Standards of Quality for Family Strengthening & Support

Developed by the California Network of Family Strengthening Networks
Adopted by the National Network of Family Support and Strengthening Networks

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# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>PAGE NO.</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Introduction</td>
</tr>
<tr>
<td>4</td>
<td>Introduction to Family Support</td>
</tr>
<tr>
<td>6</td>
<td>Introduction to the Strengthening Families Approach</td>
</tr>
<tr>
<td>8</td>
<td>Structure of the Standards of Quality</td>
</tr>
<tr>
<td>11</td>
<td>Implementation of the Standards of Quality</td>
</tr>
<tr>
<td>12</td>
<td>SECTION A: FAMILY CENTEREDNESS</td>
</tr>
<tr>
<td>19</td>
<td>SECTION B: FAMILY STRENGTHENING</td>
</tr>
<tr>
<td>26</td>
<td>SECTION C: EMBRACING DIVERSITY</td>
</tr>
<tr>
<td>32</td>
<td>SECTION D: COMMUNITY BUILDING</td>
</tr>
<tr>
<td>37</td>
<td>SECTION E: EVALUATION</td>
</tr>
<tr>
<td>45</td>
<td>Glossary</td>
</tr>
</tbody>
</table>

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THE SIGNIFICANCE OF FAMILIES

Families represent the foundation of a society. When families are healthy and strong, communities thrive. There are many kinds of families, and therefore, many definitions of “family.” People who are significant to one another, whether related by blood, legal bonds, or bonds of friendship and community, may identify themselves as a family. Ultimately, “family” is self-defined.

The focus of the Standards of Quality for Family Strengthening & Support is on families who are responsible for raising children. These families consist of at least one adult and one child who are related biologically, emotionally, or legally. Families may consist of one parent, two parents, grandparents, foster parents, legal guardians, or they may arise from a need for mutual support.

As the primary responsibility for the development and well-being of children lies within the family, all segments of society must support families as they raise their children. These Standards are offered as one way to ensure that families are supported. The Standards may also be applicable for working with individuals and family members of different ages across the lifespan.

THE IMPORTANCE OF STANDARDS

The development of shared standards is an important strategic step towards defining and promoting quality practice for families. The child care, health care, mental health, and education fields each has a structure, such as a set of standards, which provides practitioners with a shared definition of the elements required in quality practice. The Family Strengthening and Support field has long held a shared philosophy – the Principles of Family Support Practice developed by Family Support America, and more recently a key theory of change – the Center for the Study of Social Policy’s Strengthening Families: A Protective Factors Framework. Yet, the field has not had one shared set of standards that operationalizes these frameworks.

The California Network of Family Strengthening Networks created the Standards of Quality for Family Strengthening & Support to define how the Principles of Family Support Practice and the Strengthening Families Approach with its research-based evidence informed Protective Factors can be applied together programmatically. Five key areas of practice are identified with their associated standards, indicators, and implementation examples.

These Standards establish a common language to promote quality practice across many different kinds of programs that work with families.
The Standards of Quality for Family Strengthening & Support are designed to be used by all Family Strengthening and Support stakeholders as a tool for planning, providing, and assessing quality services. Some examples of the ways various stakeholders can utilize the Standards include:

**FAMILY STRENGTHENING AND SUPPORT PROGRAMS** can use the Standards as a blueprint for implementing best practices, whether they are setting up a new Program or strengthening an existing one. Programs can use the Standards for self-assessment and to demonstrate the quality of their work with families.

**DIRECT SERVICE STAFF** can use the Standards to enhance their work with families.

**NETWORKS OF FAMILY STRENGTHENING AND SUPPORT PROVIDERS** can use the Standards as a tool for quality assurance and capacity building for network members. Networks can adopt the Standards as a criteria for membership.

**POLICY MAKERS** can endorse the Standards for application in their areas of influence.

**FUNDERS** can adopt the Standards for use in requests for proposals, program monitoring, and quality assurance.

**FAMILIES** can partner with Programs to apply the Standards. Families can provide feedback about how well a Program is applying the Standards.
THE DEVELOPMENT PROCESS OF THE STANDARDS OF QUALITY

The California Network of Family Strengthening Networks was founded in 2009. Its mission is to connect family strengthening networks across California to promote quality practice, peer learning, and mutual support.

The Standards of Quality for Family Strengthening & Support were developed by the California Network of Family Strengthening Networks from the successfully implemented San Francisco Family Support Network Family Support Standards that were created in 2007. The Standards Development Committee, whose diverse members represented networks across the state – urban and rural, large and small, met for a year and a half to create the new Standards.

As part of the transparent and inclusive development process, the Standards were vetted twice by the entire membership of the California Network of Family Strengthening Networks, which included the networks vetting them with their own members. Additionally, they were pilot-tested for feedback from direct service staff in one urban and two rural counties. In total, nearly 1,000 Family Strengthening and Support organizations were engaged in reviewing the Standards.

The development process not only yielded rich feedback and significant helpful input, but also ensured that the Standards would be accessible, understandable, and applicable to multiple audiences. Ultimately, the Standards were unanimously approved by the California Network of Family Strengthening Networks membership in 2012.

THE INTEGRATION OF FRAMEWORKS

The Standards of Quality for Family Strengthening & Support are built upon, and reflect, a unique integration of the following Principles of Family Support Practice and the Strengthening Families Approach with its Protective Factors Framework. Because the Standards of Quality for Family Strengthening & Support emphasize working with the whole family, the language throughout the Standards reflects building supports and protective factors for all family members.
Family Support is based on the premise that the primary responsibility for the development and well-being of children lies within the family, and that all segments of society must support families as they raise their children. Family Support services include a broad array of activities designed to strengthen families. They help parents to raise their children successfully, to become self-sufficient, and to take an active role in their communities.

*Adapted from a definition by Family Support America*
THE PRINCIPLES OF FAMILY SUPPORT PRACTICE

1. Staff and families work together in relationships based on equality and respect.

2. Staff enhances families’ capacity to support the growth and development of all family members – adults, youth, and children.

3. Families are resources to their own members, to other families, to Programs, and to communities.

4. Programs affirm and strengthen families’ cultural, racial, and linguistic identities and enhance their ability to function in a multicultural society.

5. Programs are embedded in their communities and contribute to the community-building process.

6. Programs advocate with families for services and systems that are fair, responsive, and accountable to the families served.

