

Washington State Family Resource Center Landscape Study

Summary of Findings



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ABOUT THE STUDY TEAM

Five individual, independent consultants came together to form the study team under the direction of Kasey Langley (Kasey Langley Consulting). Kasey Langley, Janette Moreno (Janette Moreno Consulting), and Catherine Roller White (Catherine Roller White Consulting) conducted the bulk of the research, data analysis, summary, and writing. Kerrie Schurr (Sahale Services) served as project associate and editor, and Garrison Kurtz (Dovetailing Consulting) served as a senior strategic advisor to the project.

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EXECUTIVE SUMMARY

In January 2021, the Washington State Department of Children, Youth, and Families (DCYF) commissioned a landscape study of family resource centers (FRCs) with the aim to “better understand the approaches, availability, services, supports, stability, and capacity of FRCs” in the state.¹ A study team was formed to identify and survey FRCs in Washington, and to gather information from individuals to guide the overall study and illustrate particular issues. The survey responses of 63 FRC organizations and other findings are summarized in this report.

Family Resource Centers (FRCs) are place-based organizations that provide a single point of entry to a range of services for anyone in the community.

FRCs provide information, assess needs, make referrals to family services, and provide direct delivery of family services by FRC staff or contracted providers. FRCs are welcoming and strengths-based and are designed to meet the needs, cultures, and interests of the communities served. Families and family advocates work in partnership to develop and pursue families’ goals in increasing self-reliance and self-sufficiency. There are myriad organizations and efforts across the state that provide important resources and connection for families, such as food banks or co-op preschools, that are complementary but distinct from the Family Resource Center model.

Evaluations of the impact of FRC efforts show promising increases in family strengths (such as self-sufficiency and confidence in their capacity to protect their children from harm) and promising decreases in indicators of child maltreatment.²

Many states and localities have invested in FRCs to build infrastructure to connect with and serve children and families, including Colorado, California, Alabama, New Jersey, New Hampshire, and Kentucky. Washington has several examples of local efforts to support multiple FRCs, including the City of Seattle, Tacoma-Pierce County Health Department, and two Southwest Washington school districts. In 2020, an FRC work group was formed to explore options to form a statewide family resource center network in the state. In March 2021, the Washington State Legislature passed House Bill 1237 with the goal to “provide a common definition for family resource centers across the state in an effort to establish a core set of principles for existing and newly forming family resource centers.”³

How many FRCs are operating in Washington?

The number of FRCs in the state and the list of those FRCs will evolve along with the ongoing efforts of family support stakeholders in the state to clarify what exactly it means to be an FRC in Washington and what the pathways are for organizations that aspire to meet that definition.

Representatives of **63 organizations responded to the FRC survey** and indicated that their organization met the six defining characteristics of FRCs used in this study. It is likely that additional organizations in the state could fit this definition of an FRC, but they did not respond to the survey. Yet other organizations in the state fall

¹ Department of Children, Youth, and Families, “RFP No. 20-DCYF-EL-009A” November 23, 2020

² Casey Family Programs, “Appendix: Snapshot of Research on Family Resource Centers”

³ Washington State Legislature, “An Act Defining Family Resource Centers,” House Bill 1237, Passed, April 14, 2021

into the category of meeting “most, but not all” defining characteristics of FRCs. Basic information from 21 such organizations, referred to as “near FRCs,” is summarized in Appendix C.

Some organizations that fit the definition of an FRC for this survey may not meet future definitions (based on more specific and/or externally assessed characteristics) that are expected to emerge as state stakeholders make implementation decisions that apply the definitions and principles described in HB 1237.

What services and supports are offered through FRCs?

FRCs provide a central point of access for multiple supports and services. **On average, FRCs offer 18 different services** (out of 33 possible).⁴ Almost every FRC’s array of services is unique; only two FRCs report offering the same set of services.

Most FRCs offer the following services: Referrals to healthcare services or public benefit programs (98%); Family advocacy/case management (93%), Access to emergency and daily living resources (86%); Parenting education (86%); and Community celebrations and fairs (83%).

What populations are served by FRCs?

Survey respondent estimates indicate that **well over 100,000 people per year participate in services at an FRC in Washington**. Most responding FRCs were in Western Washington, where they were concentrated in urban areas along the I-5 corridor, specifically in Clark, King, Pierce, and Snohomish Counties.

The vast majority of FRCs (85%) served parents and/or caregivers caring for children as one of their focus populations and **most FRCs report having a particular focus on or strength in serving one or more specific populations**, such as immigrant/mixed-status families (68%), formerly or currently homeless or unhoused families or youth (65%), and rural communities (52%).

Nearly three in four FRCs (72%) identified Hispanic or Latinx people as one of their focus populations. Significant but smaller proportions of FRCs focus on people who are Black or African American (40%), Asian or Asian American (28%), Native Hawaiian and/or other Pacific Islander (28%), African (27%), Arab/Middle Eastern (17%) and other categories of race and ethnicity.

Over three-quarters (77%) of FRCs have the capacity to engage with families in Spanish, with smaller percentages of FRCs able to engage in other languages, including Russian, American Sign Language, Arabic, and others.

FRC respondents estimate that a large proportion (77%) of families served by FRCs live at or below 200% of the federal poverty level.

How are FRCs funded and staffed?

A significant proportion of **FRCs have very small budgets and operate with a relatively small number of full-time employees**. Most FRCs report annual budgets of less than \$1M (although only 39 respondents shared budget information). The top three funding sources were restricted grants, county/city funds, and unrestricted funding. Very few FRCs (fewer than 10%) count a state government funder among their top three funders.

Nearly half of FRCs employed three or fewer full-time employees, and just over half employed three or fewer part-time employees. Nearly half of FRCs reported having 20 or more volunteers and about three in five FRCs rely on volunteers moderately or heavily in nonpandemic times.

⁴ The FRC survey included a list of 33 possible services and asked respondents for information about which services were available onsite at their FRC.

To what extent do FRCs work with community partners?

The vast majority of FRCs reported having six or more community partnerships and three in five organizations (60%) were co-located with another organization. The most common community partners were early childhood centers and schools, mental health professionals, and faith communities. FRCs were most frequently co-located with primary schools, community centers, government agencies, and community-based organizations. On average, 7 FRC services (out of 33 possible) were offered in collaboration with a community partner.

How do FRCs partner with DCYF Child Welfare?

A majority of survey respondents listed DCYF Child Welfare as a community partner, but many fewer list DCYF Child Welfare among their sources of funding. Just five FRCs listed Child Welfare as a primary source of funding and eight listed Child Welfare among any of their funding sources. Few FRCs report providing supervised visitation, while about a third report providing differential response services (e.g., services for families screen out of the child welfare system) for families screened out of child welfare.

To what extent do FRCs use family support frameworks and standards?

About three in ten FRCs report using all three national guidelines that describe and codify quality family support practices: The Family Support Principles⁵, The Strengthening Families Protective Factor Framework,⁶ and The Standards of Quality for Family Strengthening and Support.⁷ Nearly two in three FRCs reported that they were familiar with and used Family Support Principles. Many were familiar with and used the Strengthening Families Protective Factors Framework. About two in five were familiar with and used Standards of Quality for Family Strengthening and Support.

What are FRC practices for monitoring, learning, and evaluation?

Most FRCs collect data on program service utilization and about half engage in near-term outcome evaluation. FRCs use a variety of methods to collect and manage data, and many use one or more databases specific to a particular program or funder. **Nearly all FRCs solicit and incorporate feedback from families,** and half had three to five methods of soliciting feedback. The most common methods were client satisfaction surveys and parent/caregiver advisory groups.

For collecting and managing data, about three in five FRCs had a dedicated database unique to their organization, and **just under half of FRCs had one or more databases specific to a particular program or funder.** Nearly all FRCs report using their data for program monitoring and improvement, and most report using their data to fulfill funder requirements. The flexible and decentralized nature of FRCs can complicate efforts to collect, manage, and understand data across different services within an FRC and across different FRCs.

How did FRCs respond during the COVID-19 pandemic?

Washington FRCs responded to COVID-19 **by adapting the way they deliver services and offering more resources.** Many FRCs increased the number of adults they served, and about two-thirds of FRCs had an increase in their operating budget, perhaps due in part to pandemic relief funds.

⁵ Judy Langford and CSSP, “The Role of Family Support in an Integrated Early Childhood Systems”

⁶ Center for the Study of Social Policy, Protective Factors Framework

⁷ National Family Support Network (NFSN), Standards of Quality

What are opportunities to strengthen FRCs in Washington?

Respondents believe that FRCs in Washington can be strengthened through:

Funding and other supports to **provide more services and serve more families**

Flexible, sustainable funding across the diversity of FRC needs and capacities

Funding and other supports to **build organizational and staff capacity**, such as providing professional development, paying a living wage, and addressing or preventing burnout

Supports for family engagement ranging from forming connections with isolated families to engaging families as partners and leaders

Supports for diversity, equity, and inclusion (DEI) and antiracism, such as building organizational capacity and connecting with culturally diverse community members

Investing in collective efforts, systems, and other shared resources across FRCs to increase collaborations among community and state partnerships and reduce duplication of services. Interest in collective efforts and centralized supports to support FRCs was relatively high for each of the six elements listed on the survey: connections with peer FRCs; professional, leadership, and other organizational capacity development; statewide FRC policy and advocacy efforts; grant-writing and other fund development; and common FRC quality standards and/or certification.

The response to this landscape study and related FRC stakeholder efforts in the state show that **there is a lot of energy and interest related to the FRC approach in Washington in 2021**. FRCs play an important role in communities around the state. These organizations were in place prior to and stepped up to support families during the COVID-19 pandemic in 2020. At the same time, FRCs are grappling with organizational challenges, such as constrained funding and difficulty retaining and supporting staff, and are operating in a context marked by systemic racial inequity, economic disparities, and increased rates of substance abuse and mental health struggles, all complicated by the COVID-19 pandemic and the associated economic and interpersonal dislocation. FRCs are one strategy among a range of strategies to connect with and engage families. Communities themselves are often best situated to determine which options within that range of strategies are best suited to the local context. **Stakeholders with different points of view and experiences within the FRC ecosystem will need to communicate and collaborate to balance flexibility and responsiveness with accountability, quality, learning, and evaluation.** The perspectives of FRCs reflected in this study will ideally provide productive starting places for those conversations and collaborations.

INTRODUCTION

Family resource centers (FRCs) are place-based organizations that provide a single point of entry for anyone in the community. They provide information, assess needs, make referrals to family services, and direct delivery of family services by FRC staff or contracted providers. FRCs are welcoming and strengths-based and are designed to meet the needs, cultures, and interests of the communities served. Families and family advocates work in partnership to develop and pursue families' goals for increasing self-reliance and self-sufficiency. Three key goals of FRCs are to “support families to be strong, healthy, and successful;” to “contribute to building a strong and healthy community,” and to reduce the likelihood of child maltreatment by strengthening families' protective factors (including positive social connections, parental resilience, access to concrete supports in times of need, knowledge of parenting and child development, and ways to encourage the social and emotional competence of children).^{8,9} **The Washington State Department of Children, Youth, and Families commissioned this study in January 2021 in order to “better understand the approaches, availability, services, supports, stability, and capacity of FRCs” in the state.**¹⁰ Study questions are listed in Appendix A.

