents indicated the completion of the CSS had the potential to contribute to making individuals not feel a sense of belonging.

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Figure 8. Percentage of responses to the completion of the CSS as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the completion of the CSS had the potential to create a barrier to access noted:

- Some of the questions may feel too personal for clients or clients do not know how to answer some of the questions
- The CSS not being in Spanish or available digitally
- Some questions, particularly around educational attainment, can be intimidating to migrant families

Respondents who indicated the completion of the CSS had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- Demographic questions do not go beyond the standard groups; questions on indigenous group, tribe and dialect spoken are not collected

Respondents who indicated the completion of the CSS had the potential to make individuals not feel a sense of belonging noted:

- Some of the concepts asked may be foreign to migrant families served

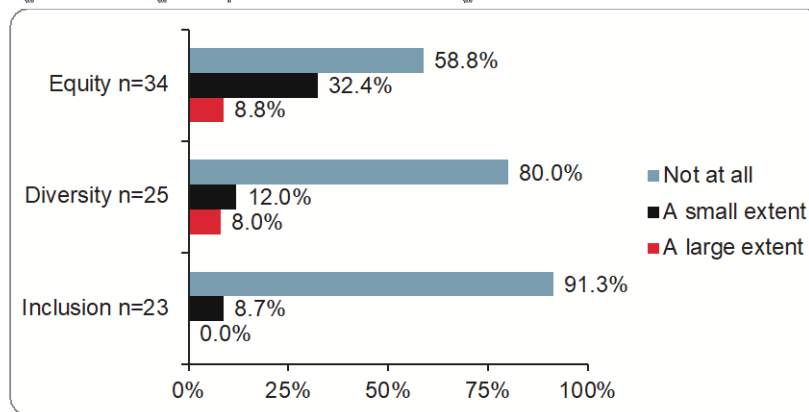
The Needs-Matching Review from the CSS

Examining responses to survey items related to the needs-matching review from the CSS reveals the following trends (Figure 9):

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- **Equity:** A total of 41.2% (8.8% a large extent and 32.4% a small extent) of survey respondents indicated the needs-matching review from the CSS had the potential to create a barrier to participating in services.
- **Diversity:** A total of 20.0% (8.0% a large extent and 12.0% a small extent) of survey respondents indicated the needs-matching review from the CSS had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 8.7% (all 8.7% choosing a small extent) of survey respondents indicated the needs-matching review from the CSS had the potential to contribute to making individuals not feel a sense of belonging.

Figure 9. Percentage of responses to the needs-matching review from the CSS as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the needs-matching review from the CSS had the potential to create a barrier to access noted:

- Clients may not want to accept services
- Time constraints as a result of being understaffed
- Questions on housing are too vague, as the concept of homelessness does not exist or is very different for some migrant families

Respondents who indicated the needs-matching review from the CSS had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- Some clients may feel they are being called due to having indicated a deficit
- Some questions are not applicable to all groups being served

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- The CSS and all steps can feel like paperwork and lose a personal or human touch

Respondents who indicated the needs-matching review from the CSS had the potential to make individuals not feel a sense of belonging noted:

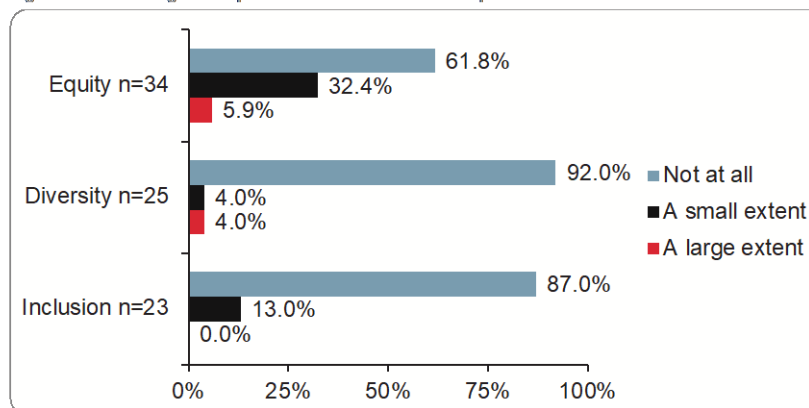
- The initial survey is often seen as more of a requirement and it takes time for families to build trust with centers

The Service Referral Process

Examining responses to survey items related to the service referral process reveals the following trends (Figure 10):

- **Equity:** A total of 38.3% (5.9% a large extent and 32.4% a small extent) of survey respondents indicated the service referral process had the potential to create a barrier to participating in services.
- **Diversity:** A total of 8.0% (4.0% a large extent and 4.0% a small extent) of survey respondents indicated the service referral process had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 13.0% (all 13.0% choosing a small extent) of survey respondents indicated the service referral process had the potential to contribute to making individuals not feel a sense of belonging.

Figure 10. Percentage of responses to the service referral process as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the service referral process had the potential to create a barrier to access noted:

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- Availability and affordability of service providers
- There is red tape around programs and referrals that can make some situations difficult
- Most referral resources are in English
- Being understaffed makes it difficult to meet with all the individuals who need services

No respondents provided a response to the open-ended question on how the service referral process had the potential to make individuals feel their identity was not celebrated and affirmed.

Respondents who indicated the service referral process had the potential to make individuals not feel a sense of belonging noted:

- Participants are sometimes ineligible to receive assistance from certain organizations

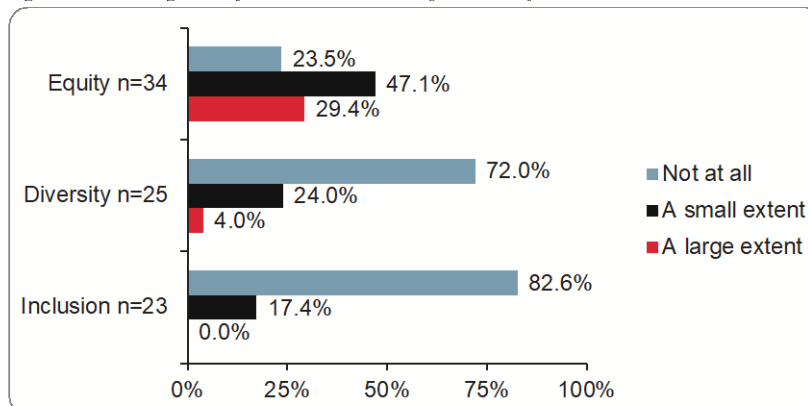
The Availability of Service Providers

Examining responses to survey items related to the availability of service providers reveals the following trends (Figure 11):

- **Equity:** A total of 76.5% (29.4% a large extent and 47.1% a small extent) of survey respondents indicated the availability of service providers had the potential to create a barrier to participating in services.
- **Diversity:** A total of 28.0% (4.0% a large extent and 24.0% a small extent) of survey respondents indicated the availability of service providers had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 17.4% (all 17.4% choosing a small extent) of survey respondents indicated the availability of service providers had the potential to contribute to making individuals not feel a sense of belonging.