7. Practitioners work with families to mobilize formal and informal resources to support family development.

8. Programs are flexible and continually responsive to emerging family and community issues.

9. Principles of family support are modeled in all Program activities, including planning, governance, and administration.

Source: Family Support America
Developed by the Center for the Study of Social Policy in 2005, the Strengthening Families Approach focuses on building the following 5 Protective Factors with families. Research has shown that these 5 Protective Factors increase family stability, enhance child development, and reduce child abuse and neglect.

THE PROTECTIVE FACTORS FRAMEWORK

PARENTAL RESILIENCE
No one can eliminate stress from parenting, but a parent’s capacity for resilience can affect how a parent deals with stress. Resilience is the ability to manage and bounce back from all types of challenges that emerge in every family’s life. It means finding ways to solve problems, building and sustaining trusting relationships, including relationships with your own child, and knowing how to seek help when necessary.

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT
Accurate information about child development and appropriate expectations for children’s behavior at every age helps parents see their children and youth in a positive light and promote their healthy development. Studies show information is most effective when it comes at the precise time parents need it to understand their own children. Parents who experienced harsh discipline or other negative childhood experiences may need extra help to change the parenting patterns they learned as children.

SOCIAL CONNECTIONS
Friends, family members, neighbors and community members provide emotional support, help solve problems, offer parenting advice and give concrete assistance to parents. Networks of support are essential to parents and also offer opportunities for people to “give back”, an important part of self-esteem as well as a benefit for the community. Isolated families may need extra help in reaching out to build positive relationships.

SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN
A child or youth’s ability to interact positively with others, self-regulate their behavior and effectively communicate their feelings has a positive impact on their relationships with their family, other adults, and peers. Challenging behavior or delayed development creates extra stress for families, so early identification and assistance for both parents and children can head off negative results and keep development on track.

CONCRETE SUPPORT IN TIMES OF NEED
Meeting basic economic needs like food, shelter, clothing and health care is essential for families to thrive. Likewise, when families encounter a crisis such as domestic violence, mental illness or substance abuse, adequate services and supports need to be in place to provide stability, treatment and help for family members to get through the crisis.
INTRODUCTION TO
THE STRENGTHENING FAMILIES APPROACH

STRATEGIES FOR BUILDING THE 5 PROTECTIVE FACTORS

Programs can employ the following 7 strategies to build the 5 Protective Factors in families:

1. Facilitate friendships and mutual support
2. Strengthen parenting
3. Respond to family crises
4. Link families to services and opportunities
5. Value and support parents
6. Facilitate the social and emotional development of children
7. Observe and respond to early warning signs of child abuse or neglect

For more information on the Strengthening Families Approach, please see www.cssp.org/reform/strengthening-families.
The Standards of Quality for Family Strengthening & Support have 5 sections with 17 standards, each with a set of indicators and implementation examples.

The 5 sections of the Standards are:

A. **Family Centeredness**
   Working with a family-centered approach that values and recognizes families as integral to the Program.

B. **Family Strengthening**
   Utilizing a family strengthening approach to support families to be strong, healthy, and safe, thereby promoting their optimal development.

C. **Embracing Diversity**
   Acknowledging and respecting families’ diversity, supporting their participation in a diverse society, as well as engaging in ongoing learning and adaptation to diversity.

D. **Community Building**
   Contributing to building a strong and healthy community by facilitating families’ social connections, developing their leadership skills, and by collaborating with other Programs.

E. **Evaluation**
   Looking at areas of Program strength, as well as areas for further development, in order to guide continuous quality improvement and achieve positive results for families.
INDICATORS

Each Standard includes 1-2 pairs of indicators of both minimum quality and high quality. The Minimum Quality Indicators demonstrate the basic application of the Standard. Programs build upon the Minimum Quality Indicators to achieve the High Quality Indicators, which represent an ongoing and deeper commitment to the application of the Standard.

ARROW 1

Arrow 1 is used for the Family Centeredness, Family Strengthening, Embracing Diversity and Community Building sections to illustrate the elements necessary to move from Minimum Quality to High Quality. Each of the elements helps ensure the Standards are more deeply integrated into program practice.

High Quality Indicators include the following elements. The particular elements and the number of elements needed differ for various High Quality Indicators:

- **Formal Structure**: Program has a formal structure for the implementation of the Standard – design, policies, procedures, systemic integration, and intentional strategies with committed resources that ensure consistency of practice.

- **Staff Training**: Program ensures that staff members receive appropriate training to support the implementation of the Standard.

- **Family Partnership**: Program partners with families in the implementation of the Standard.

For these Sections:

- Family Centeredness
- Family Strengthening
- Embracing Diversity
- Community Building

One or more of the elements in the arrow moves a Program from:

**ARROW 1**

**MINIMUM QUALITY INDICATOR**
- FORMAL STRUCTURE
- STAFF TRAINING
- FAMILY PARTNERSHIP

**HIGH QUALITY INDICATOR**

Foundational

Deeper integration
EVALUATION SECTION ARROW

The Evaluation section uses Arrow 2 to illustrate the move from Minimum Quality to High Quality. High Quality Indicators include the following elements. The particular elements and the number of elements needed differ for various High Quality Indicators.

- **Data Analysis:** Program reviews and interprets data related to program participation, quality, and outcomes. Program may look at both quantitative data and qualitative data, such as case studies.

- **Sharing Evaluation Results:** Program shares evaluation data and results with families, staff members, and other key stakeholders.

- **Program Modification:** Program makes modifications as a result of evaluation to ensure its continuous quality improvement. This process helps the Program to meet the unique and changing needs of the community or population served.

- **Training for Evaluation Integration:** Program ensures that staff members receive appropriate training for the integration of evaluation processes into their practices.

One or more of the elements in the arrow moves a Program from:

**ARROW 2**

- **MINIMUM QUALITY INDICATOR**
  - DATA ANALYSIS
  - SHARING EVALUATION RESULTS
  - PROGRAM MODIFICATION
  - TRAINING FOR EVALUATION INTEGRATION

- **HIGH QUALITY INDICATOR**

ITALICIZED BOLD PRINT has been used to highlight the elements present in the High Quality Indicators.

**EXAMPLES**

In order to illustrate how the Indicators are applied, some examples from the field have been included. The examples show some or all of the components of the Indicators. These 2-4 examples, some general, some specific, are not meant to be an exhaustive list or a specific checklist. As Programs apply the Standards, they are encouraged to identify their own examples that demonstrate the Indicators in ways that are relevant to their communities.

