



N. composure or coolness,  
as shown in difficult, complex,  
or under trying circumstances.

## Family Partners Program

# PROGRAM EVALUATION

PREPARED BY: SANGFROID STRATEGY, LLC  
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SISTERS *of* CHARITY  
FOUNDATION  
OF CLEVELAND



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## Program Description

The Sisters of Charity Foundation has been addressing the intergenerational cycle of poverty through their community education, family supports, and resident ambassador models for many years. In 2018, they shifted their approach to emphasize community connections and trauma prevention through a "web of support" aimed at deepening both family and neighborhood-level impact.<sup>1</sup> In 2019, the Sisters of Charity Foundation launched the Family Partners program, continuing and building on their history of serving families and the community through an expanded model of home visiting for Central families. The O'Neill Foundation funded this program as part of its two-generational approach to combat poverty.

The Family Partners program is a collaboration formed by Central Promise and the Sisters of Charity Foundation through the combined resources of the SPARK Ohio home visiting program, Family Connections, Starting Point, and OhioGuidestone. The program's theory of change is rooted in the concept that reinforcing Protective Factors will lead to positive childhood outcomes, more effective parenting, and strengthened family relationships.

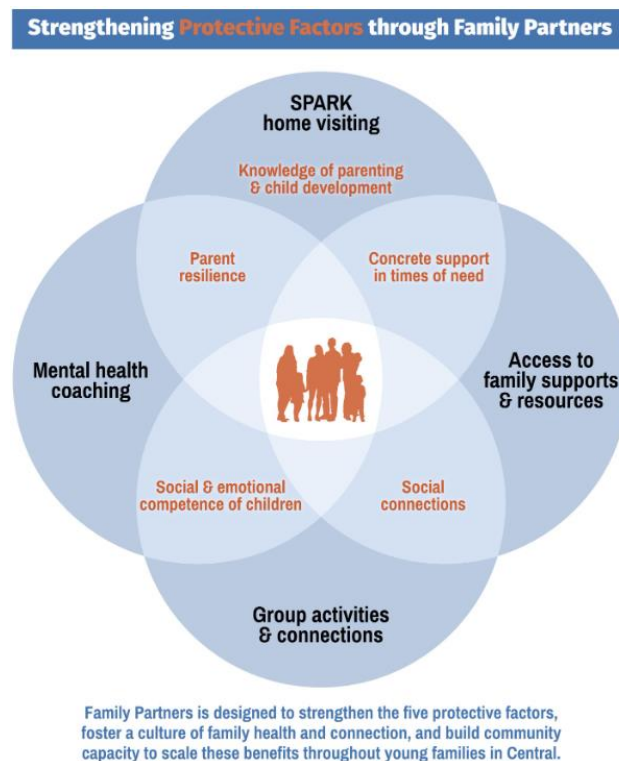
Family Partners supports families through SPARK home visiting, mental health coaching, access to family supports and resources, and group activities and connections to improve child, parent, and family outcomes. See the integrated service model in Figure 1 to the right. The program team includes the following:

- The SPARK home visiting program, supporting early learning through lessons with preschool-aged children, encourages, supports, and drives parents and caregivers to be more powerful learning advocates.
- OhioGuidestone, providing mental health services for children, caregivers, as well as siblings. These services aim to reduce stress, offer appropriate developmental support to

children, and support parents throughout the program.

- Central Promise/Starting Point, building from Central's education programs, links families to early learning opportunities and community activities.

Figure 1



Knowing the prevalence of Adverse Childhood Experiences (ACEs) in Central, the program was designed using the Protective Factors Framework.<sup>2</sup> This approach fosters a culture of family health and connection and builds community capacity to provide services to families. The Family Partners program seeks to create long-term changes in child- and family-level outcomes related to healthy development, school readiness, family literacy, mental health support, and strong family and community relationships. This program also utilizes a two-generational approach that aligns parent and child services to create deeper impact. The funding from the O'Neill

<sup>1</sup> Background on Sisters of Charity [choice to use the "web of support"](#)

<sup>2</sup> More on the [Protective Factors Framework](#)

Foundation supported a three-year program term to address these needs through the development of Family Partners. As the first program year concluded in September 2020, the Family

Partners team hopes to understand the program's ongoing development and implementation needs for the next few years.

## Unanticipated Shifts

Recruitment for Family Partners began in September 2019, and program staff began serving families soon after. In March 2020, the world was hit by the COVID-19 pandemic, and by late March, much of Ohio was under lockdown orders, causing changes to both the program and the needs of families.<sup>3</sup>

### *Impact on Families in Program*

As the state went on lockdown in March, the program staff changed the program delivery model and canceled many in-person activities. The team shifted to home-visits and virtual therapy sessions. The staff and families adjusted to a different program experience quickly, but the effects were significant.

The pandemic laid bare the impact of historical and structural racism on living and working conditions, stress, and access to healthcare for communities of color.<sup>4</sup> These disparities affected the Central Neighborhood and the families in the program, all of whom are black or brown, increasing their likelihood of catching COVID-19 and experiencing worse health outcomes. As most families in the program already received food or medical assistance, these additional barriers combined with the new childcare demands added significant pressure. Due to the changing economic landscape, families had unanticipated needs relating to employment, food, and social

services. The program staff adapted programming to include deliveries of school supplies, educational work packets, and food and diapers.

One key tenant of Central Promise's work is to incorporate significant resident engagement in their programming. While shifts in the delivery model still provided support, families' inability to convene as expected, especially as leaders, was one of the most significant losses. The program, which initially included having resident-led gatherings around literacy skill-building, was affected, and families did not have any in-person opportunities to build social connections.

### *Impact on Data Collection*

In addition to the challenges to program implementation, there were significant changes in assessing and collecting child- and family-level data this year. While many assessments were still completed virtually, the largest impact was the cancelation of the Kindergarten Readiness Assessment (KRA). This assessment is typically used to determine how preschool-aged children are developing academically. With the cancelation of the KRA, the program cannot understand the full scope of one of its key outcomes, kindergarten readiness. All other assessments completed after March 2020 were administered remotely, causing changes to most pre- and post-test timing and frequency.

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<sup>3</sup> Ohio Department of Health's 2020 "[Stay Safe Ohio Order](#)"

<sup>4</sup> [Coronavirus in African Americans and Other People of Color](#), John Hopkins

## Family Partners Program Evaluation

This evaluation is a process/outcome evaluation focused on assessing the effectiveness of the program's implementation and how well the program is achieving the short-term child- and family-level outcomes in its first year. It is based on a program [original outcomes framework](#) and [program logic model](#), originally developed during program design and later adapted to reflect the constraints of the pandemic.

### *Revised Approach to Evaluation*

Considering the shifts in program implementation, effects of the pandemic on the families' experiences, and data collection, the evaluation team revised the outcomes framework to reflect the modified program activities and data availability. The revised outcome framework served as a basis for a new evaluation plan.

To revise the outcome framework, the evaluation team worked in conjunction with the Family Partners team to determine what data was available for analysis and collection and identified additional ways to measure the program outcomes. The new outcomes framework is detailed in [Appendix A](#).

In addition to child- and family-level outcomes, the evaluation team and the Family Partners team developed process and implementation outcomes to understand better how the program's implementation could improve moving forward. The process and implementation related outcomes focus on partnership, integrated support, evaluation capacity, and program improvement.

## Evaluation Purpose and Key Questions

In addition to reporting the evaluation results to key funders and stakeholders, this evaluation will support continued program improvement over time, allowing the Family Partners program to make adjustments to improve the program's implementation.

### Implementation and Process Outcomes

The implementation and process-related outcomes focus on four key areas of the program implementation: partnership improvement, the integration of support, the program's evaluation capacity, and program improvement.

- 1) **Partnership Improvement:** How can the partnership among the three leading partners in the initiative be strengthened and/or improved in the future?
- 2) **Integrated Support:** How did year one implementation of the program support the progress of families? What improvements can be made in the future?
- 3) **Evaluation Capacity:** How can the capacity for program evaluation and the integration of data-collection into the day-to-day program management functions be strengthened and/or improved across partners in the future?
- 4) **Program Improvement:** What are the biggest opportunities for program improvement?

### Child- and Family-Level Outcomes

The child- and family-level outcomes focus on child, parent, and family needs through integrated education, mental health, and community resources.

- 5) **Child demonstrates healthy development and school readiness.** This outcome is related to child development milestones. It is measured through the use of formative assessment data around pre-literacy, early numeracy, non-cognitive development, and kindergarten readiness.
- 6) **Family demonstrates increased family literacy.** This outcome measures literacy through child and family activities, such as parents reading books with their children, attending community programming, or receiving additional literacy services.
- 7) **Parents become more powerful learning partners.** This outcome measures parent behavior to support and demonstrate knowledge of early childhood development. Parents are encouraged to participate in activities with their child and meet the needs of those developmental milestones.
- 8) **Parent health and mental health is strengthened.** This outcome measures parent growth in their psychological awareness and receiving appropriate support related to stress, emotional needs, and overall ability to navigate barriers and build confidence in their family network.
- 9) **Child physical and emotional health develops appropriately.** This outcome measures child development through tracking developmental milestones and family use of supports when needed.
- 10) **Family relationships are strengthened.** This outcome measures the overall strengthening of the family unit through the connections to others, stronger resilience, and peer-to-peer relationships.

## Methods and Measurement

The Sangfroid Strategy team completed the evaluation utilizing qualitative and quantitative data for the evaluation.