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Figure 11. Percentage of responses to the availability of service providers as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the availability of service providers had the potential to create a barrier to access noted:

- External providers are not always available in a timely manner
- Lack of services in rural areas and the travel required to get some services only available in urban areas
- Limited Spanish-speaking service providers
- Staff turnover limiting services available to the community

Respondents who indicated the availability of service providers had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- Lack of Spanish-speaking advocates
- Binary gender options on the forms may make some feel as though services are not available to them
- Accessing services can be difficult as a result of services being underfunded or overwhelmed

Respondents who indicated the availability of service providers had the potential to make individuals not feel a sense of belonging noted:

- Difficulty in accessing services

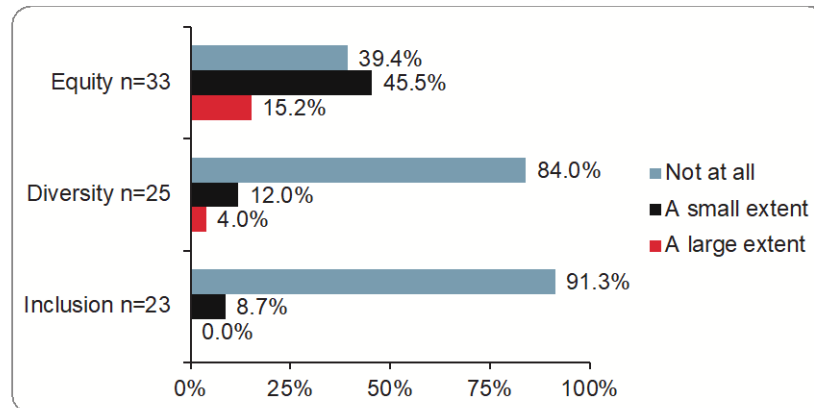
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The Service Referral Follow-up Process

Examining responses to survey items related to the service referral follow-up process reveals the following trends (Figure 12):

- **Equity:** A total of 60.7% (15.2% a large extent and 45.5% a small extent) of survey respondents indicated the service referral follow-up process had the potential to create a barrier to participating in services.
- **Diversity:** A total of 16.0% (4.0% a large extent and 12.0% a small extent) of survey respondents indicated the service referral follow-up process had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 8.7% (all 8.7% choosing a small extent) of survey respondents indicated the service referral follow-up process had the potential to contribute to making individuals not feel a sense of belonging.

Figure 12. Percentage of responses to the service referral follow-up process as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the service referral follow-up process had the potential to create a barrier to access noted:

- Follow-up can take time and energy away from other more interested participants
- The time required of staff to do follow-ups
- Participants cannot afford cell phone service and reaching them can be difficult
- Follow-up calls can feel invasive for some clients

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Respondents who indicated the service referral follow-up process had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- Initial engagement is crucial

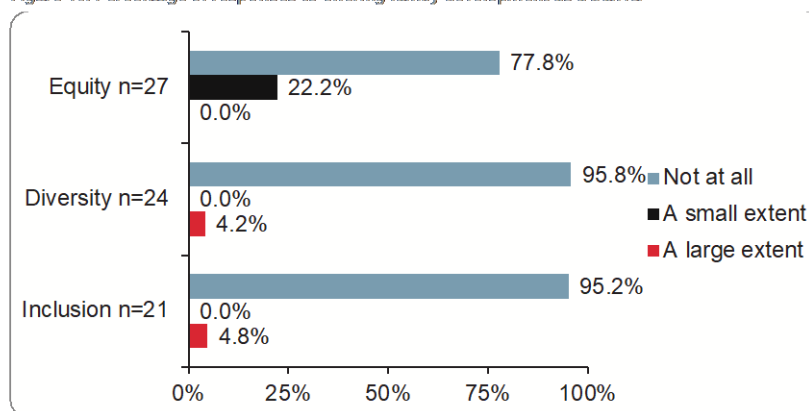
No responses were provided to the open-ended question for how the service referral follow-up process had the potential to make individuals not feel a sense of belonging.

Offering Family Development

Examining responses to survey items related to offering family development reveals the following trends (Figure 13):

- **Equity:** A total of 22.2% (all 22.2% choosing a small extent) of survey respondents indicated that offering family development had the potential to create a barrier to participating in services.
- **Diversity:** A total of 4.2% (all 4.2% choosing a large extent) of survey respondents indicated that offering family development had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 4.8% (all 4.8% choosing a large extent) of survey respondents indicated that offering family development had the potential to contribute to making individuals not feel a sense of belonging.

Figure 13. Percentage of responses to offering family development as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated that offering family development had the potential to create a barrier to access noted:

- Limited Spanish-speaking staff

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- Challenges related to funding and staffing

No responses were provided to the open-ended question on how offering family development had the potential to make individuals feel their identity was not celebrated and affirmed.

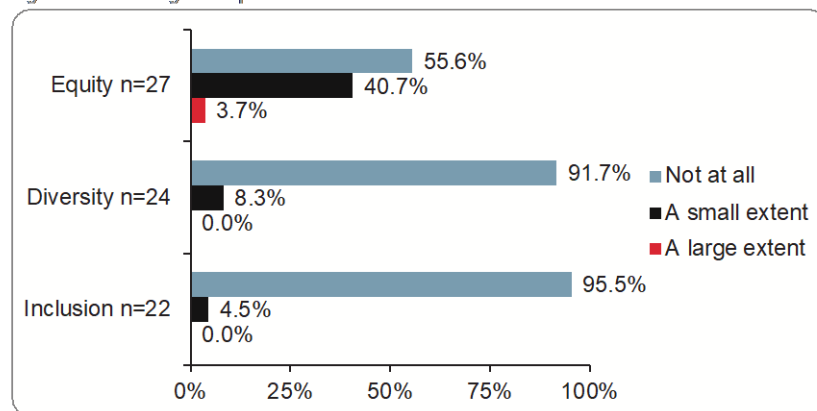
No responses were provided to the open-ended question on how offering family development had the potential to make individuals not feel a sense of belonging.

The Administration of the Colorado Family Support Assessment

Examining responses to survey items related to the administration of the Colorado Family Support Assessment (CFSA) reveals the following trends (Figure 14):

- **Equity:** A total of 44.4% (3.7% a large extent and 40.7% a small extent) of survey respondents indicated the administration of CFSA had the potential to create a barrier to participating in services.
- **Diversity:** A total of 8.3% (all 8.3% choosing a small extent) of survey respondents indicated the administration of the CFSA had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 4.5% (all 4.5% indicating a small extent) of survey respondents indicated the administration of the CFSA had the potential to contribute to making individuals not feel a sense of belonging.

Figure 14. Percentage of responses to the administration of the CFSA as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who

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indicated the administration of the CFSA had the potential to create a barrier to access noted:

- Transportation barriers
- Unfamiliarity with domains requires specialists to explain concepts in a family-friendly way
- The COVID-19 pandemic has affected ability to meet and make connections
- The assessment can be overwhelming to clients in crisis
- Some questions are personal, and clients do not like disclosing some information
- Lack of Spanish-speaking staff

Respondents who indicated the administration of the CFSA had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- Some families may find questions to be invasive

No responses were provided to the open-ended question on why the administration of the CFSA had the potential to make individuals not feel a sense of belonging.

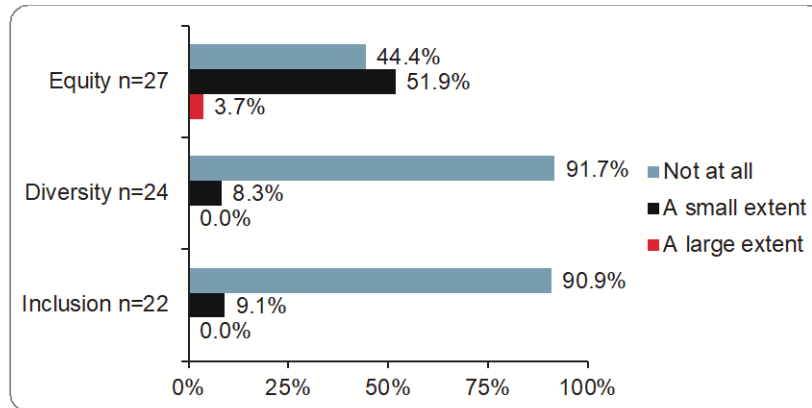
The CFSA Follow-up

Examining responses to survey items related to the CFSA follow-up reveals the following trends (Figure 15):

- **Equity:** A total of 55.6% (3.7% a large extent and 51.9% a small extent) of survey respondents indicated the CFSA follow-up had the potential to create a barrier to participating in services.
- **Diversity:** A total of 8.3% (all 8.3% choosing a small extent) of survey respondents indicated the CFSA follow-up had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 9.1% (all 9.1% choosing a small extent) of survey respondents indicated the CFSA follow-up had the potential to contribute to making individuals not feel a sense of belonging.