- **Training for Evaluation Integration:** Program ensures that staff members receive appropriate training for the integration of evaluation processes into their practices.
Meeting the Minimum Quality indicators will create a Family Strengthening and Support Program with a solid foundation. Programs are encouraged to strive to meet the High Quality Indicators in order to serve families most effectively.

The Minimum Quality Indicators are designed to be met within a reasonable scope of resources of a Family Strengthening and Support Program. Some High Quality Indicators may require capacity building and more investment to meet.

Implementing the Standards is a developmental process. It is common that Programs see aspects of their work on different points along a continuum from Minimum Quality to High Quality.

Successful application of the Standards requires the commitment and support of all levels of Program responsibility – executive directors, managers, coordinators, direct service staff, parent leaders, and families. Each has a key role to play.

**CERTIFICATION TRAINING**

Training is a fundamental strategy for implementing the Standards effectively. As such, the California Network of Family Strengthening Networks trains representatives of member networks to be able to offer certification trainings on the Standards. These trainings are designed for all management and direct service staff, as well as for funders. Each individual who completes the training receives a certificate from the California Network of Family Strengthening Networks that is valid for 2 years.

**IMPLEMENTATION TOOLS**

The Standards document is part of a suite of materials designed to support Programs to implement the Standards effectively. These materials include:

- **Program Self-Assessment Tool** - designed to be used as a critical thinking exercise by Program teams of managers, direct service staff, parent leaders, and other stakeholders as appropriate.

- **Staff Self-Reflection Checklist** - a set of 15 self-reflection questions for staff members to use as a daily reminder to implement the Standards.

- **Standards Participant Survey** - a set of 14 questions for Program participants to indicate how well the Program is meeting the Standards from their perspective. The tool is available in English, Spanish, and Chinese.
Families are valued as integral to the Program. Families are involved in the planning, development, and implementation of the Program. Activities and services are developed in response to the needs and interests of families. The Program is accessible and welcoming to families.

The Program conducts outreach with families. Staff members develop and sustain constructive relationships with families.

The Program models family centeredness with staff members and in its administrative practices. The Program considers staff members’ own family needs and interests, such as child care, flexible schedules for working parents, and dependent benefits.

This section reflects Family Support Principles 1 and 9, and the following Protective Factors: Social Connections, Concrete Support in Times of Need, and Social and Emotional Competence of Children.

Standard A.1
Program encourages families to participate in Program development and implementation.

Standard A.2
Program is accessible and welcoming to families.

Standard A.3
Program conducts outreach to families and sustains constructive relationships with them.

Standard A.4
Program models family centeredness with staff members and in its administrative practices.
SECTION A:
FAMILY CENTEREDNESS

Standard A.1 – Program encourages families to participate in program development and implementation.

A. 1.1 Minimum Quality Indicator
Program solicits input from families to shape and plan the Program and services.

Some examples may include:

• Methods of collecting input from families are used, such as surveys, focus groups, and interviews.

• Staff members survey participants to determine which workshop topics they would like the Program to offer.

• Program welcomes participants to use a suggestion box to provide ideas and feedback.

A. 1.1 High Quality Indicator
Program’s design supports partnering with families to have an active role in the development and implementation of the Program.

Some examples may include:

• Program has a Parent Advisory Committee which meets regularly and impacts program development.

• Participants are trained to facilitate or co-facilitate with staff members a support group or parenting class.

• Participants are included in an employee hiring process, such as by helping to identify the skills and qualities needed for the job, and by participating on an interview panel.
SECTION A:
FAMILY CENTEREDNESS

Standard A.2 – Program is accessible and welcoming to families.

A. 2.1 Minimum Quality Indicator
Program offers services at an accessible place and time convenient to families.

Some examples may include:

- Program’s regular hours of operation are convenient for families.
- Program is located in a space that is readily accessible to families by public transportation or walking.
- Program space is accessible for people using wheelchairs or strollers.
- Program provides child care space for families during a parenting workshop.

A. 2.1 High Quality Indicator
Program is structured to increase its accessibility, in order to meet the unique needs or circumstances of families.

Some examples may include:

- Program implements a policy to extend its hours of operation to support families during crises.
- Program conducts home visits to reach families when they cannot travel to the Program site.
- Program provides resources and support for staff members to meet with families at locations convenient to them, such as hospitals, schools, and places of worship.
- Program provides transportation to the Program location.
SECTION A: FAMILY CENTEREDNESS

Standard A.2 – Program is accessible and welcoming to families. (continued)

**A. 2.2 Minimum Quality Indicator**
Program creates a welcoming environment for families.

Some examples may include:

- Staff members greet families in a helpful and welcoming way.
- Program has a well-maintained and child-safe service area.
- Program’s mission, expressed in language readily understood by families, is displayed in its reception area.
- Posters and resource materials in the reception area reflect the diversity of the families served.

**A. 2.2 High Quality Indicator**
Program partners with families to develop and maintain a welcoming environment for families, promoting their sense of ownership of the Program.

Some examples may include:

- Families maintain the Program playroom.
- Families are involved in making improvements to the Program environment.
- Program recruits participants who are fathers to greet other fathers at program activities.
SECTION A: FAMILY CENTEREDNESS

Standard A.3 – Program conducts outreach to families and sustains constructive relationships with them.

A. 3.1 Minimum Quality Indicator
Program provides outreach and information to potential participants.

Some examples may include:

• Staff members conduct door-to-door outreach to families in the community.

• Program provides brochures and fliers about its services and activities at the Program site.

• Program has a booth at a community fair.

A. 3.1 High Quality Indicator
Program implements an outreach plan for potential participants with intentional strategies and committed resources.

Some examples may include:

• Staff members are trained to do outreach to underserved families.

• Program conducts home visits as part of an outreach plan to connect with isolated families.

• Program develops and conducts a social media campaign.

• Program trains and supports participants to do peer-to-peer outreach at schools, WIC offices, and community gathering places, such as laundromats and soccer games.
SECTION A: FAMILY CENTEREDNESS

Standard A.3 – Program conducts outreach to families and sustains constructive relationships with them. (continued)

A. 3.2 Minimum Quality Indicator
Program maintains constructive relationships with families.

Some examples may include:

- Staff members are consistently warm and respectful, fostering a sense of participants’ belonging.
- Participants who complete a program activity are encouraged to participate in other activities.
- Staff members learn family members’ names and ask about their well-being.