### Methods

Working with the Family Partners team, the evaluators defined all ten implementation and child- and family-level outcomes at the start of the evaluation. The team gathered, merged, cleaned, and analyzed all available data for the program at the beginning of the evaluation. The team then organized and aligned all data to the outcomes framework.

Due to the effects of COVID-19 on the program delivery, the team revisited the original outcomes framework to determine what data was available

and identify different data sources. The adapted framework was used for this evaluation.

In addition to the quantitative measures identified in the initial program evaluation design, the evaluation team collected additional qualitative data through interviews with program staff, partner agencies, and supervisors from Promise and OhioGuidestone, and conversations directly with families through a virtual focus group. All families who participated in the focus group were compensated for their time and participation with \$20 gift cards provided by Sangfroid Strategy.

### Measurement

For this evaluation, the following data sources were used to measure indicators and outcomes.

*Table 1: Measurement and Data Sources*

Outcomes	Indicators	Data Sources
1. Partnership Improvement	Qualitative stories from staff and families	<ul style="list-style-type: none"> <li>Referral service log</li> </ul>
2. Integrated Support	Level of partnership integration, qualitative stories from staff and families, and referral follow-through	<ul style="list-style-type: none"> <li>Demographic data (household, income, intake, etc.)</li> </ul>
3. Evaluation Capacity	Qualitative stories from staff and families	<ul style="list-style-type: none"> <li>Focus group (4 families)</li> </ul>
4. Program Improvement	Qualitative stories from staff and families	<ul style="list-style-type: none"> <li>Interviews (5 staff)</li> </ul>
5. Child development and school readiness	Learning gains made on non-cognitive, reading, and math assessments, and SPARK lesson completion.	<ul style="list-style-type: none"> <li>ASQ scores</li> <li>Get Ready to Read scores</li> <li>PENS-B assessment</li> <li>SPARK Lesson log</li> </ul>
6. Family demonstrates increased family literacy	Parent and staff reported levels of reading, # referrals made to literacy services	<ul style="list-style-type: none"> <li>Focus group (4 families)</li> <li>Interviews (5 staff)</li> </ul>
7. Parents become more powerful learning partners	# of SPARK lessons, parent teaching skills, parent-reported gains in affection, responsive, & encouraging behaviors, and parent's stated improvement and growth stories	<ul style="list-style-type: none"> <li>SPARK Lesson log</li> <li>SPARK Case Notes</li> <li>PICCOLO Teaching Domain data</li> <li>Review of Parent Survey</li> <li>Review of Staff Survey</li> </ul>
8. Parent health & mental health is strengthened	# of referrals, # enrolled, # closed successfully, # continuing service Parent and staff self-reports through interviews	<ul style="list-style-type: none"> <li>OhioGuidestone program data</li> <li>Review of Parent Survey</li> <li>Review of Staff Survey</li> </ul>
9. Child physical and emotional health develops appropriately	# of referrals, # enrolled, # closed successfully, # continuing service, gains made on the social-emotional assessment	<ul style="list-style-type: none"> <li>ASQ-SE scores</li> <li>OhioGuidestone program data</li> </ul>
10. Family relationships are strengthened	Parent and staff stated improvement, training materials	<ul style="list-style-type: none"> <li>SPARK case record</li> <li>Interviews (5 staff)</li> <li>Promise meeting note review</li> <li>Staff meeting note review</li> <li>Review of Parent Survey</li> </ul>



# Key Findings and Areas for Opportunity

## Implementation and Process Outcomes

### Partnership Improvement

The Family Partners team consisted of staff from Family Connections, Starting Point, Central Promise, and OhioGuidestone. The partnership structure included weekly team meetings with the core team, monthly meetings with the team and supervisors, and quarterly meetings with the larger Sisters of Charity and Central Promise teams. During interviews with staff, it was clear that the partnership model began strong in year one, and that families received services across the partnership continuum through the program.

1) **The partnership between organizations in 2020 felt "seamless."** One of the most significant benefits identified was having diverse skillsets on the team, allowing for the availability of additional resources for families. Staff reported high levels of partnership satisfaction and stated that the partnership solidified quickly.

- *Area of opportunity:* While team members are trained and specialized in their unique skill set, by creating space for shared-learning and reflection during regular team meetings, the staff can train and support each other's development.

2) **The partnership structure allowed for more support to each family's varying needs and concerns.** Staff described a decrease in the amount of times families had to tell their stories or repeat their concerns to multiple agencies. This structure decreased the barrier of families navigating multiple agencies and their services and allowed for combined resources for families.

- *Area of opportunity:* During the first program year, the partners identified social service, mental health, food insecurity, and employment needs. As the program proceeds, it is worth examining what additional support is needed for families, and determining how to build that capacity through staff, partnerships, or other resources. For example, in a year with significant job loss during the pandemic, a partnership with

a workforce development focus may be beneficial and meet the changing needs of Family Partners families.

### Integrated Support

The Family Partners program aimed to provide integrated support to families through a continuum of resources. During interviews and focus groups with families and staff, key findings related to integrated support indicate variance in the level of service integration and family understanding of their involvement in a multi-service program; that trust places a key role in persistence in mental health referrals; virtual social connection opportunities did augment the disruption to in-person activities; and the strength of the integrated support model on the program's ability to pivot to emerging needs.

1) **Families enter the program through SPARK:** Of the families in the program, 100% began their time in Family Partners through enrollment in the SPARK home visiting program. The SPARK program became both the entry point for service and was a shared experience among all families. Not all families in the program received all services in 2020. Based on identified family needs, the Family Partners team referred or provided services as needed. Still, it is unclear how many families needed additional supports beyond this program.

- *Area of opportunity:* Adding an intake conversation or family needs assessment upon entry to the program will allow the Family Partners program staff to identify specific needs for service integration early on.

2) **Family awareness of multi-service programming varies:** The level of involvement in direct service to families varied by Family Partners staff. From family reports and case notes, it became clear that the main service-provider to all families was the SPARK/Family Connections Program Coordinator. While the partnership allowed for additional



resources for families who needed referrals, the findings indicated that families were not always aware of their involvement in a multi-service program.

- *Area of opportunity:* This finding may indicate that more clarity around partnership roles within the program is needed, and a family journey map may be beneficial. This would lay out how a family enrolls, how they move through the program, and how they stay engaged/involved. Considering the broad scope of services and families' various needs, a family journey map may help create a stronger flow between services.

3) **Trust plays a key role in family persistence in mental health referrals:** Of the 22 families in the program, 13 received referrals to mental health services during their first year. The team shared that the specific way they speak about mental health services for families determined if a family persisted in services. Families who had a more significant amount of time in the program were more likely to trust the team member making the referral and were more likely to act on a referral.

- *Area of opportunity:* Continue to refine and collaborate on language around mental health offerings and add mental health referral timing to the family journey map. Considering how and when that referral is made could help improve retention.

4) **Virtual social connection did augment disruption to in-person activities:** The integration of group activities and connections were limited in 2020 due to COVID-19; however, Family Partners staff indicated that a Facebook group for families was allowing for new connections recently.

- *Area of opportunity:* Continue to refine the plans for 2020-2021 with the new virtual offerings and engagement online as a critical component for keeping families engaged. Determine what content families would like to see on this platform and plan ways to connect and collaborate on Facebook or other online capacities. Long-term, make decisions about

keeping this component or scaling back after social-distance restrictions are lifted.

5) **The integrated support model allowed the program to pivot:** The families were supported by more resources through the addition of the integrated service model. Both families and staff described the benefits of food deliveries, diapers, school supplies, and other necessities during the program year. Family Partners staff indicated that many of these things would not have been possible without the integrated service model.

- *Area of opportunity:* Continue to assess family needs and align the integrated service offerings to the program outcomes. As the pandemic continues to unfold, continue to intentionally leverage the program's integrated service

*"[Family Partners staff] actually came and brought activities to us during quarantine and made videos for online learning. We didn't feel like we had to do it by ourselves because we had the videos at home. They also brought school supplies for us to use this year. They didn't forget about us this year."*

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*Family Partners Parent, 2020*

model to address emerging needs.

## Evaluation Capacity

The Family Partners program evaluation capacity is currently being developed as the program continues. During interviews and focus groups, and from the review of available data, key findings indicate a growing ability to evaluate the program outcomes; importance in data-sharing agreement; and the importance of understanding family needs early in program delivery.

1) **A growing ability to evaluate program outcomes:** Family Partners data integration structures are being developed but are not fully integrated into program delivery. Currently, the Family Partners program collects intake, program, and assessment data almost entirely through the SPARK data-system. There are varying levels of tracking, assessing, and sharing/access to data across partners.

- *Area of opportunity:* Additional capacity could be built with an integrated service log and data-collection plan across the partner organizations. This would help ensure that all team members are attentive and involved in the outcomes across services.

2) **Data sharing agreements are critical to the program evaluation:** In the first year, there were some limitations to evaluation capacity due to data sharing agreements across organizations.

- *Area of opportunity:* For the second program year, these data agreements can be integrated into the data-collection plan allowing for more cross-organization evaluation capacity.

3) **Better tracking for family needs and referrals will strengthen the evaluation:** It is unknown how many families needed additional services or resources during the program year.

- *Area of opportunity:* It would help to create a screening tool or log to help evaluate how many families indicated a need and how many families received service based on the identified need.

## Program Improvement

The most significant improvement opportunities for Family Partners came to light through the process of conducting the program evaluation and

the Family Partners team's feedback. Key findings show a greater need for alignment of service goals and program components; clarifying the value of the cohort model and planning for high mobility and movement into and out of the program; ongoing professional development; and attention to inclusive language.