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Figure 15. Percentage of responses to CFSA follow-up as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the CFSA follow-up had the potential to create a barrier to access noted:

- The 90-day timeline can be a barrier
- Clients often disengage before the follow-up can happen
- Getting hold of clients can be challenging
- The communication with clients after the CFSA has been administered can make it hard to determine when to do the follow-up
- Safety measures and challenges from the COVID-19 pandemic

Respondents who indicated the CFSA follow-up had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- Getting hold of clients can be a challenge

Respondents who indicated the CFSA follow-up had the potential to make individuals not feel a sense of belonging noted:

- Getting hold of clients can be a challenge

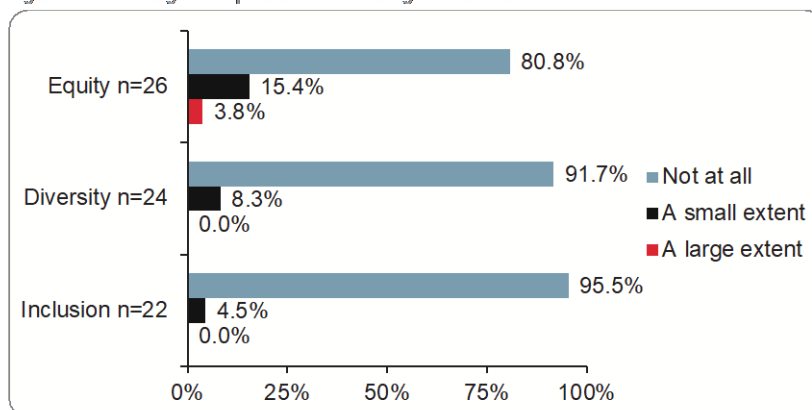
The Sharing of CFSA Data

Examining responses to survey items related to the sharing of CFSA data reveals the following trends (Figure 16):

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- **Equity:** A total of 19.2% (3.8% a large extent and 15.4% a small extent) of survey respondents indicated the sharing of CFSA data had the potential to create a barrier to participating in services.
- **Diversity:** A total of 8.3% (all 8.3% choosing a small extent) of survey respondents indicated the sharing of CFSA data had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 4.5% (all 4.5% choosing a small extent) of survey respondents indicated the sharing of CFSA data had the potential to contribute to making individuals not feel a sense of belonging.

Figure 16. Percentage of responses to the sharing of CFSA data as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the sharing of CFSA data had the potential to create a barrier to access noted:

- Unfamiliarity with concepts to families
- Lack of diversity on center staff

Respondents who indicated the sharing of CFSA data had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- It can take good motivational interview skills to make participants feel they are truly part of the process and not just a case

No responses were given to the open-ended question on how the sharing of CFSA data had the potential to make individuals not feel a sense of belonging.

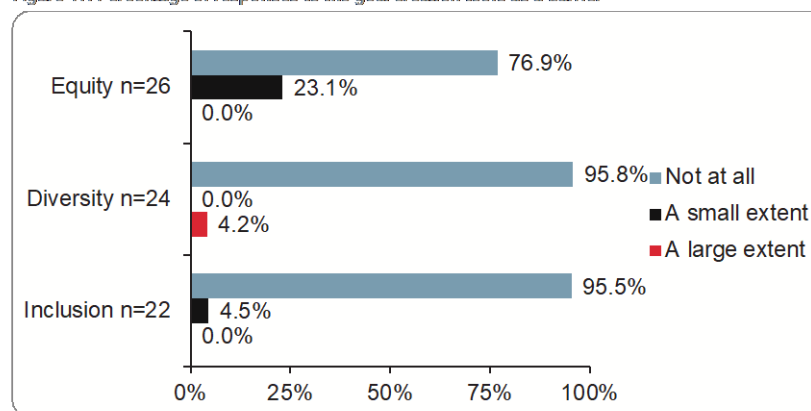
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The Goal Creation Tools

Examining responses to survey items related to the goal creation tools reveals the following trends (Figure 17):

- **Equity:** A total of 23.1% (all 23.1% choosing a small extent) of survey respondents indicated the goal creation tools had the potential to create a barrier to participating in services.
- **Diversity:** A total of 4.2% (all 4.2% choosing a large extent) of survey respondents indicated the goal creation tools had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 4.5% (all 4.5% choosing a small extent) of survey respondents indicated the goal creation tools had the potential to contribute to making individuals not feel a sense of belonging.

Figure 17. Percentage of responses to the goal creation tools as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the goal creation tools had the potential to create a barrier to access noted:

- The pressure for some clients can create some anxiety
- Some clients need to keep it simple

No responses were given to the open-ended question on how the goal creation tools had the potential to make individuals feel their identity was not celebrated and affirmed.

No responses were given to the open-ended question on how the goal creation tools had the potential to make individuals not feel a sense of belonging.

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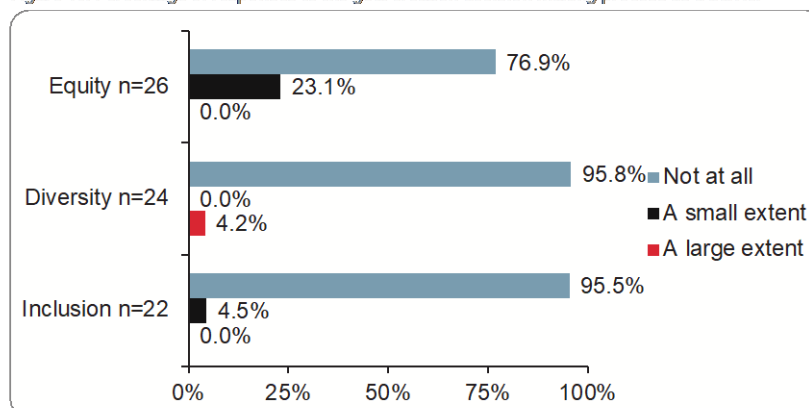
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The Goal Creation Decision-Making Process

Examining responses to survey items related to the goal creation decision-making process reveals the following trends (Figure 18):

- **Equity:** A total of 23.1% (all 23.1% choosing a small extent) of survey respondents indicated the goal creation decision-making process had the potential to create a barrier to participating in services.
- **Diversity:** A total of 4.2% (all 4.2% choosing a large extent) of survey respondents indicated the goal creation decision-making process had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 4.5% (all 4.5% choosing a small extent) of survey respondents indicated the goal creation decision-making process had the potential to contribute to making individuals not feel a sense of belonging.

Figure 18. Percentage of responses to the goal creation decision-making process as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the goal creation decision-making process had the potential to create a barrier to access noted:

- Cultural differences may play a part in clients being comfortable and trusting staff
- Determining priorities can take time for families, and some may only be able to focus on immediate needs

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No responses were given to the open-ended question on how the goal creation decision-making process had the potential to make individuals feel their identity was not celebrated and affirmed.