A. 3.2 High Quality Indicator
Program implements a system to sustain constructive relationships with families.

Some examples may include:

- Staff members are trained to follow up with families who have completed a service activity.
- Program implements an outreach strategy to invite and engage past participants in new program activities.
- Program engages parents as leaders in the Program.
SECTION A:
FAMILY CENTEREDNESS

Standard A.4 – Program models family centeredness with staff members and in its administrative practices.

A. 4.1 Minimum Quality Indicator
Program demonstrates that it considers the family needs and interests of staff members.

Some examples may include:

- Program tries to schedule staff retreats and trainings so that they do not conflict with family time.
- Staff members are sometimes invited to bring their families to Program holiday activities.
- Staff members are asked about their own family needs, such as child care.

A. 4.1 High Quality Indicator
Program implements policies, procedures, and benefits that address the family needs and interests of staff members.

Some examples may include:

- Program has a flexible schedule system for staff members to accommodate working families.
- Program has a policy that staff members and their families are welcome to participate in skill-based trainings offered by the Program, such as parenting education and financial management.
- Program provides a menu of benefits to address various family needs, such as medical allowances, and pre-tax flexible spending accounts for child care needs.
The Program, in partnership with families, builds the 5 Protective Factors of the Strengthening Families Approach and other developmental assets throughout the life cycle of the family.

The Protective Factors Framework supports families to be strong, healthy, and safe. The Program uses this framework to enhance families’ capacity to understand and promote their own optimal cognitive, social, emotional, and physical development.

Staff and families form a mutually respectful partnership by bringing together their strengths and skills to address issues and create opportunities for success. The Program uses a strengths-based approach, which focuses on families’ assets and abilities, as well as their needs and interests. This is a shift away from a deficit approach in which staff members are expected to be the “experts” fixing “problem” families.

Recognizing families as significant resources for each other, the Program facilitates opportunities for families to build relationships for mutual and peer support. Services and activities are designed to include the whole family rather than an individual member. This supports better outcomes for children and caregivers.

This section reflects Family Support Principles 1, 2, 3, and 7, and all of the 5 Protective Factors.
SECTION B:
FAMILY STRENGTHENING

Standard B.1 – Program recognizes and affirms families’ strengths and resilience, and is responsive to their concerns and priorities.

B. 1.1 Minimum Quality Indicator
Staff members work with family members in relationships based on equality and respect, to identify their strengths, resilience, and resources.

Some examples may include:
- Staff members comment on a positive interaction between a parent and his/her child during a playgroup.
- Families are informed that all staff members will honor their privacy and confidentiality, within the confines of the law.
- Staff members celebrate and recognize families’ achievements.

B. 1.1 High Quality Indicator
Staff members, working with family members in relationships based on equality and respect, implement a formal process to assess and document families’ strengths, resilience, and resources.

Some examples may include:
- Staff members are trained to recognize and document family resilience and strengths.
- Staff members conduct intake interviews with participants using tools that indicate family strengths.
- Program has methods of assessment to help families identify their resources and strengths to handle a crisis.
SECTION B:
FAMILY STRENGTHENING

Standard B.1 – Program recognizes and affirms families’ strengths and resilience, and is responsive to their concerns and priorities. (continued)

B. 1.2 – Minimum Quality Indicator

Program engages families to identify their concerns, priorities, and resource needs. It links families with service providers, informal supports, or other families to address them.

Some examples may include:

- Staff members talk with families about their priorities and make referrals as needed.
- Program encourages families to carpool with one another to get to an activity.
- Program provides a resource list to families seeking elder care support.
- Program links eligible families to an Earned Income Tax Credit provider.

B. 1.2 High Quality Indicator

Program implements a formal process to gather information about families’ concerns, priorities, and resource needs. Program partners with families to set goals. It formally facilitates families’ access to services and activities, and has a system to provide them with follow-up support.

Some examples may include:

- Staff members work with families to complete assessment tools that include family-identified needs and goals.
- Staff members partner with families to develop service plans, and periodically meet with them to review progress towards their goals.
- Staff members are trained to provide enhanced information and referral services to families as part of a formal referral system.
SECTION B: FAMILY STRENGTHENING

Standard B.2 – Program enhances families’ capacity to support the healthy cognitive, social, emotional, and physical development of their family members.

B. 2.1 Minimum Quality Indicator
Staff members can demonstrate an understanding of healthy family development.

Some examples may include:

- Staff members demonstrate an understanding of the stages of child development by supporting parents to have appropriate age expectations.

- Staff members can describe the significance of healthy couple relationships in the context of strengthening families.

- Staff members can identify risk factors and potential warning signs of abuse and neglect.

B. 2.1 High Quality Indicator
Program provides staff members with opportunities to strengthen their knowledge and skills for supporting healthy family development.

Some examples may include:

- Program connects staff members with professional development opportunities to enhance their understanding of child and youth development.

- Program provides opportunities, such as clinical supervision or team meetings, for staff members to learn about partnering with families to develop healthy couples relationships.

- Staff members receive training on working with parents to prevent childhood obesity.
Standard B.2 – Program enhances families’ capacity to support the healthy cognitive, social, emotional, and physical development of their family members. (continued)

B. 2.2 – Minimum Quality Indicator
Program shares information with families to support their healthy development.

Some examples may include:

- Program has information about child development, such as ages and stages brochures and books available to families.

- Program provides tip sheets to parents on how to talk with their teens.

- Program newsletter includes an article about, and resources for, healthy couples relationships.

- Program refers families to community recreational centers for physical activities.

B. 2.2 High Quality Indicator
Program is designed to deliver activities that support the healthy development of families.

Some examples may include:

- Program provides evidence-based parenting education classes.

- Program designs and offers workshops on developing parent-teen communication skills.

- Program provides workshops on healthy couple relationships, such as communication, healthy marriage, and co-parenting.

- Program develops and provides activities to increase families’ physical activity.
SECTION B: FAMILY STRENGTHENING

Standard B.3 – Program recognizes families as significant resources for their own family members and each other.

B. 3.1 Minimum Quality Indicator
Program recognizes the importance of engaging multiple family members, and encourages their participation in program activities.

Some examples may include:

• Staff members ask participants if they have other family members who could be invited to program activities.

• Program fliers indicate that multiple family members are welcome.

• Program provides adequate space to accommodate multiple family members in activities.

B. 3.1 High Quality Indicator
Program designs and provides activities, events, and services that successfully engage multiple family members.

Some examples may include:

• Program engages multiple family members in activities and events, such as a Halloween party, Family Literacy Night, and Family Movie Night.