1) **Greater alignment of program activities and outcomes in service delivery will provide clarity:** Many of the program components are happening naturally through the strong partnerships and integration of services. However, it is not always clear how the various program components align to serve families and how those activities are tracked across programs.

- *Area of opportunity:* Creating a family journey map and layering in each program's activities and offerings could help align program outcomes with services. Also, the components related to data tracking and evaluation could be added to this path, and assigned responsibilities and timings for the intended data collection could be made.

2) **The value of the cohort model of the program isn't clear because family entry and exit from the program is a fluid process.** Due to this aspect of the program, it becomes difficult to understand and track outcomes by cohort and time, and it will likely become more difficult as the program grows. It is unclear which parents are participating in the Family Partners program vs. the SPARK program and which parents are active in the Family Partners program.

- *Area of opportunity:* Defining whether or not entry into the program is fluid, or if there is a set cohort enrollment and/or recruitment period, determining if cohort members are supposed to feel part of a cohort or part of the family partners program as a whole, and establishing a process for entry into and exit from the program, including identifying inactive families, will help to clarify the cohort model of the program.

3) **Family Partners staff would benefit from deeper social-service professional development:** The Family Partners staff shared that they addressed significant social service topics and needs during the service year.

- *Area of opportunity:* Continue to hire and train professionals around identified and anticipated family needs. Some suggestions for future professional development include domestic violence warning signs, local community resources integration, and barriers to mental health.

4) **The term 'caregivers' instead of 'parents' will better reflect the service population:** Not all caregivers enrolled in the Family Partners program are enrolled as parents. Some may be grandparents, while others may be a different family member.

- *Area of opportunity:* Ensure program language is inclusive of non-traditional family structures by using the term 'caregivers' in program materials and documents.

### How the Family Partner's helped one mother through a difficult decision.

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The Family Partners program supported Kimberly during a tough year. Outside of the challenges brought on by COVID-19, Kim was a survivor of ongoing domestic abuse and miscarried during her pregnancy. During the program, things escalated at home, and Kimberly continued to make choices in her children's best interest. With the partnerships in place, this program helped transition her children to live with a family member, support the parent's mental health needs through OhioGuidestone, and continue to discuss the children's needs through this difficult time.

One staff noted that while Kimberly was working with OhioGuidestone to process her abuse, the child continued to walk in the room to hear the conversation. The mother continued to show concern that her child would be re-traumatization, and she was adamant about ensuring her child's safety. Overall, with the help of the OhioGuidestone staff, Kimberly was able to create safety plans for the future to ensure her children's well-being.

Kimberly showed remarkable resilience by serving her children's immediate needs, and due to the early bond created by the 3-YR old SPARK program, the relationships existed that supported Mom through a challenging situation.

*\*Please note all names have been changed to protect the privacy of program participants.*

## Child- and Family-Level Program Outcomes

This program is linked to child-, parent-, and family outcomes, and is rooted in a two-generational approach to support families and children. The Family Partners program framework addressed specific outcomes across each of these levels. For children, the goals are aligned to social, emotional, and cognitive development related to their age. For parents, the goals looked to mental health support, resource development, relationships, and knowledge of child development and parenting skills. These goals were connected through family goals of family literacy improvement, connections to community resources, and connections to others in their community. The following table shows our outcomes for each of these levels for year one.

Table 2: Child- and Family-level Outcome Year 1

	Y1 Evaluation Findings about Child- and Family-Level outcomes
<b>Children</b>	<ol style="list-style-type: none"> <li>1) Children in the program demonstrated greater school readiness by making gains in math and reading during their time in the program. Children in the program showed development on track related to their relative ages.</li> <li>2) Children engaged in mental health services, with 5 children engaging between 1-10 sessions with OhioGuidestone.</li> <li>3) Children completed initial screenings for trauma and social-emotional development during Year 1.</li> </ol>
<b>Caregivers / Parents</b>	<ol style="list-style-type: none"> <li>1) Parents and caregivers demonstrated stronger skills in being learning partners for their children. Parents demonstrated this through high scores on the Learning Domain of the PICCOLO as well as through self-reports from the focus-group and Parent Survey.</li> <li>2) Parents and caregivers who received services from both SPARK and OhioGuidestone were reported to have a better understanding of their child's developmental needs.</li> <li>3) Only 1 of 22 parents and/or caregivers attended mental health services beyond 1 session 7 created stress-management plans, and 1 successfully concluded services with OhioGuidestone.</li> <li>4) Parents and caregivers are reporting strong affection, and emerging skills related to responsiveness and encouragement when parenting.</li> <li>5) Parents and caregivers consistently report limited relationships outside of the home and the need for additional knowledge of community resources and supports.</li> </ol>
<b>Family</b>	<ol style="list-style-type: none"> <li>1) Family literacy increased during the program. Families reported a gained interest in supporting their child's literacy goals and more understanding about how to support these goals.</li> <li>2) Families received literacy services when referred, although identifying this need was more difficult during virtual sessions. During 2020 three families were identified for additional literacy referrals, and two families pursued local literacy services.</li> <li>3) Family relationships outside of the home were not a significant piece of the program in 2020 due to COVID-19. However, Family Partners staff reports parents' involvement in the online Facebook community has grown recently.</li> </ol>

*"I felt valued and my daughter felt valued by [the SPARK Program Coordinator]. The lessons helped us to become more engaged in her learning and helped me learn to do things that could help her do her learning."*

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*Family Partners Parent, 2020*

### Outcome 1: Child demonstrates healthy development and school readiness.

This outcome is used to understand if the children in the Family Partners program are meeting developmental milestones. This outcome is measured through four indicators: reading, math, non-cognitive development skills, and overall kindergarten readiness (as seen on the left side of the table below). Pre-literacy and early numeracy gains were measured through learning gains, while the domains on the ASQ were measured by performance compared to cut-off scores. Lastly, kindergarten readiness for the 2019-20 program year is measured through SPARK lesson completion and enrollment in preschool/early-childhood centers. The following table overviews the key findings from this outcome, and the following narrative discusses those measures, findings, and how they relate to the indicators.

Table 3: Key Findings for Outcome 1

	Measures	Key Findings
<b>Pre-literacy</b>	Performance on Get Ready to Read (GTRT) screener	Children, on average, had a <b>70.8% learning gain</b> between the GRTR pre and post.
<b>Early Numeracy</b>	Performance on Preschool Early Numeracy Skills- Brief (PENS-B)	Children, on average, showed a <b>23.8% learning gain</b> between the PENS-B pre and post-assessment.
<b>Non-cognitive</b>	Performance on Ages and Stages (ASQ) questionnaire relating to communication, fine motor, gross motor, personal-social, and problem-solving development skills.	The number of children needing monitoring based on the ASQ stayed relatively low throughout the program year in each category: <ul style="list-style-type: none"> <li>• Communication: <b>6%</b></li> <li>• Fine Motor <b>4.4%</b></li> <li>• Gross Motor <b>2.8%</b></li> <li>• Personal-Social <b>6.2%</b></li> <li>• Problem Solving <b>11.3%</b></li> </ul>
<b>Kindergarten Readiness</b>	The measure of SPARK Lessons completed	On average, children in the program completed 8 SPARK Lessons. For each SPARK lesson completed, it is correlated to higher kindergarten readiness. The following narrative includes details about SPARK completion during year one of the program.

**Summary of findings:** The data shows that children in the program made positive gains during the year of service. Overall, there were positive gains in literacy as well as in math for the children in the program. A majority of children also showed on track in their development related to their relative ages (seen in the ASQ results). While there are limitations to the findings relating to kindergarten readiness, overall, the participation in regular SPARK sessions implies potential gains in this area.

## Indicator-Level Findings for Outcome 1

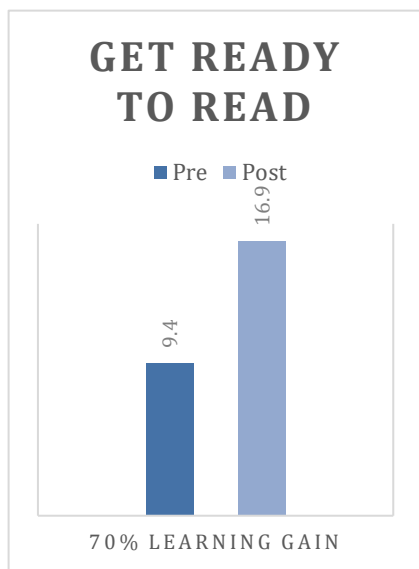


Figure 3: Reading gains 2019-20

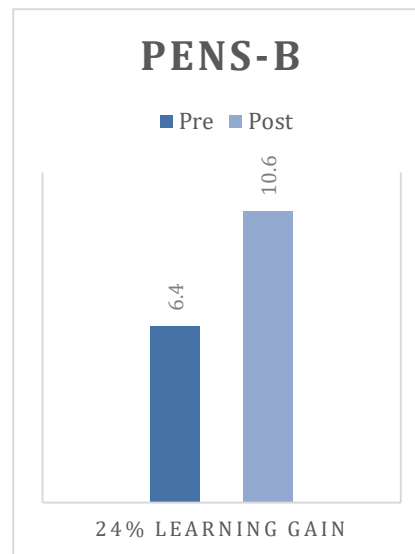


Figure 4: Math gains 2019-20

### Pre-Literacy Skills

The Family Partners program looked to measure pre-literacy readiness with the use of the Get Ready to Read (GRTR) screening tool. This 20-item assessment measures early literacy the year before kindergarten. The assessment is broken down into three key indicators of literacy readiness: print knowledge, linguistic awareness, and emergent writing.<sup>5</sup> The assessment is scored on a 20-point scale, and a higher score indicates higher knowledge of these pre-literacy skills. There are no subscales or cut-off scores for this screener, as it is intended to work on specific skills based on the missed items during the screening.