The (FRC) is a safe place for all people and often opens families up to exposure and support from their peers as well as from staff. The value in feeling like you belong is often underestimated. Families [are] coming to the (FRC) not just to get help, but [for them] to give help grows that sense of belonging and ownership of their place in the school and community. Feeling safe in a space often allows families the opportunity to let their guard down, and open up to new information and ideas. (Southwest Washington School-Based FRC)

The FRC concept and approach in the United States is grounded in late-1800s efforts to establish settlement houses to support new immigrants.¹¹ Family support programs grew in the 1970s as a local response to support parents with young children. These programs offered drop-in services with no need to pay or sign up and eventually formed into collections of services offered in community-based centers. In 1981, the federal Administration on Children and Families funded the first national Family Resource Coalition as a vehicle for communication and networking. At the state and regional level, individual family support programs began to connect through networks that provided funding, training, and technical assistance. In the 1990s, federal funding allowed for the expansion of family support programs and services across states. Over the past 20–30 years, several states and localities have sharpened their intentions and deepened their investments in FRCs as a part of their family strengthening, support, and child maltreatment prevention approach. As part of this work, FRCs, policymakers, and FRC stakeholders have developed collective resources such as standards and curricula to support quality practice and shared monitoring, evaluation, and learning; professional development; and organizational capacity building. Family resource center networks bring together multiple FRCs to develop, disseminate, and manage these collective resources.¹² **Founded in 2011, the National Family Support Network (NFSN) is a network of networks, an association of state and regional family support networks from around the country.** The NFSN coordinates and supports 30 FRC

⁸ Center for the Study of Social Policy, Protective Factors Framework.

⁹ National Family Support Network, “What Is a Family Resource Center?”

¹⁰ Washington Department of Children, Youth, & Families, “RFP for Landscape Analysis of FRCs.”

¹¹ Sherman and Associates, “Family Resource Centers Vehicles for Change, Volume II.”

¹² National Family Support Network, “What is a Family Resource Center?”

networks in their efforts to build collective resources that strengthen FRCs in their states and localities.

Other States' FRC Investments and Impact

Colorado, California, Alabama, New Jersey, New Hampshire, Kentucky, and many other states and localities have invested in FRCs to build infrastructure to connect with and serve children and families. In 1993, the Colorado General Assembly established FRCs to serve as a “single point of entry for providing comprehensive, intensive, integrated, and collaborative community-based services for vulnerable families, individuals, children, and youth” in communities around the state. By 2020, there were 32 FRCs in Colorado that served 27,800 individuals in 13,221 families.¹³ These 32 Colorado FRCs are members of the Colorado Family Resource Center Association, a statewide FRC network that uses a collective impact model to expand Colorado FRCs and increase organizational capacity and quality through common evaluation and monitoring, technical assistance and trainings, and other supports. In California, there are 1,000 FRCs and 30 FRC networks serving nearly 300,000 young children and 568,000 parents annually across the state.¹⁴ In Alabama, 17 FRCs are part of a statewide network and must meet 25 legislatively established quality standards to qualify for FRC funding.¹⁵ There are 57 state-funded Family Success Center FRCs in New Jersey,¹⁶ 29 FRC locations that are part of the Family Support New Hampshire network, and 854 school-based family resource centers in Kentucky. In addition, there are many more examples of FRCs and the state and regional efforts that support them through funding and other assistance.¹⁷

In 2019, Casey Family Programs published an informational brief about the impacts of place-based programs like FRCs on child maltreatment and entry into foster care, along with an appendix summarizing research on FRCs.¹⁸ **Evaluations of the impact of FRC efforts show promising increases in family strengths (such as self-sufficiency and confidence in caregivers' capacity to protect their children from harm) and promising decreases in indicators of child maltreatment.**¹⁹ One study on the effectiveness of FRCs showed a 45% reduction in cases of child abuse and neglect in Alachua County, Florida,²⁰ and a study in Vermont showed that the work of FRCs supported by a statewide network saved the state \$210,000 per family that would have otherwise been spent on addressing the effects of child abuse and neglect.²¹

Washington FRC Landscape Context, Study Questions, and Purpose

In November 2020, the Washington State Department of Children, Youth & Families (DCYF) issued a request for proposals to complete a landscape analysis of the family resource or family support centers in Washington. Family resource centers and family support and prevention of child maltreatment approaches have been supported over the years in Washington State through past efforts including those of the Washington Council for the Prevention of Child Abuse and

¹³ OMNI Institute, “Colorado Family Resource Center Association Executive Report.”

¹⁴ The Early Learning Lab. “Family Resource Center Landscape Review.”

¹⁵ Alabama Network of Family Resource Centers, “Membership Standards.”

¹⁶ State of New Jersey Department of Children and Families, “Family Success Centers”

¹⁷ National Family Support Networks, “State Network Snapshots 2019.”

¹⁸ Casey Family Programs, “Do Place-Based Programs, Such as Family Resource Centers, Reduce Risk of Child Maltreatment and Entry into Foster Care?”

¹⁹ Casey Family Programs, “Place-Based Programs Appendix”

²⁰ Casey Family Programs, “Place-Based Programs Appendix.”

²¹ See Casey Family Programs, “Place-Based Programs Appendix.” for overview of FRC evaluations of impact and effectiveness.

Neglect, the Washington Children’s Trust Foundation, the Council for Children and Families, the Washington State Family Policy Council, Strengthening Families Washington within DCYF, and others. Recognizing that the “stability of funding and statewide support for FRCs has fluctuated” and that “there is little known about the collective impact, range of services offered by FRCs and how extensively they are available in communities throughout the state,” DCYF posed 12 specific questions for this landscape study, starting with “How many FRCs are operating in Washington?” and including questions about FRC services, funding, staffing, target populations, and more.²² DCYF’s overall purpose in commissioning this study is to “better understand the approaches, availability, services, supports, stability, and capacity of FRCs across the state,” and to “better understand their potential role in statewide efforts for child abuse and neglect prevention.”²³



DCYF posed an additional study question about the impacts of the COVID-19 pandemic on FRCs and the role of FRCs supporting families in Washington during the COVID-19 pandemic.

Independently of DCYF efforts, the Children’s Home Society of Washington convened an FRC work group in 2020 that collaborated with state legislators to develop legislation establishing a definition for FRCs in Washington and to explore options to form a statewide family resource center network in the state.

In March 2021, the Washington State Legislature passed House Bill 1237 with the goal to “provide a common definition for family resource centers across the state in an effort to establish a core set of principles for existing and newly forming family resource centers.”²⁴

This bill was signed into law by Governor Jay Inslee on April 14, 2021. The FRC work group continues its work in 2021.

In Washington and elsewhere there are myriad organizations and efforts that provide important resources and connection for families, such as Help Me Grow, 211, food banks, community-based health centers, co-op preschools, parenting education programs, and more. These are complementary but distinct from the Family Resource Center model, which seeks to provide multiple services to both children and their caregivers in a community-based setting using a family strengthening and supportive approach. This landscape study focused primarily on learning about Washington State organizations that met the recently legislated definition of FRCs.

METHODOLOGY

Guided by the definition of FRCs included in HB 1237, the team conducted outreach to identify organizations in Washington meeting the criteria of that definition, invited them to complete a survey, and gathered information from individuals via phone calls, email, and key informant interviews. This information was used to guide the overall study and to understand and illustrate particular issues. Survey and key informant data collection included information about the purposes and uses of data collected, how data would be shared, and assurances that respondents were free to choose to participate and free to skip any questions.²⁵

²² See Appendix A: FRC Landscape Study Questions Identified by DCYF.

²³ Washington State DCYF, “RFP for Landscape Analysis of FRCs.”

²⁴ Washington State Legislature, “HB 1237.”

²⁵ The team requested and received an exemption from human subjects review from the Washington State Institutional Review Board (WSIRB).

Outreach to Potential FRCs

The study team created an FRC Study outreach document and a very short “FRCFinder” online survey,²⁶ asking family support stakeholders to provide contact information for organizations meeting FRC definitional criteria. (These organizations could be either their own and/or organizations known to them.) DCYF sent out information and the outreach materials to several DCYF newsletters and contact lists, including the DCYF Office of Tribal Relations newsletter, the Indian Policy Early Learning Committee, the Indian Child Welfare Subcommittee, the Strengthening Families Washington Newsletter, the Home Visiting Newsletter, the Strengthening Families Locally contact list, and the Early Support for Infants and Toddlers (ESIT) contact list. DCYF and the study team collaborated to contact regional and statewide family support stakeholder organizations to share outreach materials with them and ask them to share the materials with their networks. These regional and statewide organizations included the Children’s Home Society of Washington, the City of Seattle Human Services Department, the Tacoma-Pierce County Health Department, King County’s Best Starts for Kids, the Washington State Association of Head Start and ECEAP, the Children’s Alliance, the Washington State Community Action Partnership, Start Early, the Multi-Service Center, Catholic Charities of Eastern and Central Washington, Catholic Community Services, SeaMar Community Health Centers, and the Yakima Valley Farm Workers Clinic. The study team also conducted short phone conversations with many organizations to help determine whether that organization and/or their partners might fit the FRC definitional criteria.

Building a List of FRCs to Invite to Complete a Detailed Survey

In addition to the FRCFinder outreach, the team began a process to build a list of organizations that were, or seemed likely to be, FRCs and attempted to determine which organizations met the recently legislated definition of an FRC. The study team started with several lists of organizations provided by DCYF (e.g., current and former contracted organizations for community-based child abuse prevention). The team then conducted internet research to identify both potential FRCs and potential state and regional stakeholder organizations that could help identify FRCs and distribute outreach information. And finally, it added organizations identified via the FRCFinder short survey. The team attempted to filter the list and to screen in organizations meeting all FRC definitional criteria while screening out those not meeting those criteria. However, the team soon realized that the lack of a consistent, commonly understood definition and inconsistent information available online made it impossible to make accurate determinations about which organizations met the FRC definitional criteria. The study team decided to abandon this effort and instead invite every identified organization to complete a survey that included a set of “self-screener” questions to verify whether the FRC met each of six definitional criteria (see Appendix B). **The survey respondents represent a convenience sample and should not be interpreted as representative of all FRCs in the state.** (“Convenience sample” means that the study team invited all identified potential FRCs to respond to the survey and included all responses in this summary. Several factors—including lack of information about the total number of FRCs in the state, the emerging nature of the definition of FRCs, and the exploratory purpose of the study—led the team to choose this sampling approach.)

²⁶ See Appendix F for the outreach document and FRCFinder.

Survey Development and Administration

The team developed the survey instrument through an iterative process, using the DCYF Request for Proposal questions to guide the overall content (see Appendix G for the full survey). Data collection tools from two other FRC landscape processes, a Harder+Company survey of California FRCs²⁷ and the Georgia Family Support Network 2021 Survey,²⁸ informed the tool development process. The team developed a draft survey, incorporated changes based on feedback from DCYF, and developed a second draft to pilot with key informant FRCs. Two representatives (one each from North Seattle Family Resource Center and Family Education and Support Services) pilot tested the second draft and participated in Zoom calls with the team to review their survey feedback and insights. Based on that feedback, and realizing that the survey invitation list would need to include both FRCs and near FRCs, the team developed a third draft of the survey that included a set of “self-screener” questions about each of six definitional criteria. This third draft also included a “full survey” and a “short survey.” In this version, respondents whose answers indicated that their organization met all FRC definitional criteria were directed to complete the “full survey,” and respondents whose answers to the “self-screener” questions indicated that their organization met “most, but not all” FRC definitional characteristics were directed to complete a shorter survey to gather information about “near FRC” organizations. The team reached out to four FRCs representing BIPOC (Black, Indigenous, and people of color) communities, rural areas, and immigrant populations. One FRC responded and agreed to pilot this draft and provide feedback on their experience via Zoom. The team incorporated changes based on this pilot to create the fourth and final draft of the survey instrument.