• Program records indicate participation in activities and services designed for a range of family members, such as fathers, partners, grandparents, and godparents.

• Program develops outreach strategies that engage key family members as defined by the family.
SECTION B: FAMILY STRENGTHENING

Standard B.3 – Program recognizes families as significant resources for their own family members and each other. (continued)

B. 3.2 Minimum Quality Indicator
Program facilitates opportunities for families to build social connections with each other for resource sharing and mutual support.

Some examples may include:

- Staff members warmly introduce families to each other.
- Program hosts potlucks for families to get to know each other.
- Program provides space for young people to play games and sports together.
- Program provides a support group.

B. 3.2 High Quality Indicator
Program facilitates families to create their own opportunities to build social connections with each other for resource sharing and mutual support.

Some examples may include:

- Program welcomes and encourages participants to share their skills with each other, by conducting participant-led cooking or arts and crafts activities.
- Program engages parents to develop their own mutual support systems, such as phone trees, shared child care, co-ops, carpools and playgroups.
- Program invites fathers on the Parent Advisory Committee to plan an event together, such as a Father’s Day celebration, to increase social connections among fathers in the Program.
SECTION C:
EMBRACING DIVERSITY

The diversity of families encompasses their cultural traditions, languages, values, socio-economic status, family structures, sexual orientation, religion, individual abilities, and other aspects. The Program sees the diversity of families as both an important part of their identities and as a form of strength.

The Program acknowledges and respects the diversity of families and recognizes that this diversity is multi-layered—even families with similar backgrounds may differ in numerous ways. The Program addresses these multiple layers, for example, by being responsive to language, family structure, and traditions.

In order to thrive and fully participate in a diverse society, both staff members and families need the ability to interact respectfully and meaningfully with those who are different from them. Navigating the dynamics of difference involves understanding, empathy, listening, self-awareness, recognizing and addressing conflict, and being aware of systemic inequalities.1

The Program that effectively embraces diversity understands that it is an ongoing developmental journey for both individuals and organizations. The Program has an ongoing commitment to learn about and adapt to the diversity of the families they serve.2

2. Lindsey, Robins, and Terrell.

This section reflects Family Support Principle 4, and the following Protective Factors: Parental Resilience and Social Connections.

Standard C.1
Program acknowledges and respects the diversity of families, including their cultural traditions, languages, values, socio-economic status, family structures, sexual orientation, religion, individual abilities, and other aspects.

Standard C.2
Program enhances the ability of families and staff to participate in a diverse society and to navigate the dynamics of difference.

Standard C.3
Program engages in ongoing learning and adaptation of its practices to address diversity.
Standard C.1 – Program acknowledges and respects the diversity of families, including their cultural traditions, languages, values, socio-economic status, family structures, sexual orientation, religion, individual abilities, and other aspects.

**C. 1.1 Minimum Quality Indicator**
Program demonstrates awareness of, and reflects the diversity of, families served.

*Some examples may include:*

- Program materials are written in the language(s) of the families served.
- Fliers, posters and brochures feature images of the families served and are culturally relevant.
- Services are offered in the language(s) of the families served, either by staff members who speak the languages or through an interpreter.
- Program calendar includes cultural celebrations of the families served.

**C. 1.1 High Quality Indicator**
Program utilizes formal structures and policies that demonstrate awareness of, and reflect the diversity of, families served.

*Some examples may include:*

- Program intentionally recruits and employs staff members who reflect, and are skilled at working with, the diversity of the populations’ served.
- Program implements a peer education model to train community members to share culturally relevant information with hard-to-reach communities.
- Program has a policy that outreach materials are reviewed by the Parent Advisory Committe prior to printing, in order to ensure that they are culturally relevant and linguistically accessible.
- Program develops and implements a policy for potluck events that includes multiple ways that families can contribute, whether or not they can afford to share food.
SECTION C: EMBRACING DIVERSITY

Standard C.1 – Program acknowledges and respects the diversity of families, including their cultural traditions, languages, values, socio-economic status, family structures, sexual orientation, religion, individual abilities, and other aspects. (continued)

C. 1.2 Minimum Quality Indicator
Program demonstrates awareness of, and reflects multiple layers of, the diversity of families served.

Some examples may include:

- In addition to program materials in the language(s) of the families served, the wording is targeted to welcome mothers, fathers, and grandparents.
- Images in fliers, posters, and brochures feature multiple aspects of diversity within a population, such as various family structures.
- Program is mindful not to schedule activities that conflict with key religious observances in the community.

C. 1.2 High Quality Indicator
Program utilizes formal structures and policies to reflect multiple layers of the diversity of families served.

Some examples may include:

- Program intentionally employs a variety of staff members skilled at working with and reflecting multiple aspects of the diversity of the population(s) served, such as both males and females, and both parents and grandparents.
- Program intake forms recognize and reflect the variety of family structures, such as single parents, kinship caregivers, foster parents, and gay and lesbian families.
- Parent Advisory Committee is designed to represent multiple aspects of the diversity of the population(s) served, such as mothers, fathers, and grandparents.
SECTION C: EMBRACING DIVERSITY

Standard C.2 – Program enhances the ability of families and staff to participate in a diverse society and to navigate the dynamics of difference.

C. 2.1 Minimum Quality Indicator
Program offers opportunities for families to learn about diversity, and to navigate the dynamics of difference.

Some examples may include:

- Program distributes fliers about diverse community events, in order to promote family participation.

- Program encourages family participation in activities that engage diverse communities such as dance classes, blockparties, sports, arts, and community gardening.

- A staff member helps a parent without a special needs child to understand why the Program makes accommodations for families who have special needs children.

C. 2.1 High Quality Indicator
Program implements formal structures to support families to learn about diversity, and to navigate the dynamics of difference.

Some examples may include:

- Program partners with parents to design and organize a parent café series to encourage the sharing of diverse cultural perspectives on parenting practices.

- Program designs intergenerational reading and visiting activities to promote the sharing of experience and wisdom between youth and elders.

- Program develops a community dialog process to explore Western medicine and traditional healing practices, with the goal of bridging cultural divides.

- Program organizes field trips for families to attend events hosted by communities different from theirs.
SECTION C: EMBRACING DIVERSITY

Standard C.2 – Program enhances the ability of families and staff to participate in a diverse society and to navigate the dynamics of difference. (continued)

C. 2.2 Minimum Quality Indicator
Program offers opportunities for staff members to learn about diversity, and to navigate the dynamics of difference.