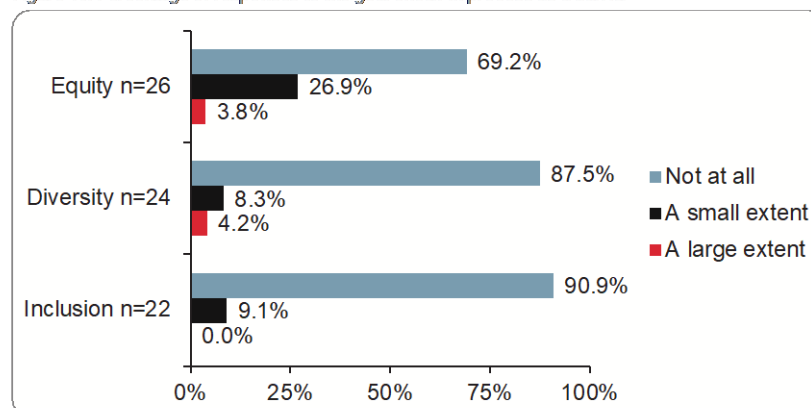
No responses were given to the open-ended question on how the goal creation decision-making process had the potential to make individuals not feel a sense of belonging.

The Goal Check-in Process

Examining responses to survey items related to the goal check-in process reveals the following trends (Figure 19):

- **Equity:** A total of 30.7% (3.8% a large extent and 26.9% a small extent) of survey respondents indicated the goal check-in process had the potential to create a barrier to participating in services.
- **Diversity:** A total of 12.5% (4.2% a large extent and 8.3% a small extent) of survey respondents indicated the goal check-in process had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 9.1% (all 9.1% choosing a small extent) of survey respondents indicated the goal check-in process had the potential to contribute to making individuals not feel a sense of belonging.

Figure 19. Percentage of responses to the goal check-in process as a barrier



Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the goal check-in process had the potential to create a barrier to access noted:

- Clients can still feel pressured and may disengage

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- Getting hold of clients for a follow-up can be difficult
- Best practice guidance for this does not exist

Respondents who indicated the goal check-in process had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- Clients may not answer or return calls

Respondents who indicated the goal check-in process had the potential to make individuals not feel a sense of belonging noted:

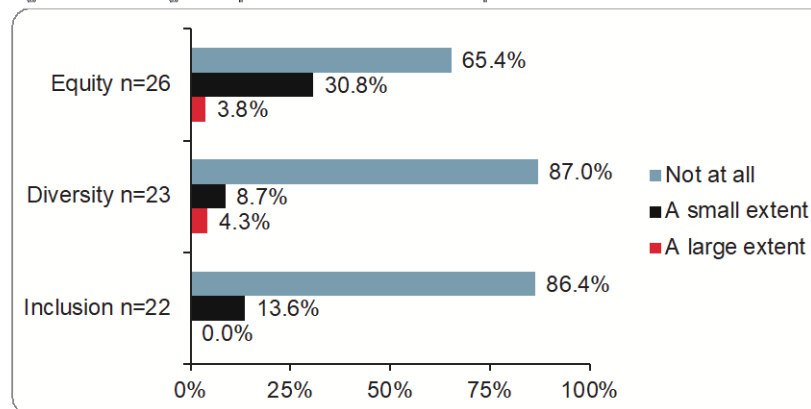
- Clients may not answer or return calls

The Service Closure Process

Examining responses to survey items related to the service closure process reveals the following trends (Figure 20):

- **Equity:** A total of 34.6% (3.8% a large extent and 30.8% a small extent) of survey respondents indicated the service closure process had the potential to create a barrier to participating in services.
- **Diversity:** A total of 13.0% (4.3% a large extent and 8.7% a small extent) of survey respondents indicated the service closure process had the potential to make individuals feel their identities were not celebrated and affirmed.
- **Inclusion:** A total of 13.6% (all 13.6% choosing a small extent) of survey respondents indicated the service closure process had the potential to contribute to making individuals not feel a sense of belonging.

Figure 20. Percentage of responses to the service closure process as a barrier



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Respondents who selected either "a small extent" or "a large extent" were provided an opportunity to explain their answers via an open-ended text box. Respondents who indicated the service closure process had the potential to create a barrier to access noted:

- The service closure can be a source of anxiety for clients, and they may not want to close services
- Getting hold of clients can be challenging

Respondents who indicated the service closure process had the potential to make individuals feel their identity was not celebrated and affirmed noted:

- The closure process is an internal call; leaving the door open to clients makes them feel welcome

Respondents who indicated the service closure process had the potential to make individuals not feel a sense of belonging noted:

- Getting hold of clients can be a challenge
- A lack of engagement skills for staff. There is a need for training to be able to teach staff how to connect and communicate effectively in order to meet people where they are at.³

How Head of Household is Determined

Survey respondents were asked how head of household is determined at their center. The most frequent response was that head of household is determined by who comes to the center to access resources (10). Other responses include:

- By who the client indicates is the head of household (4)
- By who receives the primary source of income in the household (3)
- By the primary caregiver (1)

Suggestions for Making Service Delivery More Equitable

Survey respondents were asked what their suggestions were for making service delivery more equitable. The most common response was additional training (4). This included training on communication techniques and training on equity, diversity and inclusion. Other responses included:

³ This comment seemed to be a general comment on challenges experienced and not specific to the service closure process.

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- More staff diversity (2)
- More language translation or materials in languages other than English (2)
- Additional funding (1)
- Treating clients with respect and dignity regardless of their circumstances (1)
- More flexible timelines for the assessments, as they do not always align with the relationship building that takes place (1)
- Equitable staff pay (1)
- More cultural sensitivity in data collection procedures (i.e., not all items are relevant, particularly for migrant families) (1)

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APPENDIX A: OPEN-ENDED RESPONSE FOR SURVEY ITEMS⁵

Table 2. Open-ended question responses for ways in which the account creation/intake forms create a barrier for participation at a resource center

Account Creation and Intake Survey Form – Equity
Some clients are reluctant to fill out forms.
Limited Spanish-speaking life coaches available
Intake forms are uncomfortable to potential clients for various reasons. It could be due to them just not wanting to share personal info and it also can be simply because they do not like filling out paperwork. We do our best to help them feel comfortable and supported through this process of intake.
Sometimes people do not want to take time to fill out the paperwork.
Our center is still learning how to successfully create accounts for families in FRCA Force.
Time, staffing, emergency service needs in community (COVID and 2nd-largest CO wildfire= higher demands and services), funding
The intake process is lengthy and requires considerable time in person to complete; completing over the phone during COVID takes longer; and not all information seems relevant or helpful for us to track.
Families need center services, not necessarily family development. We don't have dedicated funding to fully support intake staff. We feel a lack of consistency and predictability of intake, as different staff have different strengths/skills and time commitment to center service work.
We explain to families that the data and demographics collected is confidential and they can answer as much as they want to share. When families come here for the first time we talk to them first and then we tell them we can do a basic intake form so we can continue helping them. Just the idea of data collection makes them anxious sometimes, but we tell them that we want to know them better.
Sometimes when clients are in crisis it can be difficult for them to answer questions that they feel like "have nothing to do with what I am going through right now."
Intake forms in English only

⁵ It is worth noting that several comments throughout this appendix in items relating to the Common Screening Survey (CSS) appear to be referencing portions of the Colorado Family Support Assessment 2.0 (CFSA). This should be kept in mind while reviewing comments listed here in the appendix.

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Account Creation and Intake Survey Form – Equity

I am skilled at engaging people. Once in a while I run into someone who is highly suspicious and prefers to obtain services without completing intake forms. This isn't overly common but does happen several times a year.

Some families do not like completing forms and giving out their information.

Table 3. Open-ended question responses for ways the account creation and intake interview process has the potential to make individuals feel their identity is not celebrated and affirmed

Account Creation and Intake Survey Form – Diversity

Gender identity and sexual identity should be honored in the intake form. Pronouns, identities, etc.

Table 4. Open-ended question responses for ways the account creation process has the potential to make individuals not feel a sense of belonging

Account Creation/Intake Survey Form – Inclusion

Clients sometimes do not want to fill out the forms.