The survey was administered online using the SurveyMonkey platform. Respondents were offered a \$25 e-gift card (via Tango Rewards) for each location for which they completed a survey. (Respondents were advised to follow their organization’s guidelines for handling receipt of a gift card.) The team sent the first survey invitations on May 2, with additional invitations going out to some smaller groups over the course of a few days for logistical reasons.²⁹ The team sent reminders to nonresponders on May 4 and May 10 (via the SurveyMonkey reminder system), on May 17 (in an email from a the DCYF Strengthening Families Washington email account), on May 24 (via SurveyMonkey), and on May 27 (via an email account created for the FRC study). To further encourage participation, a team member participated in the Children’s Home Society of Washington FRC Work Group meeting on May 19. The survey closed on May 31. In total, the team invited representatives from 193 organizations to complete the survey.

Key Informant Data Collection

Representatives of three organizations participated as key informants for this study: Room One (Okanogan County), North Seattle Family Resource Center (King County), and Family Education and Support Services (Thurston County). Key informants completed pilot tests of the survey instrument (some more than once) and participated in a Zoom call to share their survey feedback and to respond to other questions about their FRC and their perspectives on the FRC landscape. They also participated in follow-up email and phone communications to explore specific issues, such as community partnerships and their organizations’ roles with child welfare system-involved

²⁷ Harder + Co Community Research, “Survey Tool,” 2019 California Family Resource Center (FRC) Statewide Survey.

²⁸ “Georgia Family Support Network 2021 Survey,” n.d.

²⁹ For example, the team needed to set up different survey administration and reminder processes for a handful of respondents who would be sharing information about more than one FRC site.

families. Key informants were offered a \$250 stipend for their organization for their contributions to the study.

Survey Respondents' Roles

A total of 84 organizations completed the survey. Of these, 63 completed the full survey and were considered “full FRCs” based on their responses to the “self-screener” questions about FRC definitional criteria. Results from these organizations are presented in this report. The remaining organizations ($N=21$) met some, but not all, of the criteria to be considered an FRC (based on their responses to the “self-screener” questions). Results from these “near FRCs” are presented in Appendix C.

Survey respondents represented a diverse set of roles within FRCs. Among the 57 respondents, roles included Family and Community Resource Coordinator (30%), Program or Regional Director (26%), Executive Director or CEO (25%), Manager (9%), and Family Engagement and Outreach Coordinator (7%). Two respondents (2%) who listed their roles as Other specified their roles as Family Connections Supervisor and Head Start ERSEA/Family Support Specialist.

FRCs That Are Part of Umbrella Organizations or FRC Networks

Some respondents reported that their FRC (or near FRC) was part of a larger umbrella organization that managed some functions like contracting or human resources and, in some cases, was an umbrella organization for more than one FRC. Umbrella organizations included Brigid Collins Family Support Center (2 responses), Children’s Home Society of Washington (8 responses), Chinese Information & Service Center (2 responses), Evergreen Public Schools (6 responses), Lutheran Community Services Northwest (3 FRC responses), Vancouver Public Schools (11 responses), and Volunteers of America Western Washington (3 responses).

Although no statewide FRC network currently exists in Washington State, the FRC work group has been exploring options for such a network. At a regional level, there are a few examples of smaller networks of FRCs that provide collective supports such as funding, FRC criteria or quality standards, common evaluation tools and approaches, and professional development. Forty-one FRC respondents reporting being a part of a smaller regional FRC network, including Seattle Family Resource Centers (funded by the City of Seattle), Community Foundation of Snohomish County, the Family Support Partnership of the Tacoma-Pierce County Health Department and Washington State Parent to Parent Support Programs (a network of family support programs focusing on the families of children with disabilities that is sponsored by the ARC of Washington). In Clark County, school districts including Evergreen Public Schools and Vancouver Public Schools have invested in school-based family resource centers. These districts play many of the roles of an FRC network for the centers in their jurisdiction.

List of FRCs

Appendix D contains a list of, and contact information for, the 84 organizations that responded to the FRC Survey. It includes 63 organizations that indicated that they met all of the defining characteristics listed above (prior to the COVID-19 pandemic, since many FRCs had to limit some functions during COVID-19 restrictions) and 21 organizations that responded to the survey and indicated that their organization had “most, but not all” of the FRC defining characteristics. The team will provide DCYF with (but not publish) a list of the additional 109 organizations that were identified through the FRCFinder and other outreach, but which did not submit a completed survey. This information is not being published because the names and contact information for organizations in this group were not necessarily provided by a representative or employee of

that organization and may not be accurate or up to date. In addition, without a survey response, there is no information from an organizational representative about whether that organization meets all or some of the FRC defining characteristics. Nevertheless, many on this list are organizations that see themselves or are seen by others as possible FRCs and, as such, the team recommends including them in ongoing communications about FRC efforts and opportunities in the state.

HOW MANY FRCs ARE OPERATING IN WASHINGTON?

The answer to the question “How many FRCs are operating in Washington?” can, and will, vary depending on the context of the question.

As noted above, this report summarizes information shared by representatives of 63 organizations that responded to the FRC survey and indicated that their organization met definitional criteria based on HB 1237, the recently passed legislation intended to provide a common definition and establish a core set of principles for FRCs in Washington. **It is likely that more organizations in the state could fit the definition of an FRC.** These organizations are not on the respondent list because (1) they did not self-identify as an FRC, (2) the outreach efforts did not reach the right person, or (3) they did not complete the survey for other reasons. Respondents representing an additional 21 organizations indicated that their organization met “most, but not all” of these defining characteristics. Because the outreach process for this survey sought out organizations meeting all of the criteria, **there are almost certainly more organizations in the state that would fall into the category of meeting “most, but not all” defining characteristics of FRCs.**

Organizations’ capacity to meet all of the defining characteristics of an FRC often depends on what kinds of activities and capacities they are able to fund and provide. For example, FRCs reported that they struggle to find funding to provide family advocacy services to *any* family that needs it because funding sources restrict them to serving families in specific circumstances. Among

Defining Characteristics of FRCs

(for the purposes of this study; see Appendix B for more details)

Place-based: Unified point of entry; welcoming and strengths-based; drop in to use a printer or ask for information; a place for conversations or hanging out

Information, resources, and referrals: Families coming through the door have access to pamphlets describing community resources; offer concrete supports such as food pantries and diaper closets; link families to services in the community

Family advocate(s): Perform screening, needs and strengths assessment; goal setting if requested by the family

Direct family support services: Offered by staff or contracted partners includes parent/caregiver education and support programs, life skills advocacy, formal services for children and youth

Community building and civic engagement: Events and programs such as community celebrations and fairs, parent leadership program, voter registration, advocacy, and advocacy training

Family-focused: Activities, programs, and events are intentionally directed towards families (parents, caregivers, children, multigenerational)

the “near FRCs” that responded to the survey, nearly two-thirds reported that offering family advocacy was a defining characteristic that they did not meet.

Applying the FRC Definition: Criteria, Standards, or Certification

There is currently no statewide set of standards or commonly used certification process for FRCs in Washington. The concept of certification refers to the specific details or criteria to determine whether an organization meets or does not meet the defining characteristics of an FRC in Washington. These details will evolve as state FRC stakeholders continue their work and may eventually result in a formalized certification process. Any process to determine which organizations are FRCs will necessarily involve a balance between the need for flexibility to accommodate diverse organizational arrangements (which are aligned with the diversity of Washington families and communities) and the use of meaningful standards intended to assure that state FRCs meet a commonly understood set of standards regarding setting, services, approach, and quality. In addition, **some organizations that fit the definition of an FRC for this survey may not meet future definitions (based on more specific and/or externally assessed characteristics) that are expected to emerge as state stakeholders make implementation decisions that apply the definitions and principles described in HB 1237.**

Tricky determinations could include cases such as the following:

Organizations that serve only families meeting certain eligibility or funding criteria; for example, families meeting certain income criteria or families whose child is enrolled in a school or an early education program. These organizations are not set up to serve families who do not meet income criteria or who need help with an issue involving another child not enrolled in the particular educational program;

Organizations that focus on youth and may serve some teen and young adult parents, but do not serve the teens’ parents or other families in community.

The FRC Landscape Survey laid out six defining characteristics with brief descriptions and asked respondents to report whether their organization met each characteristic. In the future, a similar determination might be made by a funder developing an assessment based on the legislated FRC definition in order to guide funding decisions, or by any statewide entity developing an assessment and providing capacity building to organizations seeking certification as an FRC, or by organizations choosing to join a network and abide by the membership standards of that network. The implementation of the recently passed legislation defining FRCs, the ongoing efforts of the FRC work group to develop a statewide FRC network, DCYF’s and other state agencies’ decisions about whom to fund and how to use ongoing and new federal funding to support families, and other efforts will all involve specific decisions and details that can clarify what exactly it means to be an FRC in Washington and what the pathways are for organizations that aspire to meet that definition.

The concept of FRC certification is on the minds of some FRC stakeholders in Washington. Several respondents referenced this concept in their open-ended comments in the survey. One FRC noted the benefits of, *“providing certified FRCs with the training a technical assistance needed to provide all Washington state families with similar access to resources, support and connection.”* Another recommended that funders should *“Identify ‘real’ family centers...that are engaged in strength-based prevention and intervention programming that works WITH families.”* Yet another wrote that when their organization gets funding (or contracts) and the associated recognition from a respected funder, *“(p)eople notice and it helps to increase our draw for board, and community support. Having a ‘stamp [of approval]’ as an FRC could offer such recognition.”*

Other states and localities wanting to establish and strengthen both FRCs and networks of FRCs have gone through similar processes. For example in Alabama, the state standards for FRCs

include requirements related to insurance, staff credentials, data collection, and provision of transportation to families.³⁰ Family Support New Hampshire, the FRC network in that state, has a subset of its members that have sought and received designation as a Family Resource Center of Quality (FRC-Q), a 6–24 month process that includes use of the Standards of Quality for Family Strengthening and Support (SQFSS), state operational standards for FRC-Q's, data collection, site visits, and other processes that describe both what an FRC offers and how it operates and interacts with families, funders, and partners.³¹

It takes a great deal of pride, and crisis, for families to seek help so the spaces have to be accessible, welcoming, and entrusted by the community while also respected by professionals and public entities. (Western Washington FRC)

Illustration: Effect of COVID-19 Pandemic on FRCs' Capacity to Meet Defining Characteristics

Outside forces can impact organizations' capacity to meet FRC defining characteristics. For example, if an organization has to reduce or eliminate key services due to funding changes or other reasons, they may no longer meet all the definitional criteria. COVID-19 provided an extreme example of both negative and positive influences on the ability of some FRCs to meet the defining characteristics for a period of time. Negative effects were likely due to the need to reduce or eliminate place-based and in-person operations to meet social distancing safety requirements, as well as any declines in funding. Positive effects were likely due to increases in government and other COVID-19 relief funding and FRC innovation in response to COVID-19 restrictions.