Some examples may include:

- Staff members are encouraged to share past work or life experiences with each other that foster mutual understanding.

- Program encourages staff members to seek advice from community elders on how to reach out to families in a culturally appropriate way.

- Program provides an opportunity for a brown-bag lunch that brings staff members together for the purpose of sharing and valuing differences.

C. 2.2 High Quality Indicator
Program provides professional development to support staff members to learn about diversity, and to navigate the dynamics of difference.

Some examples may include:

- Program invites partner organizations to provide workshops for staff on diversity issues.

- Program organizes a site visit for staff members to an organization that serves a different community, with the purpose of learning about how to serve that population.

- Program develops and implements a policy that staff members regularly participate in trainings on diversity.

- Program facilitates a series of ongoing discussions to help staff members understand and appreciate their culturally different communication styles.
SECTION C:
EMBRACING DIVERSITY

Standard C.3 – Program engages in ongoing learning and adaptation of its practices to address diversity.

C. 3.1 Minimum Quality Indicator
Program learns about and adapts to the diversity of families on an ongoing basis.

Some examples may include:

- Staff members ask families questions that increase their understanding of the families’ diverse norms and preferences.
- Staff members discuss identifying and addressing the various aspects of diversity that exist within the surrounding community.
- Program learns about accommodations needed to include a blind parent in a parenting support group.

C. 3.1 High Quality Indicator
Program implements formal systems and practices to learn about and adapt to the diversity of families on an ongoing basis.

Some examples may include:

- Through a reflective process, the Program develops and executes an action plan to incorporate multiple aspects of the diversity of the families served.
- Staff members are trained how to interview families to increase their understanding of families’ diverse norms and values.
- Program conducts a community assessment process to identify aspects of diversity that exist within the area served, in order to strengthen outreach efforts.
Families thrive in strong and healthy communities, and they have a crucial role in developing these communities. When families build social connections with each other for resource sharing and mutual support, they begin to move along a continuum from being focused on their own families to supporting other families. The next step in this development is families collectively taking an active role in the larger community.

The Program makes a vital contribution to build strong and healthy communities. It is aware of community issues and priorities. It is committed to developing community leadership, supporting families to develop skills and to effect meaningful community change. The Program assists families to identify opportunities to develop and exercise their leadership capacity to address common issues, and to create a connected community.

The Program develops, participates in, and leverages collaborative partnerships and networks with various stakeholders to strengthen neighborhoods and communities.

This section reflects Family Support Principles 5 and 6, and the following Protective Factors: Social Connections and Concrete Support in Times of Need.

Standard D.1
Program is involved in, and engages families in, the larger community building process.

Standard D.2
Program supports the development of community-based leadership.

Standard D.3
Program builds collaborative relationships with other organizations to strengthen families and communities.
SECTION D:
COMMUNITY BUILDING

Standard D.1 – Program is involved in, and engages families in, the larger community building process.

D. 1.1 Minimum Quality Indicator
Program is aware of, and provides families with, information about community issues and activities.

Some examples may include:

- Program provides information about community issues through a community news bulletin board.
- A staff member attends a community meeting regarding truancy.
- Program distributes fliers about community fairs.

D. 1.1 High Quality Indicator
Program has a formal structure involved in addressing community needs and priorities.

Some examples may include:

- Program engages stakeholders, such as partner Programs and families, in an asset-mapping activity to address low-income housing development.
- A staff member serves on a community truancy task force and reports about it regularly at staff meetings.
- Program implements a strategy for staff members to work within appropriate legal parameters to advocate with families for needed policy changes.
Standard D.1 – Program is involved in, and engages families in, the larger community building process. (continued)

D. 1.2 Minimum Quality Indicator
Program connects families to community events that help raise awareness of emerging community needs and assets.

Some examples may include:

- Program distributes fliers about a town hall meeting held by the city to address safety concerns.
- Program publicizes upcoming candidate forums to families.
- Program links families to a Neighborhood Watch group by providing a meeting space for it.

D. 1.2 High Quality Indicator
Program formally facilitates the sharing of family voices for community impact.

Some examples may include:

- Program includes families and other community members in a planning process to develop a school safety program.
- Program conducts focus groups with community members in order to gather their input to inform local child abuse prevention efforts.
- Program organizes a forum with families and elected officials to address a community issue.
Standard D.2 – Program supports the development of community-based leadership.

D. 2.1 Minimum Quality Indicator
Program shares information with families about how to advocate for their needs and priorities.

Some examples may include:

- Staff members provide information to families on how to understand and navigate systems, such as schools, mental health, and government departments.
- Program provides materials to parents about understanding their legal rights.
- Program invites a presenter to conduct a workshop for families on how to access healthcare.

D. 2.1 High Quality Indicator
Program implements a formal structure to partner with families to develop their leadership skills, and to facilitate opportunities for using those skills in the community.

Some examples may include:

- Staff members are trained and supported to facilitate the leadership development of families, including providing ongoing encouragement, skill building, and knowledge development.
- Program trains parents through a series of workshops to understand, and to advocate for, their children’s educational rights.
- Families are trained and supported to serve in Program leadership roles, such as becoming members of the Parent Advisory Committee or Board of Directors.
SECTION D: COMMUNITY BUILDING

Standard D.3 – Program builds collaborative relationships with other organizations to strengthen families and communities.

D. 3.1 Minimum Quality Indicator
Program is aware of, and works with, other service providers and community organizations to share resources and information.

Some examples may include:

- Staff members introduce themselves to, and familiarize themselves with, other service providers.
- Staff members participate in meetings with other service providers.
- Program informs families and staff members about organizations that provide services in a family’s preferred language.

D. 3.1 High Quality Indicator
Program creates formal partnerships with other service providers and community organizations to collaboratively strengthen families and communities.

Some examples may include:

- Program develops collaborative partnerships to provide a continuum of care for homeless families that addresses service gaps and avoids duplication.
- Program works in partnership with other organizations to develop initiatives to address emerging community issues.
SECTION E: EVALUATION

Evaluation is the ongoing process of assessing what works and what needs to be modified. Evaluation is an important part of regular program planning, program implementation, and achieving positive results for families. Effective evaluation collects and combines data on program participation, quality, and outcomes.

Family Strengthening and Support evaluation incorporates families as partners in the process. The Program collects and shares evaluation data in partnership with staff members, families, and stakeholders to ensure that it produces meaningful results.