We need to be careful not to make families feel they are part of the data but really change the narrative to "we would like to know you better."

It would be helpful to have a more culturally diverse staff.

Delivery of the CSS

Table 5. Open-ended question responses for ways in which the delivery of the CSS creates a barrier for participation at a resource center

The Delivery of the CSS – Equity

We offer paper and electronic versions of the common screening and try our best to accommodate client needs, but the time and sometimes difficulty for clients to do this can still present a barrier at times.

Time, staffing, high demand on service days because of emergent events in our community

Paper version may not always give a full picture, often different answers for recorded answers vs. verbal answers

Programs require multiple levels of intake paperwork in addition to CSS. Can negatively impact participants. Some participants do not want to fill out CSS, just want the assistance.

We do not provide an electronic version to our families. We do it over the phone or in person.

They say to mail it to their home, and they may never get it.

CSS in English only

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Table 6. Open-ended question responses for ways the delivery of the CSS has the potential to make individuals feel their identity is not celebrated and affirmed

The Delivery of the CSS – Diversity

We do not share an e-version with our families.

Table 7. Open-ended question responses for ways the delivery of the CSS has the potential to make individuals not feel a sense of belonging

The Delivery of the CSS – Inclusion

It can be difficult when working with a parent who has lost custody of their children to answer some of the questions specific to their children-protective factors portion of assessment.

The Completion of the CSS

Table 8. Open-ended question responses for ways in which the completion of the CSS creates a barrier for participation at a resource center

The Completion of the CSS – Equity

There are some questions are might feel too personal for clients.

Sometimes people do not want to take time to fill out the paperwork.

Sometimes participants have a hard time knowing the answer to some questions.

Some is lack of willingness on client part; sometimes we have so many people to serve because of community emergencies this last year, timing and staffing and funding.

Some parts of the common screening

Spanish translation is imperative. Currently use language line, available staff from other programs. Would like dedicated funding for written digital translation

Some questions just get answered as we engage with the family. We never ask them their level of studies (GED) because that is intimidating to migrant families.

Some say they never received it, or that they will do it when they get home and never do.

Table 9. Open-ended question responses for ways the completion of the CSS has the potential to make individuals feel their identity is not celebrated and affirmed

Completion of the CSS – Diversity

Sometimes people do not want to fill out the form.

Individual demographics are standard, but if we really want to map our communities we need to collect indigenous group, tribe, dialect spoken, etc.

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Table 10. Open-ended question responses for ways the completion of the CSS has the potential to make individuals not feel a sense of belonging

Completion of the CSS – Inclusion

Again, some concepts may be foreign to many of the migrant families we serve. The concept of social services is different. It is a community-driven approach more than an individualistic one.

Needs Matching Review from CSS

Table 11. Open-ended question responses for ways in which the needs matching review from CSS creates a barrier for participation at a resource center

Needs Matching Review from CSS – Equity

Some clients do not want to accept services; that can be a barrier.

Time constraints due to being short-staffed.

Sometimes it's hard to determine if the participant needs help/referrals to meet the need or if it's something they are already working on.

Fairly easy to outline and provide internal and external referrals

The question about housing is too vague. For migrant families, the concept of homelessness does not exist. As long as they have a place to sleep does not make them feel like they are homeless. This is a cultural concept. Most of the times families will not tell you the whole story during the initial intake.

Table 12. Open-ended question responses for ways the needs matching review from CSS has the potential to make individuals feel their identity is not celebrated and affirmed

Needs Matching Review from CSS – Diversity

May make clients feel that they are being called because they indicated a "deficit." I have not experienced that often.

Similar to the other response, some questions are not applicable to the group we are serving.

I treat the CSS as a conversation, although the participant completes the form themselves. Connecting with people instead of handing them papers to complete or Q&A is much more effective. It takes longer, but it's worth it and reduces disengagement.

Table 13. Open-ended question responses for ways the needs matching review from the CSS has the potential to make individuals not feel a sense of belonging

Needs Matching Review from CSS – Inclusion

Once families feel confident and trust us, they open up more, but this has nothing to do with the initial survey, which is seen more like a requirement.

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The Service Referral Process

Table 14. Open-ended question responses for ways in which the account creation/intake forms create a barrier for participation at a resource center

The Service Referral Process – Equity

I am newer to the programs so I am not sure; it seems there is some red tape around programs and referrals that can make some situations difficult.

External

We are currently short-staffed, so we are stretched thin to meet with all the individuals who need services.

Responding with the ongoing need for residential substance abuse treatment. Locating affordable openings for admission is difficult.

If a provider is not available it can create more of a process than anticipated.

Predominantly English-speaking referral resources in the foothills

At times the turnaround is too long

Table 15. Open-ended question responses for ways the service referral process has the potential to make individuals feel their identity is not celebrated and affirmed

The Service Referral Process – Diversity

No open-ended responses were provided

Table 16. Open-ended question responses for ways the service referral process has the potential to make individuals not feel a sense of belonging

The Service Referral Process – Inclusion

Not all participants are eligible to receive assistance from certain organizations.

Availability of Service Providers

Table 17. Open-ended question responses for ways in which the availability of service providers creates a barrier for participation at a resource center

Availability of Service Providers – Equity

External service providers are not always available or (are) not available in a timely manner.

We are very rural and don't have access to all services as you might in a more urban setting. Travel also creates barriers.

Such limited Spanish-speaking mental health providers in our community

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Availability of Service Providers – Equity

Recently have had some turnover, so service providers weren't as available. We have new hires, which should help with this.

There is a high need for services ... things like rent and food assistance are taking double to triple the amount of time to be processed and ... received by participants.

Sterling is a small community; there are not a lot of services here.

Some service providers aren't reachable when (we) refer participant out.

Not very many service providers, and the ones existing are always overwhelmed

There is a great lack of resources in our community when considering the needs we are seeing.

Limited because of COVID and wildfire needs (services outside of our offices)

There is not a wide availability of service providers.

Residential substance abuse agencies

Limited capacity for housing, mental health (psychiatric, ABA, and autism assistance specifically) and increased requests for food access

Depends on what services are needed

I have attempted to contact some of our community partners to speak to them about funding options and they never answer me.

It can't be guaranteed other service providers will be available timely.

There is a great deal of need and very few resources.

Service providers in foothills predominantly speak English only.

Resources are scarce. ... Those that are here are often underfunded and/or difficult to access (transportation/distance).

Table 18. Open-ended question responses for ways the availability of service providers has the potential to make individuals feel their identity is not celebrated and affirmed

Availability of Service Providers – Diversity

Lack of Spanish-speaking advocate can create a barrier, although we do have a Spanish-speaking staff member to help fill this gap.

Sterling has limited resources.

Some service providers are hard to reach when participants are referred out to them.

Depends on the needs. If LGBTQ+ people do not see their gender in the form are they going to assume services for them may not be available?

There isn't a lot of diversity of services here (Western Slope). Services are often underfunded and difficult to access.

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Table 19. Open-ended question responses for ways the availability of service providers has the potential to make individuals not feel a sense of belonging

Availability of Service Providers – Inclusion

Sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

Again, services on the Western Slope can be scarce, underfunded, and difficult to access.

The Service Referral Follow-up Process

Table 20. Open-ended question responses for ways in which the service referral follow-up process creates a barrier for participation at a resource center

The Service Referral Follow-up Process – Equity

This can take time/energy away from other, more interested, participants.

Limited capacity to do this follow-up with all clients entering our center

This is a difficult process to gauge because we don't want to call/text too often but we want to do it enough to allow potential clients the opportunity to participate. Usually after 2 attempts we either engage or not. More attempts don't usually make much of a difference.

Our workload has increased by 60%, and it has been difficult for a team of three full-time staff to do timely follow-ups.