Table 1 below ($N=59$ FRCs) shows each of the five definitional criteria for FRCs and the percentage of FRCs meeting each criterion before COVID-19, during COVID-19, and (planning for) after COVID-19.³² As would be expected, the number of FRCs offering place-based services and community building and civic engagement services decreased during the pandemic. Most FRCs were able to maintain three of the five core functions (information and referral, family advocacy, and family support services), and approximately half of FRCs were able to maintain even the place-based and community building and civic engagement services. (If the determination as to whether an organization qualified as an FRC had been made based solely on pandemic-level services, about half would not have qualified.) FRCs expect to return to pre-pandemic service levels in each of the five criteria after COVID-19.

³⁰ Alabama Network of Family Resource Centers, "Membership Standards."

³¹ Family Support NH, "Overview of the Designation Process."

³² Note: A reader might expect that, since this is a summary of data from organizations meeting all definitional criteria, the pre-pandemic percentages should all total to 100%. However, the data in this table are from a survey question that came after the self-screening question. In a few cases, the responses to this later question (#30) were not consistent with responses to the self-screening question (#7), which asked very simply whether an organization met each of the definitional criteria prior to the pandemic.

Table 1

During the COVID-19 pandemic, most FRCs were able to maintain three of the five FRC core functions: information and referral, family advocacy, and family support.

FRC criterion	Pre-pandemic		During pandemic		Plan to have post-pandemic	
	Number of FRCs	Percent of FRCs	Number of FRCs	Percent of FRCs	Number of FRCs	Percent of FRCs
Place-based	53	90%	29	49%	55	93%
Information, resources, and referrals	54	92%	51	86%	54	92%
Family advocate(s)	50	85%	51	86%	51	86%
Family support services	54	92%	49	83%	55	93%
Community building and civic engagement services	55	93%	33	56%	56	95%

Illustration: Most Tribes Operate as an FRC, but Might Not Call It That

Tribal social services agencies and other family support organizations supporting tribal communities illustrate how family resource centers are one part of a broader landscape of preventive family support systems and services and help to illustrate the fact that the state is in the early stages of having a common and widely shared definition of an FRC.

DCYF contracts with all 29 federally recognized tribes and three recognized American Indian organizations (RAIOs) in Washington State to provide Indian child welfare (ICW) and independent living (IL) services to tribal community members and maintains a list of tribal social services directors and lead social workers, two additional RAIOs, and some additional tribal community-focused organizations.³³ All of those different organizations offer a unique array of services and supports in different settings, including community celebrations, parenting education, family advocacy, early childhood education, cash and other supports to meet basic needs, youth development, and more. As part of the overall outreach process for this study, the DCYF Office of Tribal Relationships and the study team sent FRC Landscape Study outreach information to their tribal partners, the Indian Policy Early Learning Committee, the Indian Child Welfare Subcommittee, the RAIOs, and the additional tribal community-focused organizations.

Among survey respondents, 16 reported that tribal communities are a particular strength or focus population for their organization. These included just 4 organizations that are either affiliated with a specific tribal government or are part of an RAIO, and 12 community-based organizations, including some school-based FRCs.

The DCYF Director of Tribal Relations, looking at the defining characteristics of FRCs, shared, “Most tribes operate as an FRC, but might not call it that.”³⁴ A review of several tribal websites indicates many elements of FRCs present. As with other family support organizations, there may be tribes and/or other organizations serving tribal communities, that meet “many or all” of the defining characteristics of an FRC, but are not connected to national or state family resource center efforts or may not identify their organization in that way at this time.

³³ DCYF Office of Tribal Relations, www.dcyf.wa.gov/tribal-relations

³⁴ Langley, Kasey. Email from Tleena Ives.

Tribes operate and offer their services as agencies of sovereign governments and differ in their service offerings and arrangements. As such, tribes will have some similarities and some differences in relationship to other community-based family support services and organizations in the state in how they engage with efforts to support FRCs. Like other community-based family support organizations those tribal organizations' response to the question, "Is your organization an FRC?" may depend on the context of the question.

FRC RESPONDENTS' SERVICES, SUPPORTS, RESOURCES, AND ACTIVITIES

Responses to the FRC Landscape Survey affirm that FRCs are a central point of access for multiple supports and services, and that they provide a location for families to engage with partner organizations. FRCs reported on 33 different services and activities organized into three broad categories: family advocacy and concrete supports, family support services, and community building and civic engagement activities. Out of 33 possible services, the mean number of services offered at each FRC location is 18, the median is 18, and 98% ($N=57$ of 58 responding FRCs) offer 10 or more services.³⁵ On average, 7 services (out of 33 possible) at an FRC are offered in collaboration with a community partner.

Providing a set of services that fits local needs and priorities is an important value of FRCs. Responses to the survey show that almost every FRC's array of services is unique. Only two FRCs that offer the same set of services.

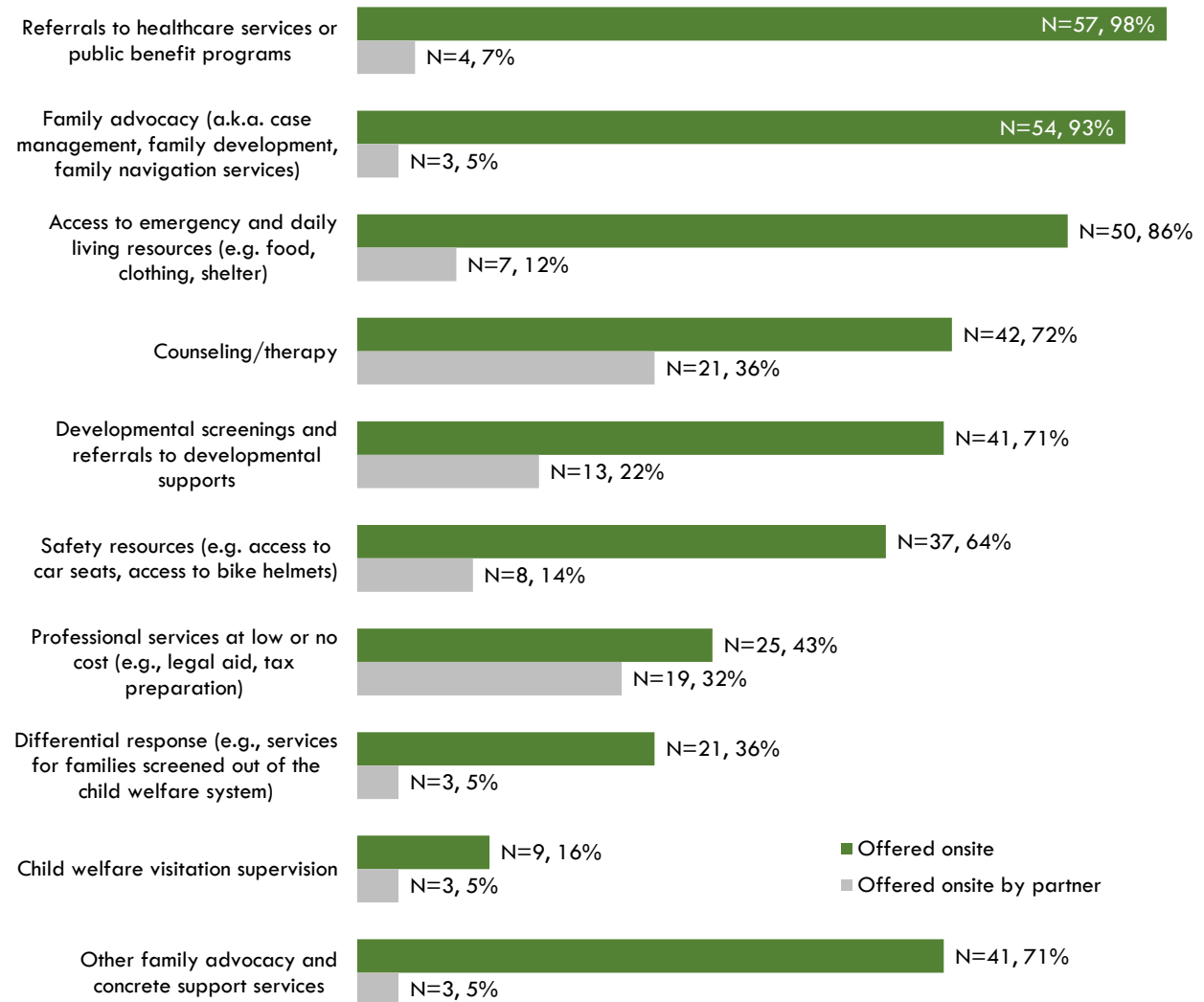
Family Advocacy and Concrete Supports

Figure 1 below shows the percentage of FRCs ($N=58$) offering various family advocacy and concrete support services onsite (offered at the FRC, by the FRC organization and/or by a community partner organization). The green bars indicate how many FRCs have a given service available on site, and the gray bars indicate how many FRCs offer a given service at their location in collaboration with a community partner. **A large majority of FRCs make available three key services from this list at their location: Referrals to healthcare services or public benefit programs ($N=57$, 98%), family advocacy/case management ($N=54$, 93%), and access to emergency and daily living resources ($N=50$, 86%).** Smaller proportions of FRCs offer services related to child welfare system involvement: 36% ($N=21$) offer differential response and 16% ($N=9$) offer child welfare visitation supervision. Among FRCs offering onsite counseling or other professional services at low or no cost (such as legal services or tax preparation), about one-third offer those services in collaboration with a community partner. Forty-one (71%) of respondents reported "other" family advocacy and concrete support services but did not list or describe those services.

³⁵ The FRC survey included a list of 33 possible services and asked respondents for information about which services were available onsite at their FRC.

Figure 1

Most FRCs offer referrals to health care services or public benefit programs, family advocacy, and access to emergency and daily living resources.