The Program demonstrates a commitment and capacity to incorporate evaluation as a core component of programming. The Program develops key evaluation questions to be answered. The Program builds internal resources and develops a plan for evaluation and continuous feedback.

This section reflects Family Support Principles 8 and 9, and aligns with the Strengthening Families Approach and the Protective Factors Framework.

Standard E.1
Program collects and analyzes information related to program participation.

Standard E.2
Program collects and analyzes information related to program quality.

Standard E.3
Program collects and analyzes information related to program outcomes.

Standard E.4
Program demonstrates that it incorporates evaluation as a core component of programming.
EVALUATION SECTION ARROW

The Evaluation section uses Arrow 2 to illustrate the move from Minimum Quality to High Quality. High Quality Indicators include the following elements. The particular elements and the number of elements needed differ for various High Quality Indicators.

- **Data Analysis:** Program reviews and interprets data related to program participation, quality, and outcomes. Program may look at both quantitative data and qualitative data, such as case studies.

- **Sharing Evaluation Results:** Program shares evaluation data and results with families, staff members, and other key stakeholders.

- **Program Modification:** Program makes modifications as a result of evaluation to ensure its continuous quality improvement. This process helps the Program to meet the unique and changing needs of the community or population served.

- **Training for Evaluation Integration:** Program ensures that staff members receive appropriate training for the integration of evaluation processes into their practices.

One or more of the elements in the arrow moves a Program from:

**ARROW 2**

<table>
<thead>
<tr>
<th>MINIMUM QUALITY INDICATOR</th>
<th>HIGH QUALITY INDICATOR</th>
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<tbody>
<tr>
<td>- DATA ANALYSIS</td>
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<tr>
<td>- SHARING EVALUATION RESULTS</td>
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<tr>
<td>- PROGRAM MODIFICATION</td>
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<td>- TRAINING FOR EVALUATION INTEGRATION</td>
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*Foundational* to *Deeper integration*
SECTION E: EVALUATION

Standard E.1 – Program collects and analyzes information related to program participation.

E. 1.1 Minimum Quality Indicator
Program tracks program activities, participant characteristics, and service utilization.

Some examples may include:

- Program uses a sign-in sheet for program activities.
- Program records progress toward contract/grant participation targets.
- Program records information about program services, such as the number of hours of service, the number of referrals families connect with, and case plans.

E. 1.1 High Quality Indicator
Program tracks and intentionally analyzes program activities, participant characteristics, and service utilization in relation to its goals, objectives, and community needs. Appropriate program modifications are made as a result.

Some examples may include:

- Program uses a database system to generate an analysis of demographics and participation to support necessary program modifications.
- Staff members are trained and responsible for maintaining a database system. They are able to produce reports and analyze results to enhance program services.
SECTION E: EVALUATION

Standard E.2 – Program collects and analyzes information related to program quality.

E. 2.1 Minimum Quality Indicator
Program utilizes the Standards of Quality for Family Strengthening & Support Program Self-Assessment Tool and other appropriate program assessment tools.

Some examples may include:

- Staff members at all levels are familiar with the process of implementing the Standards of Quality for Family Strengthening & Support Program Self-Assessment Tool.
- Program conducts team meetings to complete the Standards of Quality for Family Strengthening & Support Self-Assessment Tool and the Father-Friendliness Organizational Self-Assessment tool.

E. 2.1 High Quality Indicator
Program conducts an annual self-assessment utilizing the Standards of Quality for Family Strengthening & Support Program Self-Assessment Tool and other appropriate program assessment tools. Program analyzes results to inform program planning efforts, and makes appropriate modifications.

Some examples may include:

- Annual program review meeting involves staff members at all levels reflecting on results within the context of research-based practices.
- Program provides professional development for staff members to address service areas that have been identified to be improved or enhanced.
SECTION E: EVALUATION

Standard E.2 – Program collects and analyzes information related to program quality. (continued)

E. 2.2 Minimum Quality Indicator
Program invites and records feedback regarding program quality from families and other stakeholders, such as service provider partners.

Some examples may include:

- Program utilizes the Participant Survey of the Standards of Quality for Family & Strengthening & Support.
- Methods of collecting feedback from families, such as surveys, focus groups, and interviews are in place.
- Program solicits feedback from other service providers to gather feedback on its quality.

E. 2.2 High Quality Indicator
Program analyzes and shares feedback regarding program quality with families and other stakeholders, such as service provider partners. Appropriate program modifications are made as a result.

Some examples may include:

- Feedback regarding program quality is discussed with the Program’s Parent Advisory Committee, and their input is solicited to make suitable modifications.
- Feedback regarding program quality is compiled and reported in the Program’s newsletter, along with a plan to build on strengths and address concerns.
SECTION E: EVALUATION

Standard E.3 – Program collects and analyzes information related to program outcomes.

E. 3.1 Minimum Quality Indicator
Program tracks data on participant and program outcomes.

Some examples may include:
• Program records progress toward contract/grant deliverables.
• Program identifies and tracks participant progress that is relevant to its services and the needs of the community.
• Program administers pre- and post-tests for a parent education series.

E. 3.1 High Quality Indicator
Program tracks data on participant and program outcomes, and analyzes it in partnership with stakeholders. Information is compiled and used for program modification, accountability to stakeholders, and to inform policy change as needed.

Some examples may include:
• Program has been evaluated by an outside evaluator, and the Program shares out the summary or results.
• Program utilizes participant outcome data to continuously refine its activities, policies, staffing, and professional development.
• Outcome data regarding the success of a school readiness program is used to advocate for its expansion to serve more children.
Standard E.4 – Program demonstrates that it incorporates evaluation as a core component of programming.

**E. 4.1 Minimum Quality Indicator**
Program has identified key questions to be answered through evaluation.

Some examples may include:

- Staff members and stakeholders have developed questions for the evaluation of a parent workshop series.
- Staff members ask the Parent Advisory Committee members what data they need in order to help plan future programming.

**E. 4.1 High Quality Indicator**
Program implements an evaluation plan based on key questions that measure progress toward program goals.

Some examples may include:

- Staff members have developed an evaluation plan, such as a logic model, to show how program goals, program activities, and participant outcomes are connected.
- Staff members and the Parent Advisory Committee work with a consultant to develop evaluation questions and an evaluation plan based on a theory of change.
Standard E.4 – Program demonstrates that it incorporates evaluation as a core component of programming. (continued)

E. 4.2 Minimum Quality Indicator

Staff members demonstrate a basic understanding of evaluation practices.