Many of the clients here cannot afford to pay for a cell phone, so it is very hard to reach them.

Some participants aren't reachable after some services are given.

Some of the clients that we work (with) have financial instability, or also don't have voicemail set up. It can become a challenge getting ahold of them. Either phones get turned off or no way to leave a vmail.

We need guidance from FRCA and/or other centers about best practices around this process.

Getting back on track as we harness the COVID and wildfire needs to a more manageable level

We find many participants aren't interested in engaging after initial interaction in Center Services (i.e., emergency services). Time-consuming with little return for follow-up by staff (currently 3x contact).

We have a lot of clients do not have phones or have disconnected numbers.

I think this varies depending on the situation a client is experiencing. Sometimes I think even a follow-up call can feel overwhelming or invasive regardless of the content.

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Table 21. Open-ended question responses for ways the service referral follow-up process has the potential to make individuals feel their identity is not celebrated and affirmed

The Service Referral Follow-up Process – Diversity

Sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

Initial engagement is crucial; our specialists welcome families to our center no matter their background.

Table 22. Open-ended question responses for ways the service referral follow-up process has the potential to make individuals not feel a sense of belonging

The Service Referral Follow-up Process – Inclusion

No open-ended responses were provided

Offering Family Development

Table 23. Open-ended question responses for ways in which offering family development creates a barrier for participation at a resource center

Offering Family Development – Equity

Again, limited Spanish-speaking staff

Time constraints due to being short-staffed for all responses

Timing, funding and staffing based on emergent needs hitting all at once; COVID and 2nd-largest Colorado wildfire. We are still rebuilding and seeing individuals who have been affected by one or both events.

Table 24. Open-ended question responses for ways offering family development has the potential to make individuals feel their identity is not celebrated and affirmed

Offering Family Development – Diversity

No responses were given for this item

Table 25. Open-ended question responses for ways offering family development has the potential to make individuals not feel a sense of belonging

Offering Family Development – Inclusion

No responses were given for this item

Administration of the CFSA

Table 26. Open-ended question responses for ways in which the administration of the CFSA creates a barrier for participation at a resource center

Administration of the CFSA – Equity

Transportation barriers have been not as impactful during COVID but used to be a huge barrier.

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Administration of the CFSA – Equity

This doesn't seem to present much of an issue engaging clients.

COVID has definitely affected connections and meetings (safety measures issued at state and local levels) along with wildfire focus of needs.

Once again, our family support specialists engage in a conversation where they get the information to fill in the assessment. Many of our migrant families are not familiar with many of the domains, so our specialists need to explain the concepts on a family-friendly way.

I have had clients express that this assessment can be overwhelming. For example, I was working with a homeless family in high crisis and when I completed the CFSA there were several domains where the family expressed frustrations—"What does my education level have to do with me needing housing?" (and) "If I had a savings account I wouldn't need your help."

The questions are very personal, and some people do not like disclosing some information.

All staff speak English only.

I know the CFSA well enough that completion is a conversation rather than a Q&A. More training for advocates/navigators about how to make it less a Q&A would be beneficial. Sometimes when a family comes to me after the first CFSA they can be defensive about the information.

Table 27. Open-ended question responses for ways the administration of the CFSA has the potential to make individuals feel their identity is not celebrated and affirmed

Administration of the CFSA – Diversity

It depends on the population or group being served. As explained before, some families may find some questions to be invasive.

Table 28. Open-ended question responses for ways the administration of the CFSA has the potential to make individuals not feel a sense of belonging

Administration of the CFSA – Inclusion

No responses were given for this item

The CFSA Follow-up

Table 29. Open-ended question responses for ways in which the CFSA follow-up creates a barrier for participation at a resource center

The CFSA Follow-up – Equity

The timeline barrier being strict to 90 days is often a barrier.

The CFSA doesn't seem to be an issue, but sometimes clients disengage before the follow-up has been given.

There have been participants that do not respond or are slow to respond to do a follow-up.

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The CFSA Follow-up – Equity

Sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

Sometimes, I have families that I talk to a lot within the 30 days after CFSA and it's hard to determine then when to do the follow-up CFSA.

COVID and safety measures have affected so many day-to-day operations, plus parents being at home because of layoffs or job closures paired with becoming teachers at home because of COVID safety measures; these factors have limited our ability to follow up.

Sometimes they don't want to engage.

For families going through so many issues it is hard for them to engage on a second interview.

It is sometimes difficult to reach clients for follow-up. They have received help and very often do not want to spend time required to follow up.

When clients have disengaged, determining how many contact attempts should be made is difficult for staff to decide.

Table 30. Open-ended question responses for ways the CFSA follow-up has the potential to make individuals feel their identity is not celebrated and affirmed

The CFSA Follow-up – Diversity

Sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

Table 31. Open-ended question responses for ways the CFSA follow-up has the potential to make individuals not feel a sense of belonging

The CFSA Follow-up – Inclusion

Sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

The Sharing of CFSA Data

Table 32. Open-ended question responses for ways in which the sharing of CFSA data creates a barrier for participation at a resource center

The Sharing of CFSA Data – Equity

Some families are not prepared to answer how much they want to change, as these are concepts they have never seen before. It takes some extra steps to explain these concepts to our families.

All staff is Caucasian.

FRCA EQUITABLE EVALUATION SURVEY

Table 33. Open-ended question responses for ways the sharing of CFSA data has the potential to make individuals feel their identity was not celebrated and affirmed

The Sharing of CFSA Data – Diversity

This takes good MI skills to make participants feel they are truly part of the process and not just another case.

Table 34. Open-ended question responses for ways the sharing of the CFSA data has the potential to make individuals not feel a sense of belonging

The Sharing of CFSA Data – Inclusion

No responses were given for this item

The Goal Creation Tools

Table 35. Open-ended question responses for ways in which the goal creation tools create a barrier for participation at a resource center

The Goal Creation Tools – Equity

This can create a barrier simply because of the pressure for some clients. However, the FA should make it very client-focused to diffuse some of that anxiety.

So many households are just trying to navigate COVID and wildfires; hopefully this summer and fall things will start returning to manageable time frames and less social distancing.

The tree is helpful, but we need to keep it on a very simple way.

Table 36. Open-ended question responses for ways the goal creation tools have the potential to make individuals feel their identity is not celebrated and affirmed

The Goal Creation Tools – Diversity

No responses were given for this item

Table 37. Open-ended question responses for ways the goal creation tools have the potential to make individuals not feel a sense of belonging

The Goal Creation Tools – Inclusion

No responses were given for this item

The Goal Creation Decision-Making Process

Table 38. Open-ended question responses for ways in which the goal creation decision-making process creates a barrier for participation at a resource center

The Goal Creation Decision-Making Process – Equity

It takes time for families to determine priorities; sometimes what they identify as the immediate need is all they can focus on.

Cultural differences may play a part in a client's trust & comfort level with all-white staff.

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Table 39. Open-ended question responses for ways the goal creation decision-making process has the potential to make individuals feel their identity is not celebrated and affirmed

The Goal Creation Decision-Making Process – Diversity

No responses were given for this item

Table 40. Open-ended question responses for ways the goal creation decision-making process has the potential to make individuals not feel a sense of belonging

The Goal Creation Decision-Making Process – Inclusion

No responses were given for this item

Goal Check-in Process

Table 41. Open-ended question responses for ways in which the goal check-in process creates a barrier for participation at a resource center

Goal Check-in Process – Equity

Same as above. This is client led and should not have pressure, although some clients still feel pressure anyway, which can lead to disengagement.

Again, sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

After a task is reached with us

Would like guidance around best practices for this.

COVID and safety measures have affected so many day-to-day operations, plus parents being at home because of layoffs or job closures, paired with becoming teachers at home because of COVID safety measures. These factors have limited our ability to follow up.