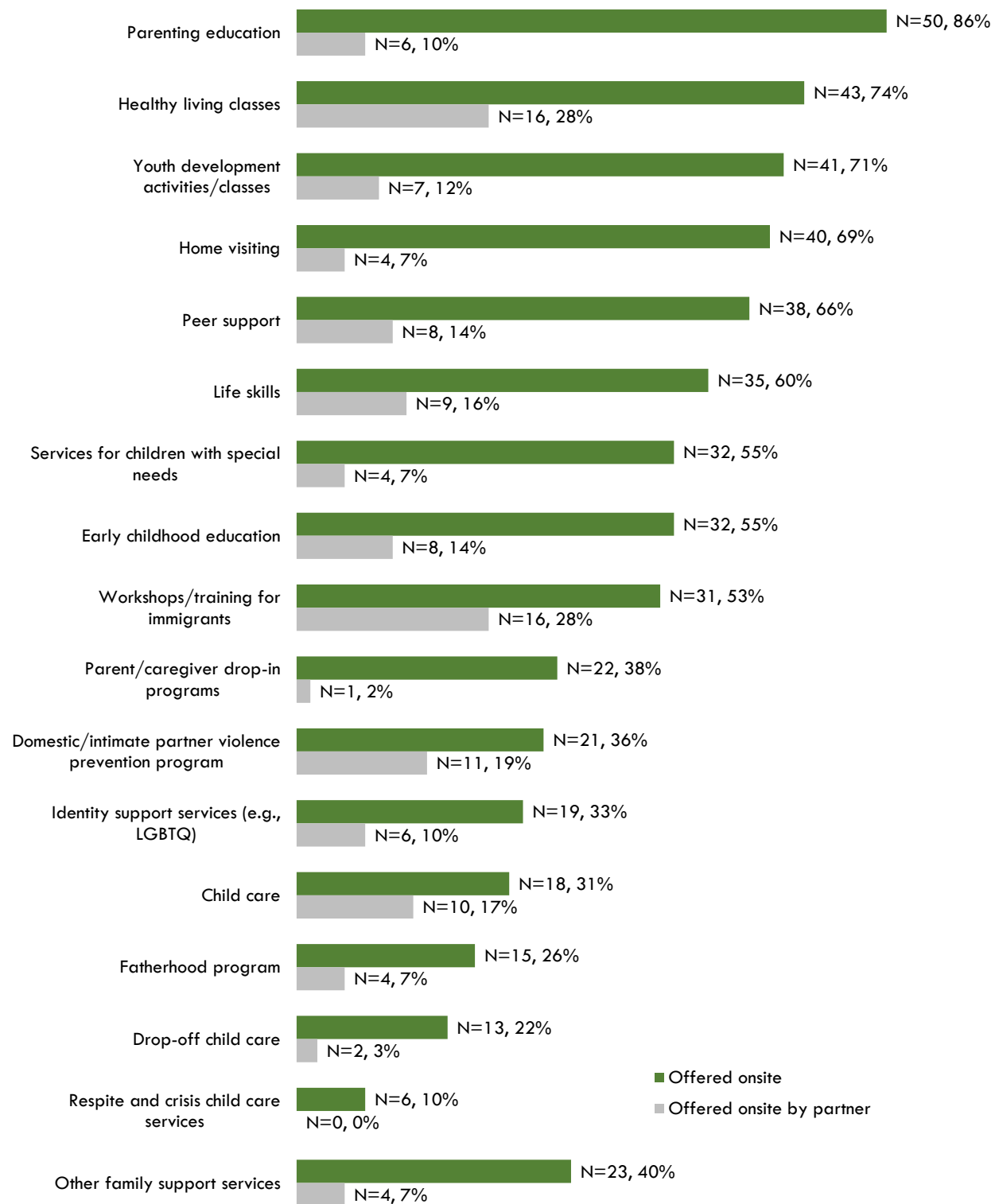
Family Support Services

Figure 2 below shows the percentage of FRCs ($N=58$) offering various family support services onsite. **Almost all FRCs offer parenting education ($N=50, 86\%$), and most offer healthy living classes ($N=43, 74\%$), youth development activities/classes ($N=41, 71\%$), and home visiting ($N=40, 69\%$).** Nine different services are offered by more than 50% ($N=30$) of FRCs. Smaller proportions of FRCs offered fatherhood programs ($N=15, 26\%$), drop-off child care ($N=13, 22\%$), and respite and crisis child care services ($N=6, 10\%$). Among the FRCs offering healthy living classes and workshops/trainings for immigrants, about one-quarter ($N=16, 28\%$) offer those services on site in collaboration with a community partner. Some respondents ($N=17$) provided additional descriptions of the family support services provided by their FRC. They listed parenting education curricula such as Circle of Security and Positive Parenting Program; models that involve a combination of home visits and other supports such as Parents as Teachers and the Parent Child Assistance Program (PCAP, targeting pregnant or new parents experiencing substance abuse); and other services including first time home buyer trainings, English as a second language groups, culturally specific parent support groups, domestic violence support groups, and healthy relationship classes.

Twenty-three (40%) of respondents reported offering “other” family support services but did not list or describe those services.

Figure 2

FRCs offer a wide range of family support services, including parenting education, healthy living classes, youth development activities/classes, and home visiting.

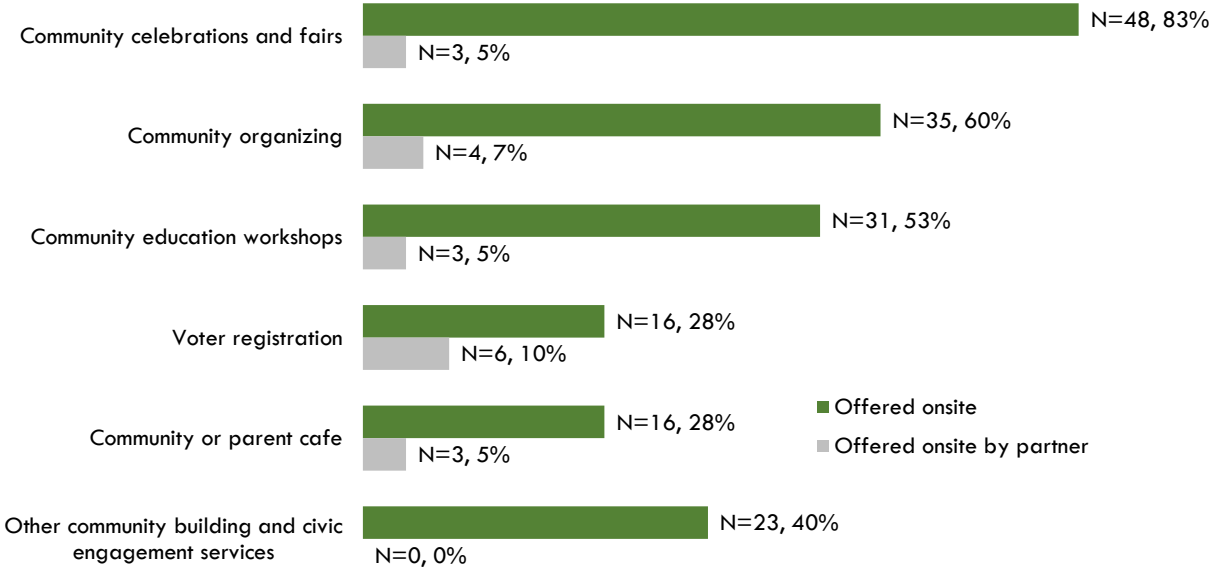


Community Building and Civic Engagement

Figure 3 below presents the percentage of FRCs (N=58) offering various community building and civic engagement services. **About four in five FRCs (N=48, 83%) offered community celebrations and fairs, while about three in five (N=35, 60%) provided opportunities for community organizing.** About half (N=31, 53%) offered community education workshops, and about one in four offered voter registration (N=16, 28%) or community or parent cafes (N=16, 28%). Sixteen (27%) respondents included additional description of these activities, writing about engaging families in a neighborhood revitalization project, providing information about the Census, hosting a parent community café with a health care organization, virtual family nights, Mariachi Band group sessions, and legislative advocacy trainings.

Twenty-three (N=39, 40%) of respondents reporting offering “other” community building and civic engagement services but did not list or describe those services.

Figure 3
About four in five FRCs offer community celebrations and fairs.



How FRCs Served Families during COVID-19 Restrictions



Most FRCs responded to COVID-19 by adapting the way they deliver services and offering more resources and many FRCs plan to retain those adaptations into the future. As shown in Table 2 below (N=59 FRCs), 92% (N=54) of FRCs adapted services

for online delivery, providing services such as virtual parenting education classes, virtual “home” visits, and virtual playgroups, and 70% (N=41) plan to keep such services available. Similarly, 83% (N=49) of FRCs added new events and activities to combat isolation (71%, N=42, plan to keep doing so) and 83% (N=49) increased their offering of material items (70%, N=41, plan to keep doing so). Four in five FRCs (N=47, 80%) increased their offering of information, referrals, and family advocacy and a similar percentage (N=48, 81%) plan to keep doing so. (As described earlier, during COVID-19, most FRCs were able to maintain three of the five FRC core functions: information and referral, family advocacy, and family support.)

Since the pandemic began, we have passed through over 550 emergency financial assistance grants to 178 families totaling \$270,000. Nearly 70% of those funds were provided to BIPOC families. (Western Washington, Rural FRC)

Table 2

During COVID-19, FRCs responded by **adapting services for online delivery and offering more material items, events and activities, and information, referrals, and family advocacy.**

Response to COVID-19	Pilot/innovation during COVID-19		Plan to keep post-COVID-19	
	Number of FRCs	Percent of FRCs	Number of FRCs	Percent of FRCs
Adapted services for online delivery (e.g., virtual parenting education classes, virtual “home” visits, virtual playgroups)	54	92%	41	70%
Added new events and activities (COVID-19-safe) to combat isolation, such as drive-thru events, connections through social media, and virtual groups	49	83%	42	71%
Increased offering of material items (food, diapers, cleaning supplies, personal protective equipment)	49	83%	41	70%
Increased offering of information, referrals, and family advocacy	47	80%	48 ³⁶	81%

³⁶ One FRC started in 2021 and therefore did not increase offerings during the pandemic, but does plan to keep the offerings post-pandemic.

Illustration: How One FRC Collaborates with Partners

The North Seattle Family Resource Center (operated by the Children's Home Society of Washington) was founded in 1992, serves around 5,000 individuals per year, and offers a wide range of family supportive services. Out of 33 family supportive services listed on the FRC Survey, 24 are available at the North Seattle FRC. The FRC and its partner organizations collaborate to engage biracial and families of color, immigrant and refugee families, and families who speak a language other than English, with staff and practices that reflect and respect families' language, culture, and lived experiences. The North Seattle FRC, together with its partners, can directly engage with families in Spanish, Amharic, Somali, Tigrinya, Cantonese, French, Arabic, Vietnamese, and Korean, as well as English. Five community partners have dedicated space at the North Seattle FRC:

- Consejo Counseling and Referral
- Sound Generations
- Seattle/King County Public Health
- Refugee Artisan's Initiative
- Build Lake City Together

These community partners work with the North Seattle FRC to provide services including:

- Behavioral health counseling for Spanish speaking families and individuals (adults, children, and youth)
- Intergenerational programming, including meal programs and counseling services
- WIC benefits, ORCA cards, Fresh Bucks food vouchers, access and registration for vaccinations (with interpreters available)
- Support for small businesses and business incubator for immigrant, refugee, and women-owned/managed businesses, such as helping immigrant and refugee women obtain small business licenses and providing access and training to serve as sub-contractors

The North Seattle FRC's longest partnership, with Seattle/King County Public Health, began when the Center opened 30 years ago. Their partnership with Consejo has been in place for about 9 years. Sound Generations and Refugee Artisan Initiative have been partners with the FRC for about 3 years.

The North Seattle FRC has hosted monthly community service provider networking groups for 15 years. Through those events, the FRC has found new partners and has helped to foster partnership among other providers attending those meetings as well. North Seattle FRC builds partnerships to respond to current needs, trends, and requests from the community and to reflect and respect families' language, culture, identity, and lived experience

WHO IS SERVED BY FRCs IN WASHINGTON?

FRCs represented in the survey data serve over 100,000 people per year. Most people served are adults between the ages of 18 and 65 and children aged 0 to 5.

Relationship-based and family-centered approaches are important hallmarks of quality in family supportive services, manifested, for example, in linguistically, culturally, and physically accessible centers and in meaningful efforts to engage families as partners and leaders.³⁷ FRCs reported which populations are a particular strength or focus of their organization, with categories of focus populations based on identity, race, ethnicity, language, and/or other common family characteristics, such as experience with immigration, homelessness, domestic violence, incarceration, or being a refugee. **FRCs varied greatly in the number and types of focus populations served.** Some FRCs reported serving only one or two focus populations (e.g., immigrant/mixed-status families, refugee populations, rural communities, or tribal communities), while others reported a particular strength in engaging with 10 or more focus populations.