Some examples may include:

- Staff members understand evaluation terms and concepts, and how they are relevant to their work.
- Staff members know how to use data collection tools, such as intake forms and surveys.
- Staff members understand that focus groups can be used to get descriptive, informal feedback.

E. 4.2 High Quality Indicator

Program ensures that staff members receive training to support the integration of evaluation processes into its practices.

Some examples may include:

- Program provides training on evaluation to build skills and clarify the evaluation roles of staff members, board members, and Parent Advisory Committee members.
- Program ensures that staff members have the information and skills to access evaluation resources, such as websites, professional organizations, and relevant training.
Assessment: A formal process that includes non-judgmental evaluations of family capacities and goals.

Asset Mapping: The process of compiling an inventory of the human, material, financial, entrepreneurial, and other resources in a community. The Asset Mapping process identifies local organizations, businesses, and schools that have the potential to provide resources, such as services, funds, or in-kind gifts.

Capacity for Evaluation Integration: The ability and potential of the Program to receive, perform, and produce evaluation results as part of programming. This capacity includes internal resources, such as Program expertise, staff time for evaluation activities, financial resources, and leadership to sustain evaluation practices.

Developmental Assets: Abilities that human beings develop over time that enable them to thrive. These abilities may be cognitive, emotional, social, and physical development.

Direct Service Staff: Staff members of the Program who provide services for, or conduct activities with, program participants.

Enhanced Information and Referral: A service strategy that connects participants with resources, including following up with them to determine if they were able to access them and if their needs were met.

Evaluation Plan: A written document that states the objectives of an evaluation, the questions that will be answered, the information that will be collected to answer these questions, and when the collection of information will begin and end.

Family: People who are significant to one another, whether related by blood, legal bonds, or bonds of friendship and community. Ultimately, “family” is self-defined.

Family Structure: The composition and membership of the family, as well as the organization and patterns of relationships among individual family members.
Family Support: (1) An approach to strengthening families and communities so that they can foster the optimal development of children, youth, and adult family members. (2) A type of grassroots, community-based program designed to prevent family problems by strengthening parent-child relationships and supporting parents to be good nurturers and providers. (3) A shift in human services delivery that encourages public and private agencies to work in partnership with families to become more preventative, responsive, flexible, family-focused, strengths-based, holistic, and effective. (4) A movement for social change that urges policymakers, service providers, parents, and employers to take responsibility for improving the lives of children and families and for ensuring that they get what they need to succeed.

Father-Friendliness Organizational Self-Assessment Tool: A questionnaire for Programs to measure how welcoming they are of fathers developed by the National Center for Strategic Nonprofit Planning and Community Leadership in partnership with the National Head Start Association, the U.S. Department of Health and Human Services Administration for Children and Families, Region V, and the Illinois Department of Public Aid, Division of Child Support Enforcement.

Formal Structure: Design, policies, procedures, systemic integration, and intentional strategies with committed resources that ensure consistency of practice.

Logic Model: A planning tool that clarifies and graphically illustrates what a Program hopes to accomplish, what it does, and its intended impact. It includes the theory and assumptions that underlie the Program and communicates both short and long-term program outcomes.

Navigating the Dynamics of Difference: An approach to learning effective strategies to resolve conflicts, particularly among people whose cultural backgrounds and values differ. It encourages one to understand the effect that historic distrust has on present-day interactions, and to realize that one may misjudge others’ actions based on learned expectations. (Randall B. Lindsey, Kikanza Nuri Robins, and Raymond D. Terrell)

Neighborhood Watch: A nationwide model of organizing residents and businesses of a city block to work in partnership with local police to address public safety concerns and prevent crime.

Outcomes: The results of services and activities provided by the Program. Participant outcomes measure changes in an individual’s or family’s knowledge, behavior, attitudes, skills, or condition, as a result of participation. Program outcomes measure how well the Program is meeting its objectives and fulfilling its mission.

Parent Advisory Committee: A leadership group of Program participants that provides input, guidance, and feedback to the Program on a regular basis.

Parent Cafés: A series of structured parent-led small group conversations used with the Strengthening Families Approach that bring parents together to discuss issues important to them. The goal is to directly engage parents in building the Protective Factors needed to prevent the maltreatment of, and promote healthy outcomes for, their children.
Peer Learning: Learning about a topic of common interest with and from others as fellow learners.

Policy Change: A shift in thinking, principles, or action at the Program, local, state, or federal levels.

Program: An organization or an individual component of an organization that provides family strengthening and support services and activities. It may be public, private, or faith-based. It serves families, and may also serve individuals and communities.

Program Self-Assessment: An evaluation of the Program’s effectiveness in meeting its goals and objectives. Such an evaluation is conducted by the Program, and may include staff members, board members, parent leaders, and other stakeholders.

Protective Factors: Conditions or attributes in individuals, families, communities, or the larger society that, when present, mitigate or eliminate risk in families and communities, and increase the health and well-being of children and families.

Resilience: The ability to manage and bounce back from all types of challenges that emerge in every family’s life.

Stakeholders: Internal or external parties, such as persons, groups, and organizations, which have a direct or indirect stake in the Program. They can affect, or be influenced by, the Program’s actions, objectives, and policies. Key stakeholders in a Family Strengthening and Support Program may include: staff members, board members, children, families, schools, collaborative partners, networks, government agencies, policy makers, funders, business owners, and the community.

Strength-Based Approach: A positive approach to working with families that recognizes that all people have strengths, and emphasizes the importance of helping them discover, develop, and utilize those strengths to solve problems and achieve goals.

Strengthening Families Approach: Developed by the Center for the Study of Social Policy in 2005, an approach that focuses on building 5 Protective Factors with families that research has shown increase family stability, enhance child development, and reduce child abuse and neglect. These Protective Factors are: Parental Resilience, Social Connections, Concrete Support in Times of Need, Knowledge of Parenting and Child Development, and Social and Emotional Competence of Children. For more information, please see www.cssp.org/reform/strengthening-families.

WIC: The Women, Infants & Children federally funded supplemental nutrition program for low-income families with young children. The program provides supplemental food items, nutrition education, and breast-feeding support, as well as referrals to health and social services, for eligible pregnant and new mothers of children aged 0-5 years.
Founded in 2009, the California Network of Family Strengthening Networks (CNFSN) is a membership-based organization of county, regional, and statewide networks that focus on strengthening and supporting families.

For more information about the California Network of Family Strengthening Networks, please see www.cnfsn.org or email cnfsninfo@gmail.com