Of the total population in the Family Partners program, 36.4% of the children took both the GRTR pre- and post-assessments. From the children who took the pre- and post-assessment, there was, on average, a 70% learning gain. Of the eight children, seven scores increased, one stayed the same, and no scores decreased. The results would indicate positive improvement for children in the area of literacy skills during this period.

### Early Numeracy Skills

The Family Partners program looked to measure early numeracy skills using the Preschool Early Numeracy Skill- Brief (PENS-B) screening tool.<sup>6</sup> This 24-item screener covers counting, numerical relations, arithmetic operations, and numeral knowledge. The items are arranged in a progression according to the developmental attainment of specific numeracy skills.

The PENS-B uses a child's age and performance on the assessment to determine if a child is: below average, average, or above average. A child who receives a score of nine, for example, may be ranked average at three years old, but the same score at four years old may drop them into the below average range.

Of the total population in the program, 36.4% of the children took both the PENS-B pre- and post-assessments. To calculate the gain from pre- to post-test, the evaluators used a calculation of the Learning Gain. *Learning Gain* is the actual learning that took place between the pre- and post-test. This measurement looks at what students knew at the first test, and what learning they gained during

<sup>5</sup> [Get Ready to Read assessment areas](#)

<sup>6</sup> [Preschool Early Numeracy Skill-Brief](#)

the program. For example, if a student demonstrates knowledge of three of eight concepts taught on the pre-test and demonstrated knowledge of seven of eight concepts on the post-test, the learning gain would be 80%. We calculated this by subtracting the pre-test from the post-test and dividing by the amount available to learn.

From the children who took the pre- and post-assessment, there was, on average, a 28.3% learning gain. While individual scores increased for all eight children, the children developmentally stayed in the "below average" range except for two children. One moved from average to below average, and one moved from below average to average. See Table 4 for detailed scores.

Table 4: Snapshot of PENS-B Scores (N=8)

Pre-score	Pre-Rank	Post-Score	Post-Rank	Learning Gain
12	Average	18	Average	75%
12	Average	14	Below Average	25%
4	Below Average	7	Below Average	19%
1	Below Average	7	Below Average	32%
6	Below Average	8	Below Average	14%
5	Below Average	7	Below Average	13%
5	Below Average	8	Below Average	20%
6	Below Average	16	Average	75%
Average score= 6.4		Average score= 10.6		Average Learning Gain = 28.3%

### Non-Cognitive Skills

The Ages and Stages Questionnaire (ASQ) is a developmental progress assessment which includes five domains: Communication, Fine Motor, Gross Motor, Personal-Social, Problem-Solving. The ASQ can measure development between the ages of one month and five and a half years old. The specific questionnaire changes based on the child's age, so for this particular program, questionnaires were administered at 6-month intervals (42 months, 48 months, 54 months, 60 months). Children in our sample varied in how many times they were assessed based on their entry and exit dates from the program.

The Ages and Stages Questionnaire has a series of questions and activities for children to complete in each of the five domains. The assessment can

be completed by an outside evaluator or a caregiver to the child. For each item, the response is categorized as "Yes" (10 points), "Sometimes" (5 points), or "Not yet" (0 points). The child is scored for each item in each domain and summed to create a domain score. The score is then compared to age-specific cut-off scores based on averages of expected development at that age. Higher scores indicate greater demonstrated development in each area. Total scores are not measured, but for each category, scores are ranked using the age-appropriate scoring sheet, determining if the child is: Below Cutoff, at the Monitoring Zone, or Above Cutoff. Children who score in the Monitoring Zone or Below Cutoff should receive additional intervention and continued to be monitored for developmental delays or concerns.



The chart below shows the performance by testing instance, category, and across instances. Based on the results of Figure A, the lowest area of performance for the ASQ was Problem-Solving, while the highest areas were consistently Gross Motor. Overall, children in the program appeared developmentally on-track with few areas of concern. It should be noted that no children performed Below Cutoff at any point of assessment.

Table 5: Children performing "At or above cut-off" by age

	48 Month (N=12)	54 Month (N=19)	60 Month (N=12)	Averages across instances
Communication	83%	100%	100%	94%
Fine Motor	100%	94.7%	92%	95.6%
Gross Motor	91.7%	100%	100%	97.2%
Personal-Social	100%	89.5%	92%	93.8%
Problem-Solving	66%	100%	100%	88.7%

**42-Months ASQ:** Only one child completed the ASQ at 42 months. Therefore, results will not be summarized.

**42-Months ASQ:** At 42 months (3.5 years old), 12 children took the ASQ. The results showed that 100% of those children scored above the cut-off for Fine Motor and Personal-Social skills. One child was in the monitoring zone for Gross Motor during the 42-months ASQ; however, that child had moved above the cut-off at the next assessment. Two children were in the communication domain's monitoring zone, but by the 54-months ASQ, these children had moved above the cut-off. Four children were in the monitoring zone for the Problem-Solving area at 48 months, but all moved above the cut-off within six months. Out of all instances of the ASQ, this Problem-Solving area at the 48-month mark showed the greatest need for additional intervention, with only 66% of the group performing above the cut-off score and the rest measuring in the monitoring zone.

**54-Months ASQ:** At 54 months (4 years old), a total of 19 children took the ASQ, the most significant number at any point during the program, indicating most children were enrolled at that age. The results showed that 100% of those

children scored above the cut-off for Communication, Gross Motor, and Problem-Solving skills. One child was in the monitoring zone for Fine Motor at this age, but no additional assessments were completed after 54-months for that child. Two children were in the monitoring zone for Personal-Social, and at the next instance of testing the one child had moved above the cut-off, but the other remained in the monitoring zone, and dropped to the monitoring zone for Fine Motor during the 60-month ASQ as well.

**60-Months ASQ:** By 60 months (4.5 years old), all children were above the cut-off scores in all categories, with only one exception---the child who had remained in the monitoring zone for Personal-Social and slid into the monitoring zone for Fine Motor. Upon further review, the child had completed the correct assessment for their age but was nearly the youngest possible age for taking it, at only a month from being five years old.

### Kindergarten Readiness

There is no available Kindergarten Readiness Assessment (KRA) data available for the 2019-2020 service year due to COVID-19.

No children completed at least 18 SPARK lessons within the first year of the program, however, some students did complete close to 18 lessons.

However, previous research shows a correlation between SPARK Ohio program participation, preschool enrolment, and kindergarten readiness scores<sup>7</sup>. Based on a 2018 study, there is evidence that children living in economically disadvantaged environments performed better on a kindergarten literacy readiness assessment when they participated in at least 18 sessions of the SPARK program compared to peers who did not participate.<sup>8</sup> The research shows that as the number of SPARK sessions increase, so do the predicted KRA-L scores for both economically disadvantaged and non-disadvantaged children.<sup>9</sup>

Additionally, research in 2016 showed that while SPARK Ohio children score higher than others, those who combine it with preschool attendance have even more significant gains.<sup>10</sup>

Of the children in the program, 68% reported enrollment in preschool or childcare, signifying the potential for more learning. However, there was no difference between the mean or median number of lessons completed between students who attended an early learning program and those who did not.

Table 6: Early learning enrollment and SPARK Lesson Completion

Students who <u>did not</u> attend an outside early learning program	Total # of Spark Lessons Completed	Students who <u>did</u> attend an outside early learning program	Total # of Spark Lessons Completed
1	0	1	1
2	0	2	3
3	7	3	3
4	9	4	8
5	9	5	8
6	17	6	9
7	17	7	9
		8	9
		9	10
		10	10
		11	10
		12	11
		13	11
		14	12
		15	12
<b>Mean</b>	8.4	<b>Mean</b>	8.4
<b>Median</b>	9	<b>Median</b>	9

<sup>7</sup> It is important to note that this study was based on Ohio's previous version of the Kindergarten Readiness Assessment.

<sup>8</sup> [Economic Disparities: SPARK Ohio and Narrowing the Kindergarten Readiness Gap](#)

<sup>9</sup> [Predicted Rate of Increase compared to SPARK dosage](#)

<sup>10</sup> [SPARK Ohio: An Early Childhood Program Description and Evaluation](#)

## Outcome 2: Family demonstrates increased family literacy.

Outcome two is focused on families increasing their literacy involvement through reading together and receiving literacy services when a need is identified. This outcome originally included attending community-based literacy programs as a family, but due to canceled events in 2020, those measures are not included in the evaluation. Parents reading books together was measured through self-reports from families during the focus group. The second indicator concerning literacy services includes program staff reports about the frequency and type of literacy referrals.

Table 7: Key Findings for Outcome 2

<i>Families...</i>	Measures	Key Findings
<b>read books together</b>	Families self-report through focus group	Families in the focus group described increases in reading, as well as an increased understanding of the importance of reading with their child.
<b>receive appropriate family literacy services</b>	Referrals made to literacy services	During the program year, 3 referrals were made, and 2 caregivers accessed services.

**Summary of findings:** These findings showed initial developments of literacy skill building through reading time, literacy services, and other community literacy connections. During this year of programming, three families received referrals to additional literacy services. Due to the limited involvement in the home during COVID-19, it became hard to recognize service needs and make connections. However, of the three families who were referred to services, two families persisted in accessing services.