Over three-quarters (77%) of FRCs have the capacity to engage with families in Spanish, with smaller percentages of FRCs able to engage in other languages, including Russian, American Sign Language, Arabic, and others. In comments, some respondents elaborated on their organization's capacity to employ native speakers to engage with families in languages others than English, while others described difficulty in meeting the language needs in their community. Three organizations described having access to translation services upon request. For some, the specificity of some of the languages makes it challenging to find translators.

(O)ur refugee population using services is quite high, especially Marshallese and Pacific Islander, Sudanese, Russian-Ukrainian. We have a growing Latinx population in (our vicinity) and we have a special program that supports Latinx victims of domestic violence. (Eastern Washington FRC)

We serve a very culturally and ethnically diverse population, but we have a strength in providing services to Hispanic/Latinx families and 80% of our staff are bilingual/bicultural representing this population. (I-5 Corridor FRC)

We are seeing a large increase in the number of families identifying as LGBTQ+ populations, the Guatemalan and Mayan dialects are becoming more prevalent, and the extreme hardships of COVID-19 are pushing undocumented families to seek services. (Rural FRC)

Many FRCs (and their funders) focus their efforts on serving low-income families and some grants or contracts require that portions of, or all, families served with those funds must meet low-income eligibility criteria. Though child maltreatment can occur in families across income levels, poverty is a strong predictor of having an open child welfare case³⁸ and is often used as a proxy measure to help target efforts for the prevention of child maltreatment. This mix of funding requirements and sincere intentions to responsibly allocate scarce resources likely contribute to the fact that **FRC respondents estimate that a large proportion (77%) of families served by FRCs live at or below 200% of the federal poverty level.**

The primary counties served by FRCs responding to the survey are concentrated in Western Washington, along the I-5 corridor. The study team cautions against interpreting these data as representative of true FRC availability in the state or drawing conclusions about how well this collection of FRCs serves, or does not serve, the needs of Washington families, as those questions

³⁷ National Family Support Network (NFSN), Standards of Quality.

³⁸ Sedlak et al., "Fourth National Incidence Study of Child Abuse and Neglect."

are beyond the scope of this study. Nevertheless, this summary of location information and other characteristics of FRC respondents is important background information to the overall survey responses and may serve as a useful baseline for ongoing efforts to identify and support FRCs.

Characteristics of Families Served by FRCs








Numbers of people served by age range

Table 3 below shows the median and total number of people served by each FRC in each DCYF region and overall in 2019. The number of organizations responding to this set of questions ranged from 37 to 47. Across all regions, FRCs served a median of 140 children ages 0 to 5, 300 children ages 6 to 17, 400 adults ages 19 to 59, and 90 adults ages 60 and older.

The total number of people served (119,013) is an undercount because not all FRCs responded to this question.

Table 3

FRCs served people of different ages, primarily ages 18 to 59.

DCYF region (# of FRCs)	0 to 5 years old		6 to 17 years old		18 to 59 years old		60+ years old	
	Median	Total	Median	Total	Median	Total	Median	Total
 Region 1 (N=5)	190	8,287	211	3,421	2,089	12,246	200	5,220
 Region 2 (N=4)	210	4,775	330	2,705	493	4,827	3,316	6,631
 Region 3 (N=13)	107	3,867	340	5,710	714	14,309	205	2,641
 Region 4 (N=11)	150	5,005	150	3,353	400	5,989	40	1,353
 Region 5 (N=6)	200	609	200	854	209	629	35	191
 Region 6 (N=24)	100	5,864	300	8,897	225	10,624	32	1,006
 All regions (N=63)	140	28,407	300	24,940	400	48,624	90	17,042

Focus populations and language capacities of FRCs

Figure 4 below (N=60 FRCs) shows the racial/ethnic populations that are a particular strength or focus for FRCs. Nearly three in four FRCs (72%) identified Hispanic or Latinx people as one of their focus populations, with smaller proportions focused on people who are Black or African American (40%), Asian or Asian American (28%), Native Hawaiian and/or other Pacific Islander (28%), African (27%), or Arab/Middle Eastern (17%).

Figure 4

Nearly three in four FRCs served **Hispanic or Latinx people** as one of their focus populations.

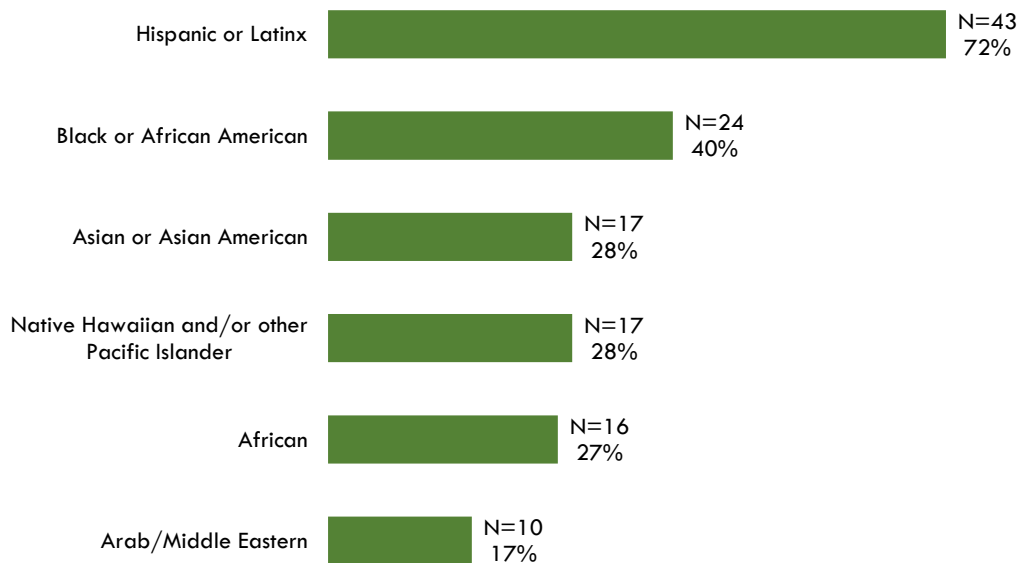
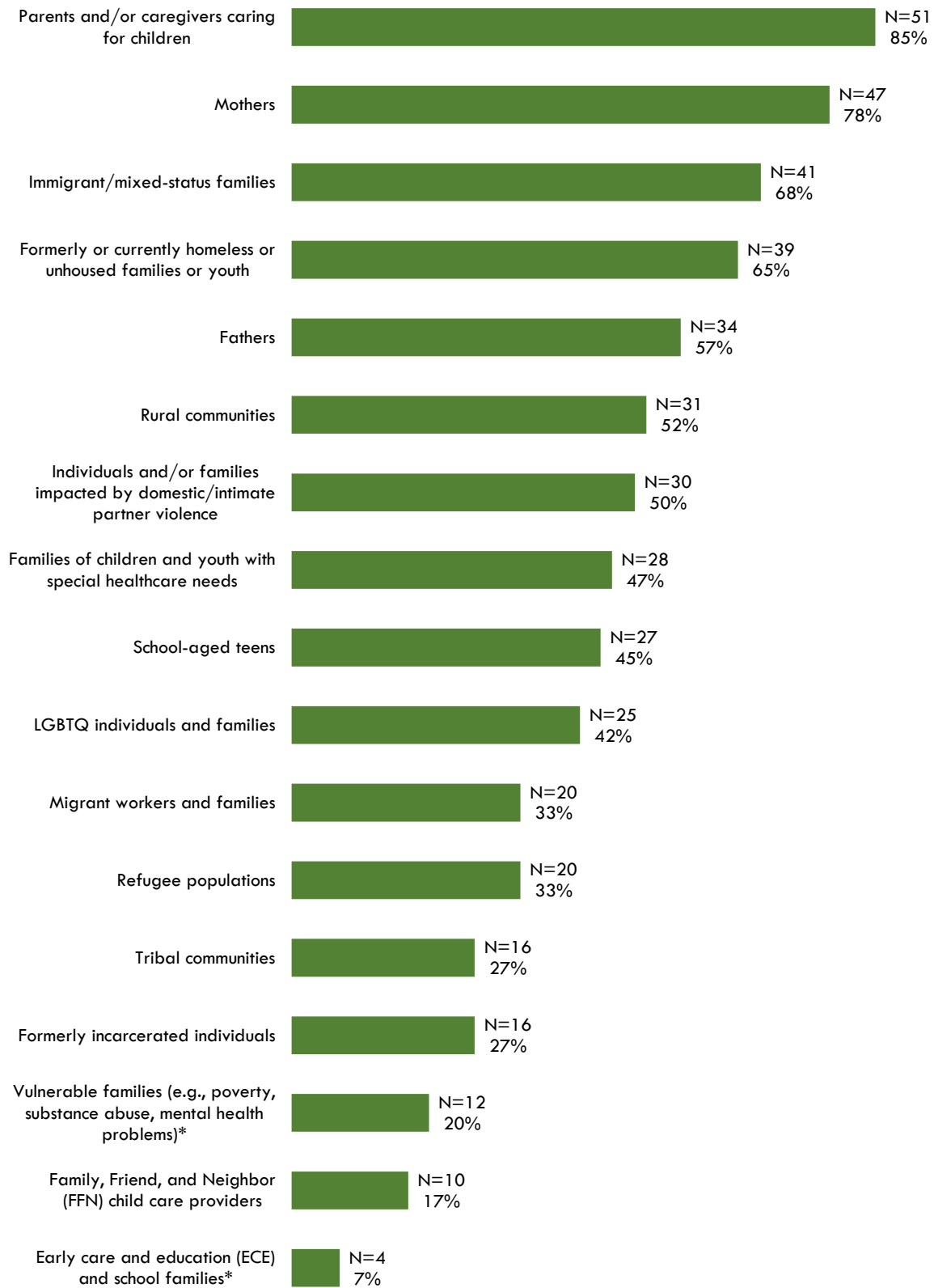


Figure 5 below displays other focus populations for each FRC (N=60). The vast majority of FRCs (N=51, 85%) served parents and/or caregivers caring for children as one of their focus populations. FRCs also focused on mothers (N=47, 78%), immigrant/mixed-status families (N=41, 68%), formerly or currently homeless or unhoused families or youth (N=39, 65%), fathers (N=34, 57%), rural communities (N=31, 52%), and individuals and/or families impacted by domestic/intimate partner violence (N=30, 50%).

Note that several FRCs provided specific details about their focus population through open-ended comments, some of which are represented in Figure 5. These include “vulnerable families (e.g., poverty, substance abuse, mental health problems)” and “early care and education (ECE) and school families.” These two categories are depicted with an asterisk to indicate that they were created from open-ended responses. Given that these two categories were not explicitly assessed in the survey, the percentage of FRCs indicating that they are focus populations is very likely an undercount. Most, if not all, FRCs serve vulnerable families, for example.