Interest is low at times.

Our family specialists have developed effective engaging skills and once they establish a positive relationship with a family, these types of questions become more familiar.

Table 42. Open-ended question responses for ways the goal check-in process has the potential to make individuals feel their identity is not celebrated and affirmed

Goal Check-in Process – Diversity

Sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

FRCA EQUITABLE EVALUATION SURVEY

Table 43. Open-ended question responses for ways the goal check-in process has the potential to make individuals not feel a sense of belonging

Goal Check-in Process – Inclusion

Sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

Service Closure Process

Table 44. Open-ended question responses for ways in which the service closure process creates a barrier for participation at a resource center

Service Closure Process – Equity

This may cause anxiety for some clients.

The only barrier here is that some clients don't want to close, so helping them recognize their successes and self-sufficiency are important during this process.

There have been participants that we are not able to get a hold of or their schedules do not line up with our hours of service or they do not respond.

It all depends on the individual case and how easy it is to communicate with them.

COVID and safety measures have affected so many day-to-day operations, plus parents being at home because of layoffs or job closures, paired with becoming teachers at home because of COVID safety measures. These factors have limited our ability to follow up.

This is more an internal process, when a family is not responding or not showing any more interest or after x number of attempts failed. We do not state that the service is "closed," but we tell them to reach out to us if any other needs arises.

Table 45. Open-ended question responses for ways the service closure process has the potential to make individuals feel their identity is not celebrated and affirmed

Service Closure Process – Diversity

Sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

This is more an internal call. Leaving the door open makes people feel welcome.

Table 46. Open-ended question responses for ways the service closure process has the potential to make individuals not feel a sense of belonging

Service Closure Process – Inclusion

Sometimes clients do not answer or return calls. It can be challenging to get a hold of them for follow-up.

FRCA EQUITABLE EVALUATION SURVEY

Service Closure Process – Inclusion

I chose my response to be able to comment on the huge need for engagement skills. This is the biggest lack I see. Engagement isn't an innate skill for everyone. The training and support needed is huge. Without communication and connection, the process stalls. People may receive services but don't integrate them into their lives. The skills the advocate/navigator brings seem underrated. Meeting people where they're at without judgement or directives is of vital importance. These are often entry-level positions with pay that is reflective, and staff moves on.

APPENDIX B: FRCA EQUITABLE EVALUATION ASSESSMENT

REPORT OF FINDINGS: FOCUS GROUPS

Joining Vision and Action (JVA) facilitated targeted focus groups designed to help Family Resource Center Association (FRCA) to better understand what is working well and what is not when it comes to evaluation data collection activities and to identify areas where the evaluation process may be improved in order to achieve equity. Equity, in this case, is recognizing and resolving barriers that prevent the full participation of some individuals and/or families in the services provided at local family resource centers.

The following section presents the summary of findings from three focus groups held. The groups took place on July 21, 2021, with FRC English-speaking family representatives (n = 4); on July 23, 2021, with FRC staff members (n = 4); and on August 2, 2021, with FRC Spanish-speaking family representatives (n = 3).

Staff Focus Group

Working Definitions: Understanding Equity

Participants were provided with the definition of equity provided by the Family Resource Center Association (FRCA) and then asked in what ways their work in collecting evaluation data adheres to the definition. Participants shared that their work helps identify barriers and needs that families have and helps them determine what resources the community is missing.

“I also think that it helps us determine what is not in that community. If everybody is lacking in one area and that indicates something is missing.”—FRC staff member

When staff focus group participants were asked in what ways their work in collection of evaluation data does **not adhere** to this definition, the main consistent themes that emerged were the following:

- The information collected is very general, does not go deep into the history of the families.
- It is not inclusive of all types of families, e.g., leaves out families where grandparents are raising children, teen parents are living with their parents, same-sex partners raising children.

“I agree, we have a lot of types of families. Grandparents raising grandchildren are not captured. Teen parents are not captured as well. That is missing.”—FRC staff member

Experience in Data Collection

When JVA asked staff focus group participants if they felt they had a good understanding of why the staff is asked to collect the data they do, they agreed that it is collected for funding development reasons. Other purposes of data collection mentioned were:

- To understand the client’s history
- To better address the specific needs the family has
- It helps gather the information to determine the client’s personal goals, access to required services, and resources the family is looking for.

When staff participants were prompted to think about whether their efforts collecting the data helped tell the full story of the work done at their center, they agreed the data collected does not tell the full scope of a family’s story. Other themes that emerged were:

- Discrepancies between CFSA forms and demographic information forms
- Forms do not capture any data on the client’s informal education.
- Some of the questions might feel uncomfortable to answer for the clients; clients might omit information in fear of not being eligible for resources.

“When asking questions around income, clients may feel like if they make too much money, they might not be eligible for resources.”—FRC staff member

- Forms can either help build clients’ trust or not.

“The demographic survey comes second from the CFSA, so perhaps it is a build of trust or the opposite.”—FRC staff member

JVA asked staff focus group participants which parts of the evaluation data collection process they found to be the most challenging and why. The following themes emerged:

- The level of participants’ reading and comprehension skills made the process of data collection more difficult at times

“The question part, the survey part and the goals piece were really challenging for her. She had limited reading skills. Had a hard time with comprehension.”—FRC staff member

- Data collection occurs repeatedly within a short time frame, making it less likely that change will have occurred between collections

“The CFSA creates a lot of conversations. We have four-month programs. That is not a lot of time for change. So, trying to do it three times in four months is a challenge.”—FRC staff member

- Families feel overwhelmed by the assessments

“I have a child in a program. It is more time consuming and frustrating when the program makes it all about the assessments instead of making it about the programming. It feels the assessment replaces the programming. It might not be the program, but it might be a miscommunication with how often it needs to happen.”—FRC staff member

Training

When JVA asked staff focus group participants if they feel prepared and able to collect evaluation data from participants according to the procedures, they all agreed on feeling prepared. They shared that assessment trainings are offered to staff, as well as supervisor follow-ups.

“The follow-up from supervisors in training on things, I can reach out to Ms. Vonn from the training program (who) is amazing and helpful if you every have questions.”—FRC staff member

All participants shared that they felt FRC training helps them be prepared to connect with participants and build relationships with them. They suggested that all staff members have the opportunity to be certified. Some FRC staff have a family development certification program.

“They do a really good job, and I think all agencies should do a certification of some type—family development credential. it is out of the University of Connecticut.”—FRC staff member

When participants were asked if they feel ready to connect with clients of all

backgrounds, they all shared that they feel prepared to do so. The following opportunities for staff development were mentioned:

- Cultural and diversity training opportunities
- Family development credential
- Financial health Institute program

“We do motivational interviewing. Brain-based counseling. I think that CCR that the financial health institute program (offers) is wonderful in helping learning about the science of people who are disenfranchised and their engagement with financial things.”—FRC staff member

Staff participants mentioned the need to invest in hiring more bilingual staff because language becomes a barrier to connecting with clients. They also mentioned not being adequately trained to assist families with financial and budgeting issues.

“Maybe we need more training in budgeting and finances to help families in that way. We have classes they can take, but we do not have that training ourselves.”—FRC staff member

Goal Setting

Staff members were asked if they feel participants engage with them on goal setting at their family resource center. The following themes emerged:

- Families are fully engaged with goal setting.

“We are always looking for goals. Sometimes we think they have more goals than is reasonable to attain.”—FRC staff member

- Participants are prompted to decide on their goals.

“I always say if I give you goals then you won’t be motivated to do it.”—FRC staff member

- The SMART [specific, measurable, attainable, relevant and time-bound] goals tool is used to help participants plan and achieve their goals.