In addition to these referrals, this evaluation found that families report higher levels of reading after participation in the SPARK portion of the Family Partners program. Families reported reading on their own, and staff reported possible enrollment in the local Dolly Parton Imagination Library program. This program allowed families to receive additional books to read, but unfortunately, the participation data for this was not available. During this program year, families also had the option to attend virtual storytime during the COVID-19 lockdown, and while many families participated, that data was not available.

## Indicator-Level Findings for Outcome 2

The Family Partners program looked to build three Protective Factors through family literacy activities. First, the program looked to demonstrate Parent Resilience, Knowledge of Parenting & Child Development, and Social and Emotional competence of children. The findings show the beginning stages of this program provided opportunities, access, and encouragement towards families prioritizing literacy skill-building.

### *Families read books together*

**Emerging reports show an increased understanding of the importance of literacy activities.** The number of total books read by families was not reported in 2020. However, families were encouraged to read books together through two referred services. First, parents were connected to the Dolly Parton Imagination Library where families received books and encouraged to read with their children. Second, families were encouraged to complete the preschool read-and-write program, allowing them to read books and submit tickets for raffle prizes based on the number of books read. Family Partners staff reported that two families won raffle prizes such as bikes and gift cards. Data related to the enrollment in the Dolly Parton Imagination Library were not available.

**Family Partners built new opportunities for literacy learning when programming moved virtual in 2020.** In addition to the program encouraging families to read together for these raffles, families were invited to virtual storytime through a Facebook group. While no data is available on the storytime session viewership, staff report this did increase family participation in literacy activities.

*"Before the program [I read to my child] probably once a week, after I learned how important it was I read every night and he reads or I read."*

--

*Family Partners Parent, 2020*

### *Families receive appropriate family literacy services*

**Family partners supported connections to local literacy initiatives.** During year one of the program, three families were identified as needing additional literacy services. Two of these families were supported through warm handoffs to the referred programs, and one family was given resources to follow-up on their own. The two families who received introductions persisted in services beyond the introduction, indicating that introductions to services may be beneficial for persistence.

Referrals were made to resources such as Seeds of Literacy, CMSD's Parent Institute, and Cuyahoga Community College educational services. Due to COVID-19, families did not participate in additional offerings of community-based literacy programming.

### Outcome 3: Parents become more powerful learning partners.

This outcome measures parental gains in teaching, affection, responsiveness, encouragement, and overall participation in their child's learning activities. For this assessment, parent teaching is measured through The Parenting Interactions with Children: Checklist of Observations Linked to Outcomes (PICCOLO) checklist. Family Partners staff observed parent- and child- interactions and used the checklist to indicate skills related to positive teaching. The other domains of the PICCOLO checklist were not used in year one, and instead, the Family Partners Parent Survey responses were used to evaluate parents on three domains related to affection, responsiveness, and encouragement of their child. Lastly, case records from the SPARK Ohio program are used to measure parent participation. The table below indicates the key findings, and the following narrative provides details on each domain.

Table 8: Key Findings for Outcome

Parents become more powerful learning partners...	Measures	Key Findings
through teaching interactions	PICCOLO Teaching	The average learning gain for the group was 77.5%, and 6 of the 10 parents received a total score of 16 on the post-test, the highest score available.
through affectionate interactions	Parent Survey questions 17-18 results: <ul style="list-style-type: none"> <li>- <i>I am happy being with my child.</i></li> <li>- <i>My child and I are very close to each other.</i></li> </ul>	The highest number of parents self-reported feeling close to their child.
through responsive interactions	Parent Survey questions 19-20 results: <ul style="list-style-type: none"> <li>- <i>I am able to soothe my child when he/she is upset.</i></li> <li>- <i>I spend time with my child doing what he/she likes to do.</i></li> </ul>	Over 75% of parents reported that they often or almost always respond to their child's interest by joining their activities. While only 25% of families struggle to respond to the emotional needs of their child.
through encouraging interactions	Parent Survey question 15 <ul style="list-style-type: none"> <li>- <i>I praise my child when he/she behaves well.</i></li> </ul>	While many parents stated that they often praise their child, there were
by completing the full SPARK curriculum	SPARK Lesson log review	The average family in the program completed 8 lessons during their time.  A total of 4 families completed the entire 4-year-old SPARK curriculum.

**Summary of findings:** Parents described and demonstrated increased skills related to teaching their child, showing affection, responsiveness, and encouragement. The PICCOLO teaching domain results show that parents are increasing their skills used to teach their child, a core piece of the SPARK curriculum. In addition, parents self-reported how they currently rate their affection, responsiveness, and encouragement through the Parent Survey questions. This information can be used to form year-two decisions on plans for parent support. Finally, the completion of the SPARK curriculum by four families during this year is encouraging, as are the high number of continued lessons throughout the pandemic.

### Indicator-Level Findings for Outcome 3

This outcome looked at the overall support parents provided to their child's early learning and the skill-building behaviors that would indicate that support. The PICCOLO is used to assess what parenting behaviors are working and develop interventions to help parents improve. During 2020, Family Partners was only able to assess using the Teaching Domain of the assessment, leaving the remainder to be measured through a survey administered to families at the conclusion of the program.

#### *Parents make gains on teaching interactions*

The Teaching Domain consists of eight items that are observed during parent/caregiver interactions with the child. The observing party scores each item on a continuum of: None, absent, didn't see (0), Some, barely there, seen sometimes (1), or Lots, consistently there, seen often (2). Scores in the Teaching Domain can range from 0-16, with the higher scores indicating more frequent teaching between the parent and child.

There were ten parents/students who completed the PICCOLO pre- and post-assessments, 45% of the total population in the program. The average pre-test score was 12, while the post-test average was 15.1. All ten families who took the pre- and post- increased their score. The average learning gain for the group was 77.5%, and considering the total score for this domain was 16, the average score indicates higher levels of learning. The higher score indicates more evidence of this learning domain between parent and child interaction; in this case, six of the ten parents received a total score of 16 at post-test, the highest score available.

This indicates that families were learning skills in teaching their children and making gains in this area during the course of the program. Outside of this assessment, parents self-reported during the focus group that they now complete more teaching activities with their child.

## One Mother's Journey on Becoming a More Powerful Learning Partner

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While working with the Family Partners team, Jean indicated concern about her child's development. Due to the experience with their older children not getting early interventions Jean hoped to address the concerns early.

Working with the Family Partners team, Jean was able to see the concrete data related to their child's social-emotional and academic development. Once the Family Connections staff walked through the assessment results with the family, they were able to make decisions together.

The results indicated a need for further assessment and the caregiver and Family Partners staff worked together to access additional testing at the district's special education office. This relationship allowed for Jean to see the option in front of her and make decisions about the early learning needs of her child.

Through this process Jean gained what she needed to make decisions in the best interest of her child. Working in combination with all the Family Partners staff they were able to transfer the child into a special education program and provide ongoing developmental support.

*\*Please note all names have been changed to protect the privacy of program participants.*

*Parents make gains on teaching affection, responsiveness, and encouragement assessments*

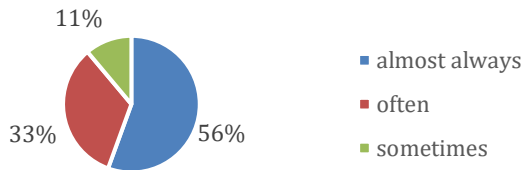
The next three indicators are summarized together, as they were all measured using the Family Partners Parent Survey. This survey was adapted from the Protective Factors Survey, administered to families electronically through a Google Form.<sup>11</sup> For the purpose of this year's evaluation, the following questions have been coded to each domain, and responses will be used to measure parent gains for the three domains. The survey was taken by nine families in the program following the completion of the first year.

Table 9: Parent Survey Response Scale

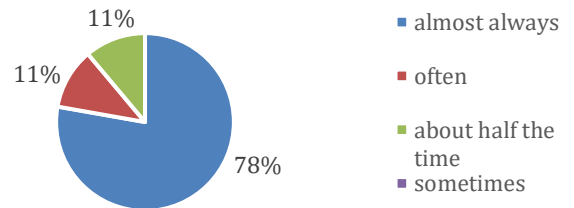
Almost Always	Often	About half the time	Sometimes	Almost Never
5	4	3	2	1

**Affection**

I am happy being with my child.

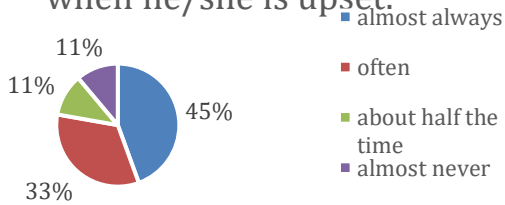


My child and I are very close to each other.

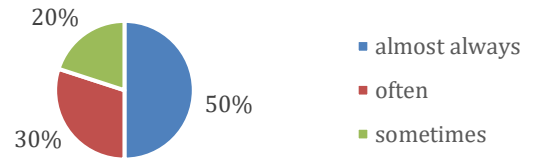


**Responsiveness**

I am able to soothe my child when he/she is upset.



I spend time with my child doing what he/she likes to do.



**Encouragement**

I praise my child when he/she behaves well.