Figure 5

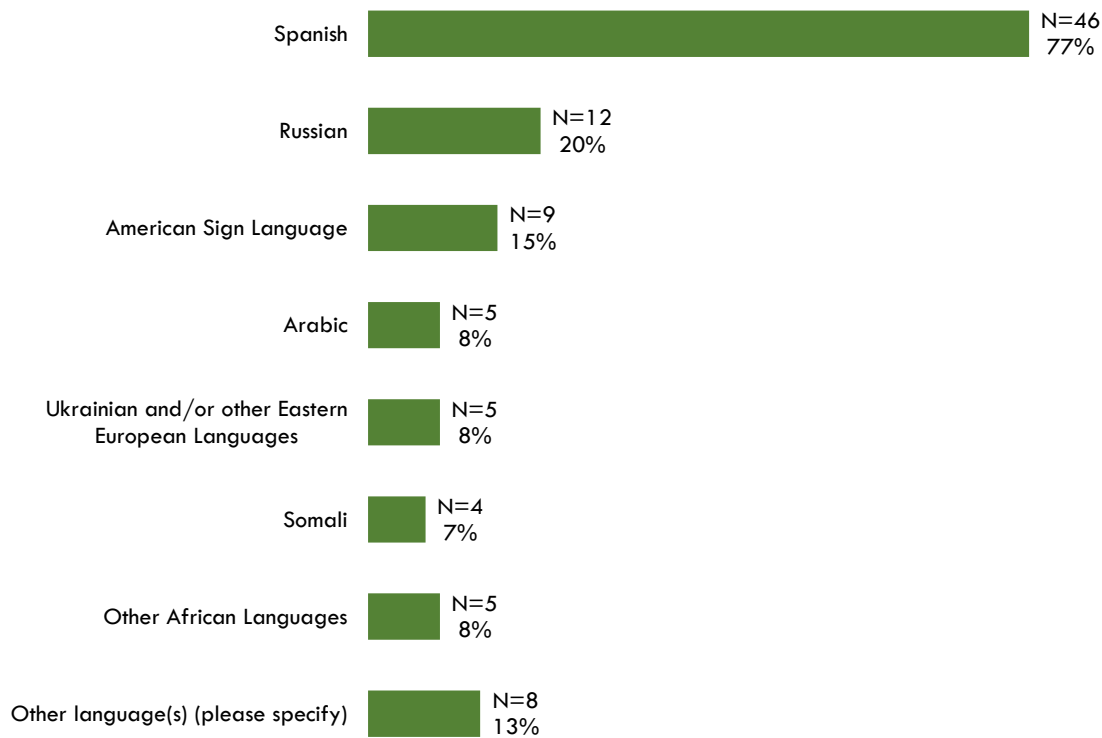
The vast majority of FRCs served **parents and/or caregivers** as one of their focus populations.



Staff language capacity is displayed below in Figure 6 (N=60 FRCs). Over three in four FRCs (N=46, 77%) had the capacity to engage with families in Spanish, while smaller proportions had the capacity to speak Russian (N=12, 20%), American Sign Language (N=9, 15%), Arabic (N=5, 8%), Ukrainian and/or other Eastern European Languages (N=5, 8%), Somali (N=4, 7%), and other African languages (N=5, 8%). Other languages include Amharic, Braille, French, Japanese, Korean, Mandarin and/or Cantonese, nsyilxcən (Salish), Pacific Island languages, Punjabi, and Tagalog.

Figure 6

Over three in four FRCs had the capacity to engage with families in **Spanish**.



As shown in Figure 7 below (N=48 FRCs), nearly half of clients served by FRCs (49%) lived at or below the federal poverty level. For a family of four in Washington State, the poverty level is considered \$26,500. Smaller proportions had incomes between 101% and 200% of the federal poverty level (28%, N=13, defined as between \$26,501 and \$52,000 for a household of four) or greater than 200% of the federal poverty level (16%, N=8, defined as more than \$52,001 for a household of four).

Figure 7

About half of clients served by FRCs live at or below the federal poverty level.

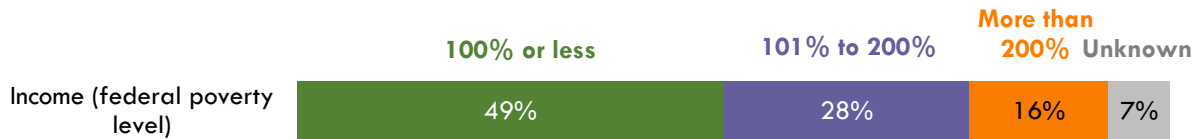




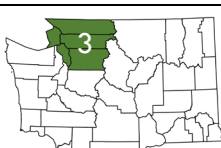


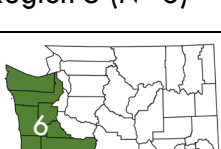
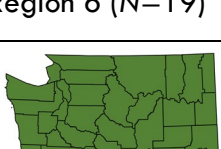
Table 4 below shows responses from 48 FRCs, for families served by respondent FRCs, family income relative to the federal poverty level by DCYF region and overall. With input from DCYF, the study team used poverty-level categories understood to be commonly used by funders and therefore easier for respondents to estimate based on information at hand. However, it is commonly understood that official federal poverty levels are far below what families actually need to meet their basic needs because the income levels for family self-sufficiency vary widely across geographic areas.³⁹ Many state and federal assistance programs recognize this and set eligibility thresholds at higher percentages of the federal poverty level. For example, the Washington State child care subsidy eligibility level is 200% of the federal poverty level.⁴⁰ **While the figure below shows some regional variation, the overall picture is one in which most families served by FRCs—from 71% (N=34) in Region 3 to 86% (N=41) in Region 2—earn under 200% of the federal poverty level.**

³⁹ Pearce, “Self-Sufficiency Standard for Washington State 2020.”

⁴⁰ Washington Department of Children, Youth & Families, “Working Connections Child Care.”

Table 4

In all regions, most families served by FRCs earn under 200% of the federal poverty level.

DCYF region (# of FRCs)	Percentage of poverty level			
	100% or less	101% to 200%	201% or more	Unknown
 Region 1 (N=5)	52%	22%	17%	9%
 Region 2 (N=4)	59%	27%	13%	1%
 Region 3 (N=10)	38%	33%	18%	12%
 Region 4 (N=9)	49%	24%	13%	14%
 Region 5 (N=6)	54%	24%	22%	0%
 Region 6 (N=19)	50%	31%	14%	5%
 All regions (N=53)	49%	28%	16%	7%

Effects of COVID-19 Pandemic on the Number of People Served by FRCs

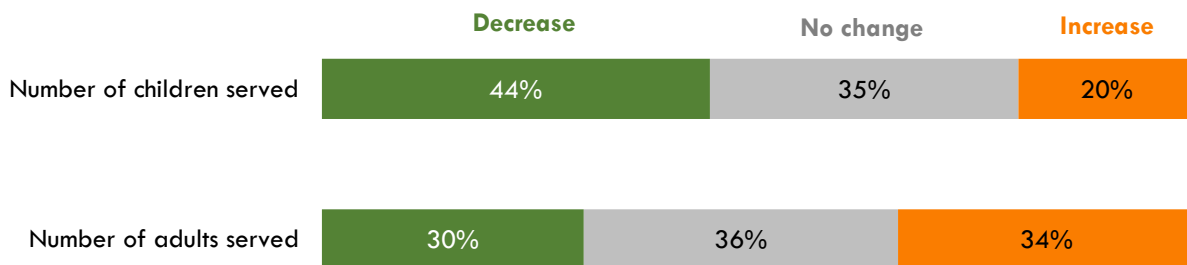


During the COVID-19 safety restrictions in 2020, most (70%) of FRCs increased or maintained the number of adults they served, and just over half (55%) increased or maintained the number of children they served.

Figure 8 below shows responses from 54 FRC respondents for the number of children served and 53 respondents for the number of adults served. Results show that between 2019 and 2020, some FRCs ($N=11$, 20%) increased the number of children served, while many decreased the number of children served ($N=24$, 44%), and about one-third experienced no change ($N=19$, 35%). About one in three FRCs increased the number of adults served ($N=18$, 34%), while a similar proportion ($N=19$, 36%) experienced no change, and a smaller proportion ($N=16$, 30%) decreased the number of adults served.

Figure 8

Between 2019 and 2020, about one in three FRCs increased the number of adults served.



Counties Served by FRC Respondents

Figure 9 below shows the location of each FRC. This is an incomplete picture of which counties have FRC service providers, because some FRCs serve families in neighboring counties as well as their own county. No FRCs reported serving families in Adams, Asotin, Chelan, Douglas, and Pend Oreille counties.

Figure 9

The vast majority of FRC Survey respondents were located in **Western Washington**.

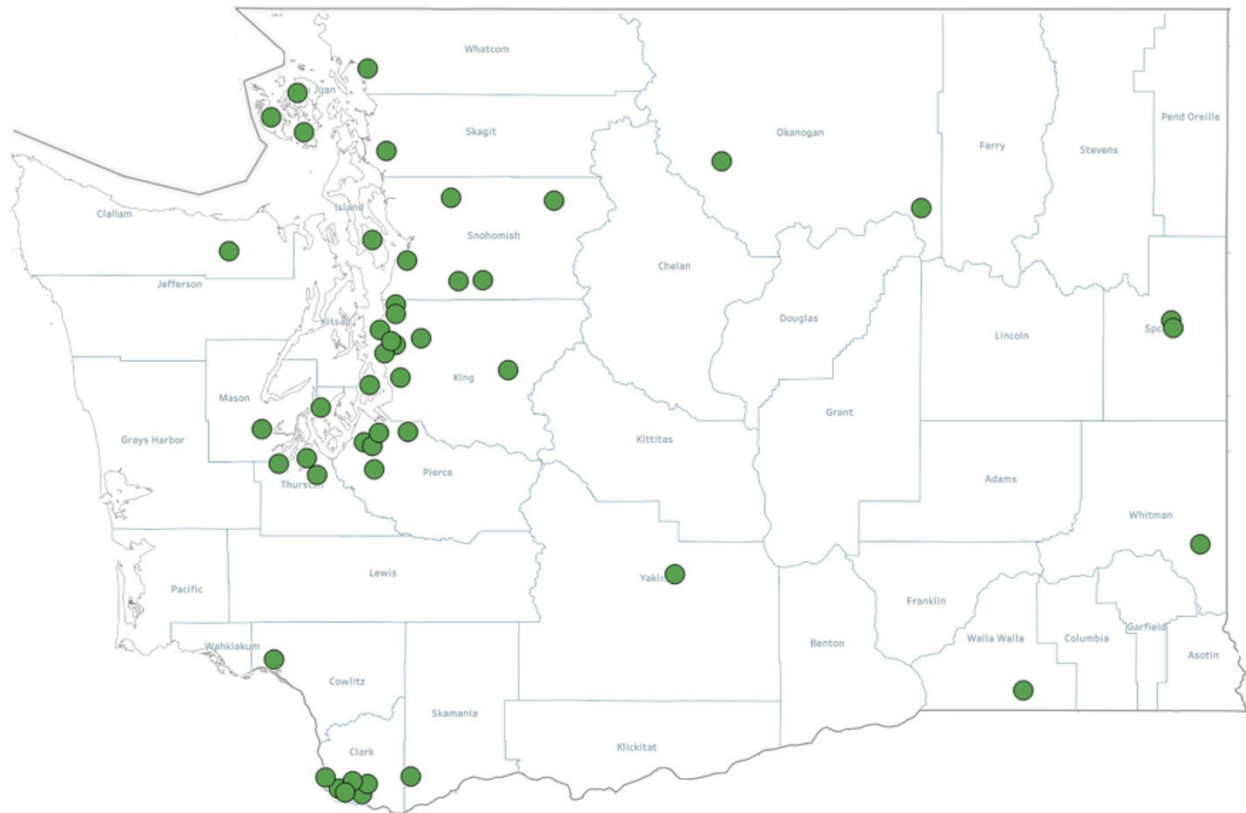


Table 5 below shows the number of FRC respondents serving each county in the state. Counties listed in boldface have FRCs located within the county limits. Most responding FRCs were in Western Washington, concentrated in urban areas along the I-5 corridor, specifically in Clark, King, Pierce, and Snohomish counties. Many of Clark County's FRCs were established through its school districts (primarily Evergreen Public Schools and Vancouver Public School District), which offer FRCs at elementary, middle, and high schools.