Suggestions Moving Forward

Staff members were asked to share the one or two ideas for strengthening and sustaining relationships with participants to better build equitable evaluation. The

following ideas were mentioned:

- Avoid participant burnout when collecting their data. Monitor how many times a client gets a CFSA. For example, if they are in four programs, they are getting the assessment four different times.

“I have had several clients that were involved and they ended up dropping programs and they felt overwhelmed. It can be a detriment to ask them to complete the assessment so many times. I feel it is redundant and they get upset and quit their program.”—FRC staff member

- Share with participants the results of collecting their data.

“I understand the point of data, I wrote grants all the time. How is it useful for these families? We do data consent forms so they know it's happening, but at the end do they know what has happened?”—FRC staff member

Staff Feedback: Key Takeaways

In general, staff members agreed on the importance of their work in collecting data to identify barriers and gaps in services families need and for program funding reasons.

Strengths

Staff understand that data is collected to understand a client's history, to better address their needs and to help them determine goals and pathways to achieve them.

Families engage with and complete their goals.

Staff focus group participants shared that they have access to trainings and follow-up with supervisors.

Opportunities for Growth

Staff mentioned that the information collected from families is too general and does not capture their clients' full stories. They also noted that it is not inclusive of all types of families FRCs serve (e.g., grandparents raising children and families with same-sex partners).

Staff also shared that families are sometimes reluctant to answer some questions they find very personal. Also, their level of literacy, reading and comprehension skills can

become an obstacle for them in filling out forms.

Assessment training is available to staff. Financial training and cultural/diversity training were mentioned as potential additions to better serve the families.

Family Focus Group (English and Spanish speakers)

Experience with Local FRC

Participants were asked to introduce themselves and share three words that describe their experience with their family resource center. The words that came to mind for participants tended to all have positive connotations and included words such as: good, friendly, familiar, comfortable, supported, trust and kindness.

When asked to describe their **interactions with FRC's staff**, focus group participant responses tended to describe them as friendly and welcoming. Participants feel FRCs are safe places to talk and that staff are ready to intervene when needed.

“Every time I feel I am in trouble, need help with anything, need support for my family, I know I can come here. I have found an expended family in the staff. When a friend has asked me where to go for help, I know exactly who can help. The staff is supportive of me and my goals. They help me with all resources I need to achieve them. They understand me and don't judge.”—FRC client

JVA asked participants to reflect on whether they feel their **culture/background** is recognized, respected and understood by FRCs. Participant responses tended to cluster around the common theme of staff efforts to create a community and build respectful relationships.

“I have appreciated having someone who teaches in my class who is from a rural place; she understands where I am coming from. She understands I need more time, and I need her to be accommodating and accepting. Stopping to explain things to me.”—FRC client

As growth opportunities related to culture and background, one participant suggested that staff could gain awareness of the differences between rural and city culture, as there can be different behaviors and expectations depending on where a person has lived most of their life.

“City culture is different; it's a faster pace. There is a different way of thinking around problems and around communicating. Rural people can be direct but take more time to act. Sometimes I can feel like I

am a little left behind. I think that is common in rural areas, as it is not as uncommon for someone to not have as much education.”—FRC client

Family focus group participants mentioned that FRC’s staff members should not make **assumptions** about anyone’s cultural background. The families shared the importance of having conversations and asking questions before making any assumptions about a participant’s cultural background.

“In one class I felt disrespected because my name is ‘Luz.’ The teacher assumed I was Hispanic, so I ask them to call me ‘Connie.’ They were nice about it. I don’t have nothing to say about that. The person that I am and my culture and everything.”—FRC client

Understanding Data Collection

When family focus group participants reflected on why participants were asked to fill out forms, the main reason mentioned was the allocation of resources needed by the families. Only one of the participant mentioned funding as a reason for collecting data.

“I come from an analytics background, so I understand the connection between my data and my needs but also for them to allocate funds for help for people.”—FRC client

Most of the participants mentioned having difficulty understanding why the data is collected. Participants shared that even though staff members explained how to complete the forms and why the data is collected, they would prefer to have conversations rather than fill out forms.

“I have trouble with forms. I don’t understand why we need to fill them out. They explain the forms, but I still have trouble understanding why I am asked to fill them. I prefer to have a conversation. I know they need to have my information to help me, but I prefer a conversation. If it’s a conversation with direct questions, then I can answer it.”—FRC client

Experience in Filling out Forms

Participants were also asked about **the challenges** they have experienced during the **data collection process**. They all shared feeling uncomfortable sharing their personal lives with staff. Another challenge mentioned was that sometimes participants don’t read or write well and might feel intimidated by the form. Others prefer the intimacy that

conversation creates.

“I feel that having the conversation is better than the form because it is more direct. I feel they really care. I can ask more questions and explain in detail my needs and my history. I like Zoom conversations. I don’t like to fill out applications.”—FRC client

Some participants described the questionnaire as friendly. However, some said they felt uncomfortable completing the demographic questions related to education and Social Security numbers. Some said they did not understand the difference between ethnicity and race and thought they meant the same thing. Also, participants shared that they feel reluctant to answer questions around their income and finances for fear of not being eligible for some programs. Finally, a participant noted the importance of follow-up calls to check that all the information is still accurate and has not changed.

“A recommendation will be for them to call me back ... if they have questions about the forms. We need to have more follow-up; sometimes things change or we are going through an emotional problem and might not be comfortable to say or share it in the form, so a follow-up call can help a lot.”—FRC client

Communication Feedback

Families said they are contacted by FRC staff at least two times a month and sometimes weekly, depending on whether they are participating in an FRC program. There was a consensus that two times a month is the perfect number of times for FRC staff to make a connection with families.

“For me it is very important to have a connection. I like to be contacted at least every two weeks. Sometimes depending if I am in a class, they will call me more often. It really helps to be contacted; it reminds me of my goals. If I have any questions about the class or resources I need, I can talk about it. Also, I can share if there is anything change.”—FRC client

Text messages and phone calls were mentioned as favorite channels for communication, especially among Spanish-speaking families. Zoom and email were also mentioned, but it was noted that some FRC clients may lack computers or digital literacy. A Spanish-speaking participant shared the following:

*“I don’t like the computer; I don’t like to look for messages in the email. My phone is the only thing I use. I always have it with me. I prefer to have them text me or call me. Computers are difficult.”—
FRC client*

Goal Setting

Family focus group participants were asked if they decide what goals they want to pursue and whether they feel supported to achieve those goals. All agreed that they set their own goals and feel supported by FRC staff to achieve them.

*“They always contacted me and encouraged me; I feel they supported me to achieve my goals. I am working on my dreams, and it is called the tree of life. She gave me the resources I need to achieve my goals and follows up with me every step of the way.”—
FRC client*

When participants were prompted to think about recommendations related to the data collection process/questionnaires, they mentioned the importance of sharing with them the reasons data is collected and of following up with the results related to their participation.

Family Focus Groups: Key Takeaways

- Based on the conversations during the focus groups, participants agreed that their family resource centers are welcoming; their interactions with the staff were described as friendly and comfortable. All participants shared that the staff were extremely helpful and provided them with resources and tools to better their situation.
- Finding resources and funding opportunities were mentioned as reasons for the data collection.
- Participants mentioned that their culture and background were respected and recognized. Some of the suggestions for improvement were the following:
 - Staff being aware of the differences between rural and city culture
 - Staff not making assumptions about participant’s cultural background
- Participants’ literacy level and confusion about demographic questions were listed as challenges related to the data collection process.
- Participants said they feel reluctant to answer questions about their income and finances in fear of not being eligible for some programs.

- Families agreed they preferred being contacted two times a month. The favorite channels for communication were text messages and phone calls.
- When talking about goal setting, participants shared that they chose their own goals. They also mentioned feeling supported and encouraged to achieve their goals.