<sup>11</sup> Background on the [Protective Factors Survey and scoring](#)



The findings indicate that of the three domains, the most parents self-reported "almost always" on the affection question "My child and I are very close to each other." The other findings also show around half of the participants felt responsive to their child, first when reporting on being able to respond to their child's emotional needs, and also when describing responding to their interest. Parents had mixed responses when it came to encouraging their child, with 56% saying that they do it "often," and only 33% stating that they do it "almost always." These responses can be used to inform the focus of parent coaching activities in year two.

### *SPARK Lesson Completion*

As discussed early in this report, participation in the SPARK Ohio program has been proven to advance kindergarten readiness skills. Additionally, the SPARK program is a home-visit learning program with parent involvement, allowing for parents to participate in their child's learning. During the first year of service, families completed, on average, eight of the 12 SPARK Lessons for 4-year-old children. Four of the 22 children in the program (18%) completed all 12 lessons during their time in the program.

For the families who stayed actively enrolled in the program, SPARK Lessons were completed about one per month, continuing through the pandemic. Unfortunately, four families had their last SPARK lesson during the March/April 2020 period as

lockdown orders went into effect. It is unknown why those families did not continue programming, but COVID-19 may have been a contributing factor in the low completion rates.

It should be mentioned that families are able to begin the SPARK curriculum at three years old, and four of the 22 children did complete lessons prior to the start of this program in September 2019. For those children, the greatest number of lessons completed total were 17 lessons. Parents in the focus group indicated that the SPARK program was able to help them learn how to teach their children better. Parents said they learned about the importance of reading and indicated that they had more skills when working with their child due to these sessions.

*"One of the things that [they] taught us to do is modeling, so say my daughter has a hard time writing a letter. Instead of telling her telling her to do it, showing and discussing it and the letting her try it."*

*- Family Partners Parent, 2020*

## Outcome 4: Parent health and mental health is strengthened.

Outcome four addresses all five Protective Factors through gains in emotional regulation, problem-solving, confidence-building, social-support, and parenting skills. This outcome is measured through parent involvement in OhioGuidestone's mental health services and through stories from staff and families during year one. Some indicators have been combined in this outcome due to high levels of cross over in their measurement and findings.

Table 10: Key Findings for Outcome 4

Parents ...	Measures	Key Findings
<ul style="list-style-type: none"> <li>manage negative emotions by...</li> <li>-receiving appropriate mental health services</li> <li>-developing a plan for managing stressful situations/triggers &amp;</li> <li>-FP Staff demonstrates parents are valued</li> </ul>	<ul style="list-style-type: none"> <li>- # of referrals, # enrolled, # closed successfully, # continuing service</li> <li>- Parent and staff self-reports through interviews</li> </ul>	<p>Only 1 of 22 parents/caregivers engaged in mental health services during the program year. Two referrals were made in total, but one declined service. However, 7 families created stress management plans.</p>
<ul style="list-style-type: none"> <li>-make decisions in a variety of situations</li> <li>-buffering children from stress</li> </ul>	<ul style="list-style-type: none"> <li>- Parent and staff self-reports through interviews and focus groups</li> </ul>	<p>Family Partners staff described a variety of situations in which families buffered children from stress and made important family decisions.</p>
<p>Families participate in learning activities with their child outside of the SPARK curriculum</p>	<ul style="list-style-type: none"> <li>- Parent and staff self-reports through interviews and focus groups</li> </ul>	<p>Parents reported more understanding of age-appropriate activities with their children, and Family Partners staff described learning activities that they have been sharing on Facebook.</p>
<p>Family members create opportunities to build social connections for resource sharing and support</p>	<ul style="list-style-type: none"> <li>- Parent and staff self-reports through interviews and focus groups</li> </ul>	<p>There were limited results due to the COVID-19 pandemic.</p>
<ul style="list-style-type: none"> <li>-create a developmentally supportive environment</li> <li>-respond to the child's specific developmental needs</li> <li>-effectively manage child's behaviors</li> </ul>	<ul style="list-style-type: none"> <li>- Parent and staff self-reports through interviews and focus groups</li> </ul>	<p>Parents in the program described learning how to more effectively manage their child's behaviors and gave examples of new techniques they learned from Family Partners staff.</p>

**Summary of Findings:** Families and Family Partner staff described growth in the areas of managing emotions and stress, teaching their children, and supportive teaching environments. Parents described new skills for managing their child's behavior and educational needs, and expressed they learned many new skills in working with their children. It is unknown how this outcome would have been affected without the pandemic forcing virtual schooling, but it appears that parents found new skills and staff found new models that enhanced child development during this time. This year there were limits to the social connections formed by the program due to the pandemic, with some engagement in virtual formats.

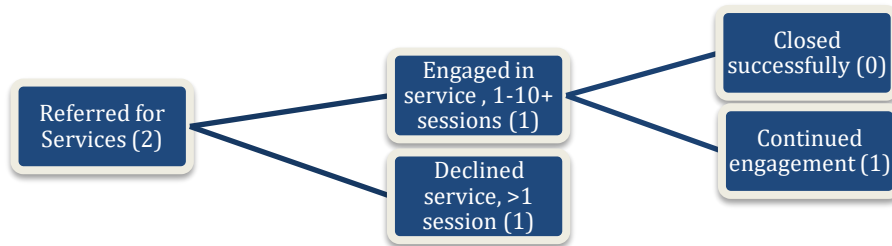
### Indicator-Level Findings for Outcome 4



*While working with OhioGuidestone, one mother was “able to see and acknowledge her strengths more, reduce her stress and anxiety, and gain confidence.”*

SPARK Program Coordinator, 2020

Figure 5: Number of parents in mental health services



*Parents receive appropriate mental health services*

As you can see in Figure 5 above, two of 22 parents were referred to mental health services with OhioGuidestone during 2019-20. One of those families continued treatment and is still receiving services, however, the other declined service after the referral was made. Through the course of the first year, five times as many children were referred for mental health services than parents. Family Partners staff found that they initially struggled to enroll adults, especially when services were offered early in the program time.

The original service model included meeting for services in families' homes so that the transition into services would be easier for families. Due to the pandemic, those plans were unable to continue. However, the SPARK staff and OhioGuidestone staff attempted rapport building through a neighborhood drive where they completed physically-distanced introductions and dropped food and supplies to families who had requested items. With this combined effort, the staff expressed that comfort grew with families over time.

*Parents develop a plan for managing stressful situations/triggers.*

During the course of the program, seven families completed stress management plans with the OhioGuidestone counselor. Program staff provided concrete examples of families managing stress, whether it was related to the pandemic, managing school from home, or the difficult decisions one family made to place their child temporarily with another family member to ensure the health and safety for the child. During the focus

group, parents described stress management skills that they are currently using while working with their children, and many shared that it was the Family Connections Program Coordinator who taught them those skills.

*Family Partners staff demonstrate parents are valued.*

There was not enough data available during 2020 to provide a definitive evaluation of this measure, however, families participating in the program named the Family Connections Program Coordinator as a program staff member who made them feel valued during the focus group.

*Parents make a variety of decisions / problem-solve when met with challenges.*

During the interviews, program staff described that families often made decisions in the best interest of their family unit and children. Program staff provided multiple examples of families using time with them to discuss and make decisions.

For example, one family continued to make a healthy choice to support their child's needs even after it appeared that the parents had separated. "Seeing the parents show up together for the child at school or meetings, was commendable, and their ability to continue to co-parent strong," according to Family Partners staff.

In addition, one family used their work with the OhioGuidestone therapist to make a big decision around sharing with their child that their father was incarcerated. Using the support of Family Partners mental health services, this mother was able to

consider the benefits and challenges of sharing the information with her child. Ultimately, she worked through the choice with the OhioGuidestone counselor and was able to determine that she would wait to share the information with her child when they were older. Through the support of OhioGuidestone, she was able to weigh this decision and was empowered to move forward as she was comfortable.

These examples are just a few of many examples of families making decisions and problem-solving when met with challenges.

*Families participate in learning activities with child outside of SPARK curriculum*

The addition of family activities shared in the Facebook group are the biggest indicators of growth in this area. Parents and staff describe a variety of seasonal educational activities that are being shared with the group online. This social connection and the support given to families around schooling during this time appear beneficial and parents have been thankful for those ideas, especially since virtual schooling.

*Family members create opportunities to build social connections for resource sharing and support.*

Due to the pandemic, plans around building parent connections were adjusted. Some families were able to engage through a "Dream Team" collaboration where parents met regularly and created a social connection plan together. According to the Promise Initiative Manager, "The families that assisted in creating that social connection plan were amazing and talked about the skills they learned and how they wanted to share them with other families. They were empowered, inspired, and encouraged to keep going."

*Parents support their child's development, manage behaviors, and respond to their needs*

This indicator also describes parents being able to effectively manage their child's behaviors. Parents reported that they learned new skills for managing behavior, and Family Partners staff described modeling activities and reinforcement when parents appropriately responded to their child's needs.

**Outcome 5: Child physical and emotional health develops appropriately.**

This outcome addresses how children make gains in social and emotional development during their time in the program, specifically through mental health interventions. In year one of the Family Partners program, children completed initial trauma and social emotional development screenings. Due to the importance of understanding the long-term scope of child wellbeing and social emotional development, the initial findings from the SPARK Trauma screening, and the Ages and Stages- Social Emotional Questionnaire (ASQ-SE) will not be reported in year one. In addition, the rolling enrollment, and the cadence of these screenings did not produce enough data to gain an accurate perspective of the social emotional development through year one.

*Table 11: Key Findings for Outcome 5*

	Indicator	Key Findings
Child makes gains on age appropriate social and emotional development assessment.	ASQ-SE Scores	ASQ-SE scores will be reported after additional data is collected in 2021.
Children receive appropriate emotional or mental health services.	SPARK Trauma Screening # of children enrolled/persisted with OhioGuidestone	5 of 11 referred children persisted in mental health services beyond 1 session. Of those families, 2 successfully closed with OhioGuidestone and 3 are continuing service.

**Summary of Findings:** During this program, 11 children were referred in mental health services, and five enrolled and stayed engaged. While there were limitations to the evaluation of this outcome due to limited child-level data about mental health services during 2020, the Family Partners team has completed initial screenings of current trauma risks, identified needs for mental health services, and begun planning for future program development needs around child wellbeing.

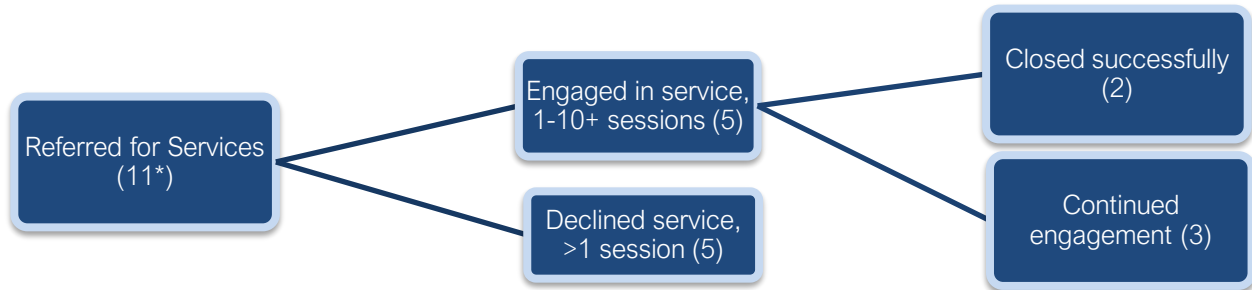
*"I had a lot of anxiety [when teaching my child before], and [was] doing a lot of stuff. [They] taught me to calm down and then my children can calm down and receive the information. Me meeting them with stress is not helpful. I am trying to get better at it every day."*

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*- Family Partners Parent, 2020*

## Indicator-Level Findings for Outcome 5

Figure 6: Number of children in mental health services



\*one referral is recent enough to not know if it has resulted in services.

A long-term goal of the Family Partners program is to build protective factors and supports for the whole family, including the child's social emotional health. The Family Partners team has used the collected data in year one to understand each child's social emotional health through screenings of current trauma risks, and has used this data to understand the needs for mental health services, and for future programming to support child wellbeing. Due to the 2020 pandemic, and limitations to data collection and sharing related to trauma and social emotional health, a deeper examination of assessment data will be used in future evaluations to understand the long-term outcomes of this program on the participant's mental wellbeing.

### *Children receive appropriate emotional or mental health services*

OhioGuidestone provided child and parent therapy for children in the Family Partners program. During 2020, 11 children were referred in mental health services, and five enrolled and maintained their engagement with the program. An additional five children were referred to services but declined the referral and one child recently was referred, but no results from that referral are available.

Data sharing agreements in year two will allow for more detailed reporting on the effects of mental health services on those enrolled.

### *Ages and Stages- Social Emotional Assessment*

During the first year of the program, the Ages and Stages- Social Emotional (ASQ-SE) assessment was introduced to gain an understanding of the current social emotional needs of the children in the program.

The ASQ-SE measures seven areas of child social-emotional development:

- 1) Self-regulation
- 2) Compliance
- 3) Social-communication
- 4) Adaptive functioning
- 5) Autonomy
- 6) Affect
- 7) Interaction with people

This assessment is used as a screening tool and an indicator for the child's developmental status in regard to the aforementioned areas. With the high prevalence of ACEs and stress for children in low-income households, it is understood that social-emotional development is a critical developmental component for children in the program. The Family Partners staff has used initial data from year one to help guide referrals and for future program planning. The ASQ-SE scores will be reported after additional data collection in 2021.

**Outcome 6: Family relationships are strengthened.**

This outcome is linked to the Protective Factor *Resilience* and is measured through parent gains as reported by parents and Family Partners Staff. This outcome is connected to Family Partners resources, partnership, and training opportunities. In the table and following narrative, the indicators related to family relationships and Family Partners Staff connection to those relationships are reported.

*Table 12: Key Findings for Outcome*

	<b>Indicator</b>	<b>Key Findings</b>
<b>Family Partners staff and families document family strengths, resilience, and resources</b>	Parent and staff self- reports through interviews, and General Service Log	Initial documentation indicates consistent reporting of resources for families. The findings do not indicate regular notes about strengths or resilience.
<b>Families indicate strength and resilience on Family Partners Survey</b>	Parent reports on Family Partners Survey	Parents varied in their responses on the Parent Survey, but initial findings show there could be benefit in additional social connections, resources, and Family Partners support.
<b>Family Partners staff ensure appropriate resources through partnerships, and training</b>	Parent and staff self-reports through interviews; Staff meeting note review; Promise meeting note review	The current resources and partnerships for Family Partners appear adequate for the identified needs. However, family needs and the related training for staff are fluid. Staff appear to be planning for these needs as they are identified.

**Summary of Findings:** This outcome showed that Family Partners has served the needs of families when it comes to providing both community and physical resources. However, Family Partners has not collected significant data on parent strength and resilience in case records. Additional documentation will be needed in the future to measure this outcome. Finally, staff are developing an understanding of family needs and have begun staff development and training to address these concerns.

*"I feel like the Spark Program has change my Life as a First time Parent. I'm still Learning n Growing as a Person as a Parent n The Learning techniques have helped my Son as well. The teaching Materials were a Blessing. I'm forever Grateful for the Spark Program."*

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*Family Partners Parent, 2020*



## Indicator-Level Findings for Outcome 6

### *Family Partners staff and families document resilience, strengths, and gained resources.*

This indicator was measured through a review of the General Service Log and the SPARK Case records. The General Service Log report shows that while Family Partners staff documented the resources gained, details about family resilience and strengths were lacking. The log lists the type of service received (visit, call, text, etc.) and includes comments about the outcome of that interaction. A review illustrates Family partners staff provided a high level of resources to families, including masks, books, care packages, school supplies, and other academic materials and lessons. Families reported these resources being incredibly helpful, stating appreciation that Family Partners staff "didn't forget about us."

The logs sometimes included notes about family concerns, integrated support efforts, and needs. A more formal and expanded definition of what should go in these logs regarding which parent(s) participate in the SPARK lessons, family resilience, and strengths will assist in measuring these indicators in the future.

### *Families demonstrate resilience, strengths, and gained resources.*

The following table shows parent responses to questions about connections, resources, and support on the Family Partners Family Survey. A total of nine parents completed the survey. Results were collected between September and October 2020, and therefore indicate family experiences during the COVID-19 pandemic. Table 13 shows the prevalence of each answer to the left of the responses.

Table 13: Parent Survey Questions 7-10

When I am lonely, there are several people I can talk to.	I would have no idea where to turn if my family needed food or housing.	I wouldn't know where to go for help if I had trouble making ends meet.	If there is a crisis, I have others I can talk to.
2 – Strongly Agree	1 – Strongly Agree	1 – Strongly Agree	3 - Strongly Agree
1 – Agree	0 – Agree	2 – Agree	0 – Agree
3 – Neutral	4 – Neutral	2 – Neutral	2 – Neutral
2 - Disagree	1 – Disagree	2 – Disagree	3 – Disagree
1 – Strongly Disagree	3 – Strongly Disagree	2 – Strongly Disagree	1 - Strongly Disagree

The small sample size presented limitations when it comes to generalizing to the full program. However, from the small snapshot above, there are indications that Family Partners' families need additional support in connecting to others, connecting to resources, and understanding of the scope of Family Partners.

### *Family Partners staff ensure appropriate resources, partnerships, and trainings.*

As discussed above, Family Partners provided a wide variety of resources for families in the first year. The staff also mentioned community resources, community health clinics, and other community programming during their interviews. The initial trainings and meetings indicate that Family Partners Staff are gaining skills in understanding the Protective Factors, the two-generation approach, and trauma-informed care. More broadly, the January 2020 Promise Meeting included learning and reflecting on the Protective Factors and discussing how they can serve families. Participants in this meeting reflected on each of the Protective Factors, and the most frequent Protective Factor discussed was *resilience*. This ongoing learning can be supplemented by additional family needs assessments and ongoing learning from data such as that in the Family Partners Family Survey

## Limitations

### Data Collection

Since the pandemic in 2020, some program activities were incomplete or not completed at all. Due to these limitations, the evaluation looked to alternative data sources when possible, but some were not available at the evaluation time. The first absent data is the Kindergarten Readiness Assessment (KRA), which was not completed in 2020. Outcome 5 had multiple limitations to reporting in 2020. First, there was a limitation to access to child- and family-level data from OhioGuidestone, Considering the private nature of mental health records and the legal permissions needed to release this data, OhioGuidestone could not release data related to child- and family-level mental health services. Second, the administration and timing of the Ages and States Questionnaire – Social Emotional (ASQ-SE) was difficult due to the hours of program exposure, as well as the COVID-19 pandemic. Finally, the SPARK Trauma screening results were not available for the evaluation in 2020.

### Varied Participation in Family Focus Group

The evaluation team interviewed families using a focus group designed around family-level experiences in the program during 2020. Due to the randomized nature of focus group recruitment, no families who participated in mental health services attended the focus group. Due to this limitation, there are some unanswered questions about families' experiences in these services.

### Sample Size

The Family Partners program serves a small number of families deeply; therefore, the potential sample sizes in the various data sources were small to begin with. In addition, the fluidity of the entrance and exit into the program for families, combined with participation, meant that some data were not available for some children, creating many instances in the evaluation where data was only available for a handful of families.



## Appendix A: Revised Family Partners Outcomes Framework

Guiding Theoretical Framework: Two-Generation Approach | Protective Factors | Self-Healing Communities Model | Webs of Support

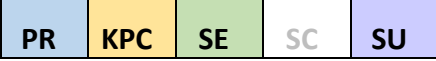
The Protective Factors Approach is implemented through small, but significant, changes in existing practices.  
 Progress toward our outcomes align with the Protective Factors according to the following key:

<b>PR</b>	Parent Resilience	<b>KPC</b>	Knowledge of Parenting & Child development	<b>SE</b>	Social & Emotional competence of children	<b>SC</b>	Social Connections	<b>SU</b>	concrete <b>SU</b> pport in times of need
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Long-term outcome #1	Intermediate outcome	Short-term outcome	Indicator	How/Inputs	How measured
Child demonstrates healthy development and school readiness  Most relevant Protective Factors:  <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="background-color: #a0c4ff; padding: 2px 5px;">PR</div> <div style="background-color: #fff2cc; padding: 2px 5px;">KPC</div> <div style="background-color: #c6e0b4; padding: 2px 5px;">SE</div> <div style="background-color: #f4cccc; padding: 2px 5px;">SC</div> <div style="background-color: #d9e1f2; padding: 2px 5px;">SU</div> </div>	Child meets developmental educational milestones	Children demonstrate pre-literacy skill acquisition.	Children make gains on age appropriate pre-literacy assessment	Parent Partner	Get Ready to Read! (GRTR) pre- and post-assessments
		Children demonstrate early numeracy skill acquisition.	Children make gains on age appropriate early numeracy Assessment	Parent Partner	Brief Preschool Early Numeracy Skills (PENS-B) pre- and post-assessments
		Children demonstrate non-cognitive skill development	Children make gains on age appropriate non-cognitive skill Assessment	Parent Partner and Parents	Ages and Stages (ASQ) pre- and post-assessments
		Children demonstrate kindergarten readiness	Children have higher comparative scores on kindergarten assessment		SPARK Lesson Completion

Long-term outcome #2	Intermediate outcome	Short-term outcome	Indicator	How/Inputs	How measured
Family demonstrates increased family literacy  Most relevant Protective Factors:  <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="background-color: #a0c4ff; padding: 2px 5px;">PR</div> <div style="background-color: #fff2cc; padding: 2px 5px;">KPC</div> <div style="background-color: #c6e0b4; padding: 2px 5px;">SE</div> <div style="background-color: #f4cccc; padding: 2px 5px;">SC</div> </div>	Families participate in quality literary activities that develop different literacy skills	Families engage in interactive literary activities	Families read books together	Parent Partner	# of families signed up for Dolly Parton Library
					SPARK case record
					Qualitative stories from FP program staff <sup>▲</sup>

			Families attend community-based literacy programming	Promise Initiative Manager Community partners	Not measured in 2020 Not measured in 2020
			Families receive appropriate family literacy services	Parent Partner Integrated Support Team	# of families enrolled in services # of families who persist in services Qualitative stories from FP program staff

Long-term outcome #3	Intermediate outcome	Short-term outcome	Indicator	How/Inputs	How measured
Parents becomes more powerful learning partners   Most relevant Protective Factors:	Parent behaviors supporting early child development increase	Parents demonstrate teaching interactions with their children	Parents make gains on teaching interaction assessment	Parent Partner	PICCOLO (Teaching Domain) pre- and post-assessments
		Parents demonstrate affectionate interactions with their children	Parents make gains on affection interaction assessment	Parent Partner	Parent Survey Responses: Questions 17-19
		Parents demonstrate responsive interactions with their children	Parents make gains on responsiveness interaction Assessment	Parent Partner	Parent Survey Responses: Questions 19- 20
		Parents demonstrate encouraging interactions with their children	Parents make gains on encouragement interaction Assessment	Parent Partner	Parent Survey Responses: Questions 15
		Parents participate in children’s school activities	Families compete full SPARK Curriculum	Parent Partner	SPARK attendance - SPARK case record

Long-term outcome #4	Intermediate outcome	Short-term outcome	Indicator	How/Inputs	How measured					
Parent health & mental health is strengthened  Most relevant Protective Factors:  <table border="1" data-bbox="96 402 513 461"> <tr> <td style="background-color: #ADD8E6;">PR</td> <td style="background-color: #FFD700;">KPC</td> <td style="background-color: #90EE90;">SE</td> <td style="background-color: #FFA07A;">SC</td> <td style="background-color: #9370DB;">SU</td> </tr> </table>	PR	KPC	SE	SC	SU	Parent psychological distress decreased	Parents manage negative emotions	Parents receive appropriate mental health services	Parent Partner Integrated Support Team Family Strengths Coach	# of parents referred, enrolled and successfully closed or continued
	PR	KPC	SE	SC	SU					
	Family Strengths Coach	# of parents who persist in mental health services								
	Parents develop plan for managing stressful situations/triggers	Parents Family Strengths Coach	# of parents who develop stress management plan							
	FP staff demonstrate parents are valued	Family Connections staff Ohio Guidestone staff Promise staff SOCF staff	Qualitative stories from parents in program							
	Parents problem-solve when faced with challenges	Parents make decisions in a variety of situations	Parent Partner Family Strengths Coach Integrated Support Team	Observation; SPARK case record						
		Parent	Qualitative stories from parents in program							
		Parents buffer children from stress	Parent Partner Family Strengths Coach Integrated Support Team	Observation; SPARK case record						
	Parent	Qualitative stories from parents in program								
	Parent confidence increased	Parents recognized as significant resources for own family members and each other	Families participate in learning activities with child outside of SPARK curriculum.	SPARK Curriculum modeling	Qualitative stories from parents in program					
	Family members are less socially isolated	Family members create opportunities to build social connections for resource sharing and support	Integrated Support Team	# supportive relationships						
				# relationships with families of same-age children						
# report willing to accept help from others										

		Parents support healthy cognitive and emotional development of children	Parents create developmentally supportive environment	Parent Partner	Qualitative stories from parents in program
					# parents who identify goals for children and plan for achieving them
		Parents effectively manage child behavior	Parent Partner	Qualitative stories from parents in program	
		Parents respond to child's specific developmental needs	Parent Partner	# parents enrolling children in developmental services when referred	

Long-term outcome #5	Intermediate outcome	Short-term outcome	Indicator	How/Inputs	How measured
Child physical and emotional health develops appropriately  Most relevant Protective Factors:  <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="background-color: #ADD8E6; padding: 2px 5px;">PR</div> <div style="background-color: #FFD700; padding: 2px 5px;">KPC</div> <div style="background-color: #90EE90; padding: 2px 5px;">SE</div> <div style="background-color: #FFDAB9; padding: 2px 5px;">SC</div> <div style="background-color: #9370DB; padding: 2px 5px;">SU</div> </div>	Child meets developmental physical and emotional health milestones	Children demonstrate social and emotional development	Children make gains on age appropriate social and emotional development assessment	Parent Partner and Parents	Ages and Stages (ASQ-SE) pre- and post-assessments
			Children receive appropriate emotional or mental health services	Parent Partner	<b>SPARK Trauma Screening</b>
				Parent Partner Family Strengths Coach Integrated Support Team	# of children referred and enrolled based on recognized needs
				Family Strengths Coach	# of children who persist in mental health services

Long-term outcome #6	Intermediate outcome	Short-term outcome	Indicator	How/Inputs	How measured
Family relationships are strengthened  Most relevant Protective Factors:  <div style="display: flex; justify-content: space-around; border: 1px solid black;"> <span style="background-color: #ADD8E6; padding: 2px 5px;">PR</span> <span style="background-color: #FFDAB9; padding: 2px 5px;">KPC</span> <span style="background-color: #FFC0CB; padding: 2px 5px;">SE</span> <span style="background-color: #FFA07A; padding: 2px 5px;">SC</span> <span style="background-color: #9370DB; padding: 2px 5px;">SU</span> </div>	Family emotional well-being increased	Family strengths and resilience are affirmed	FP staff and families document family strengths, resilience, and resources	SPARK Coordinator and Parent Partner intake records Family Strengths coach	SPARK case record
			Indicator changed to: Families indicate strength and resilience on Family Partners Parent Survey	Parent Partner	Qualitative stories from FP Staff
		FP staff build collaborative relationships with partners to strengthen families and the community	FP staff ensure pathways to appropriate resources through formal partnerships with providers Community partner staff understand Protective Factors Approach	Promise Initiative Manager Community partners	# information/training resources distributed
				Promise Initiative Manager Community partners	Qualitative stories from FP Staff



## Process and Implementation Outcomes 2020

Process Outcomes		How Measured
Partnership Improvement	How can the partnership among the three leading partners in the initiative be strengthened and/or improved in the future?	Qualitative stories from FP Staff
Integrated Support	How did year one implementation of the program support the process of families? What improvement can be made in the future?	Qualitative stories from FP Staff
Evaluation Capacity	How can the capacity for program evaluation and integration of data-collection into the day-to-day program management functions be strengthened and/or improved across partners in the future?	Qualitative stories from FP Staff
Program Improvement	What are the biggest opportunities for program improvement?	Qualitative stories from FP staff