Table 5

No FRCs reported serving clients in Adams, Asotin, Chelan, Douglas, and Pend Oreille counties.

All counties served	Number of FRCs	All counties served	Number of FRCs
Adams	0	Lewis	4
Asotin	0	Lincoln	1
Benton	3	Mason	7
Chelan	0	Okanogan	3
Clallam	2	Pacific	1
Clark	18	Pend Oreille	0
Columbia	1	Pierce	12
Cowlitz	2	San Juan	4
Douglas	0	Skagit	3
Ferry	2	Skamania	2
Franklin	1	Snohomish	11
Garfield	1	Spokane	2
Grant	3	Stevens	1
Grays Harbor	4	Thurston	6
Island	3	Wahkiakum	1
Jefferson	1	Walla Walla	3
King	15	Whatcom	2
Kitsap	6	Whitman	2
Kittitas	2	Yakima	2
Klickitat	2		

Illustration: Clark County Districts' Investments in School-Based Family Resource Centers

Two school districts in southwest Washington, Vancouver Public Schools and Evergreen Public Schools, have invested deeply in a Community Schools approach,⁴¹ manifested primarily through establishing and supporting school-based family resource centers that provide health and social service referrals, enrichment activities and family engagement opportunities, and other resources. Vancouver Public Schools initiated a districtwide strategy to build and expand Family-Community Resource Centers (FCRC) in 2008. By 2020, the district was home to 22 FCRCs and had just announced that the district would launch a \$2.4M Full-Service Community Schools project, funded by the Department of Education, with the aim to “bring to scale” community school resources and partnerships throughout the district.⁴² The district’s Office of Assessment and Research has documented numerous positive educational outcomes of the FCRC approach, such as reduced failure rates and improved on-time graduation rates, and the district’s community schools work has garnered significant national recognition and funding. Among the 84 FRCs that responded to the survey, 11 were Vancouver Public Schools FCRCs (seven full FRCs and four near FRCs, according to the self-screener criteria in the survey). Neighboring school district Evergreen Public Schools followed the lead of Vancouver Public Schools and opened its first FCRC in 2013.⁴³ In early 2021, the district’s website listed 16 schools with FCRCs.⁴⁴ Among the 84 FRCs that responded to the survey, 7 were Evergreen Public Schools FCRCs (all 7 responded as full FRCs.) The overall number of FRCs in the state and the geographic concentration of FRC survey respondents reflect the investments of these districts in a school-based FRC approach.

Illustration: FRCs' Roles Serving Child Welfare-Involved Families

Among the 58 FRCs reporting the community partners they work with, a majority ($N=39$, 67%), listed “DCYF Child Welfare” as a community partner, but many fewer list DCYF Child Welfare among their sources of funding. Just five (9%) FRCs listed Child Welfare as a primary source of funding and eight (14%) listed Child Welfare among any of their funding sources. Few FRCs report providing supervised visitation (9 of 62 FRCs, 14%), while about a third report providing differential response services for families screened out of child welfare ($N=21$, 35% of 62 FRCs).

The Family Education and Support Services Regional Resilience Center (FESS) is located in Tumwater, Washington, and primarily serves families from Thurston, Lewis, Mason, and Grays Harbor Counties. Approximately 60% of the 8,500 families served annually by FESS are child welfare system-involved. Parents and caregivers in this group include biological parents, adoptive parents, foster parents, stepparents, and kinship caregivers (such as a grandparent). Kinship caregivers may be either formally designated within the system or those who are informally caring for children).

Recognizing that not every placement is the best placement for the child, FESS sees their role as supporting all safe caregivers in a child’s life to interact with that child in the most positive way possible. FESS’s approach is strengths-based, relationship-based, and relies on trust. To help foster that trust, FESS does not provide services such as parent assessments, supervised visitation, or any other service that would put them in a position where their role is to monitor or evaluate

⁴¹ Partnership for the Future of Learning, *Community Schools Playbook*.

⁴² Vancouver Public Schools, “Family-Community Resource Center 2019-2020 Impact Report”.

⁴³ Tom Vogt, “Family Resource Centers Help Kids in Need,” *The Columbian*, October 21, 2015

⁴⁴ Evergreen Public Schools, “Family & Community Resource Centers”

caregivers. (FESS fulfills all obligations as mandated reporters of child maltreatment and, for families that are "system-involved," communicates with DCYF about participation in parenting education and support activities.)

FESS provides child welfare system-involved families with a range of services including:

- One-on-one and group-based supports from peers with lived experiences as families go through child welfare processes (such as Family Team Decision Making, or termination of parental rights)

- Parenting education classes (often fulfilling a requirement mandated by child welfare or other courts) that follow curricula approved by DCYF (e.g., The Incredible Years, Nurturing Fathers, Moral Reconciliation Therapy, and others)

- Family advocacy and system navigation

- Foster and kinship support, training, and case management

- Supports specifically for families impacted by drugs and alcohol (who are often also involved in the child welfare system), such as (1) Parent Child Assistance Program (PCAP), a home visiting program for pregnant and parenting women with substance use disorders and (2) parenting education classes offered at the sites of community partner in-patient and out-patient substance abuse treatment programs

FESS may connect with parents and caregivers through a direct referral from a child welfare social worker, but more often will connect with families through other means, including referrals from community partners, parents seeking out services from FESS, or even simply a peer volunteer connecting with system-involved parents in the hallways of the courthouse.

Earning parents' trust and overcoming stigma associated with child welfare, substance abuse treatment, mental health treatment, or court- or criminal justice-related systems are two ever-present challenges that FESS staff and volunteers must overcome to connect with and support families and children. Some group programming combines system-involved with non-system-involved families, while other programs bring together families with common system-involved issues (incarceration, in-patient mental health, etc.). Across all programs, FESS strives to communicate that getting support for parenting is something all good parents do and works to build a reputation as a welcoming, strengths-based, community-based family resource center.

Figuring out how to fund what parents need and navigating different funder requirements are additional ongoing challenges for FESS staff and volunteers serving child welfare-involved families. Families move in and out of different stages of "system involvement" which are associated with different expectations for parents, different service needs, and different funding mechanisms. FESS conducts a "very strong" intake process, to determine which supports are most appropriate for a caregiver. It then uses its knowledge of the system, approved evidence-based curricula, and collaboration with child welfare social workers to determine what pathways are available to provide and to fund those services for a family. FESS Executive Director Shelly Willis shared that the "funding from DCYF is really for those navigating through the DCYF child welfare system" which can make it challenging to fund services for parents who need help but are not in the system, such as informal caregivers who have stepped in to care for a child and need support, or families who might be on their way into or out of "system involvement," but aren't formally a part of the system at the time they are seeking support from FESS. Different systems and different funding or reimbursement methods apply, depending on whether the child has an open Child Protective Services (CPS) case, whether the caregiver is a formal or informal kinship caregiver, a foster parent, a custodial or noncustodial parent, and other circumstances. FESS works to center the child and the caregivers surrounding that child, and to connect the family with services and supports in a timely fashion.

ORGANIZATIONAL CAPACITY AND INFRASTRUCTURE

Respondent FRCs ($N=60$) had been in operation from 0 to 114 years. Among the 60 responding organizations, 32% ($N=19$) had been in operation for less than 10 years (including 2 that started in 2020 and 1 that started in 2021). Another 7% ($N=4$) had been operation for 10 to 19 years, 33% ($N=20$) for 20 to 29 years, and 28% ($N=17$) for 30 or more years.

Most (two-thirds) of FRCs reporting budget size had annual budgets of less than \$1 million, though with only 39 respondents sharing budget information and other complicating factors, there are more questions to explore with regard to FRCs and size of budget. Overall, **it seems that a significant proportion of FRCs have very small budgets and operate with a relatively small number of full-time employees.** Very few FRCs (fewer than 10%, $N=6$) count a state government funder among their top three funders, while two-thirds ($N=41$) of FRC respondents list restricted grants and contracts as a top funding source and 61% ($N=38$) report local government as a top funder.

The high percentage of FRCs with such small budgets highlights the limited financial capacity of many FRCs. This can limit innovation, as organizations can be reluctant to try new things that are not certain to add to profit and can limit the ability to build and sustain business systems. Two-thirds ($N=26$, 67%) of the FRCs that shared budget information have a budget of less than \$1M. This is in contrast to 97% of public charities that have a budget of greater than \$1M.⁴⁵

Another aspect of organizational capacity is also an example of partnering with community organizations: Many FRCs report being co-located with another family support organization, such as a school, government agency (e.g., WIC), or a community center, increasing their capacity to offer multiple services to families in one location.

Budget Size

FRC budgets in 2019 are presented in Table 6 below. Because only 39 FRCs responded to this question, results speak for fewer FRCs.⁴⁶ One in three FRCs (33%) reported budgets of \$1,000,000 or more, while 15% had budgets between \$500,000 and \$999,999 and about one in four (26%) had budgets between \$250,000 and \$499,999. Smaller proportions had budgets of \$100,000 to \$249,999 (15%) or less than \$100,000 (10%).

⁴⁵ NCCS Project Team, "The Nonprofit Sector in Brief 2019"

⁴⁶ Many of the FRCs operated through umbrella organizations, such as Evergreen Public Schools and Vancouver Public School District, did not answer this question. It can be challenging for an individual site that is part of an umbrella organization to define its budget.

Table 6






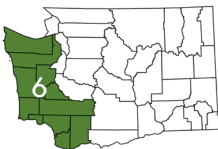
Half of FRCs reporting budget data had budgets of \$500,000 or more in 2019.

Budget in 2019	Number of FRCs	Percent of FRCs
Less than \$100,000	4	10%
\$100,000 to \$249,999	6	15%
\$250,000 to \$499,999	10	26%
\$500,000 to \$999,999	6	15%
\$1,000,000 or more	13	33%
Total	39	100%

Table 7 below presents FRCs' (N=39) reported median budgets in 2019 by DCYF region. Median budgets varied greatly by region, though caution should be used when comparing regions, given that not all FRCs responded to this question and the number of FRCs responding to the survey from some regions is very small. The 4 FRCs in DCYF Region 5 reported the lowest median budget (\$281,000), while the 3 FRCs in DCYF Region 2 reported the highest median budget (\$1,300,000).

Table 7

Median budgets in 2019 varied by DCYF region.

DCYF region	Median budget in 2019	DCYF Region	Median budget in 2019
	\$1,194,000 (N=3)		\$450,000 (N=6)
	\$1,300,000 (N=3)		\$281,000 (N=4)
	\$399,000 (N=11)		\$744,700 (N=12)

Sources of Funding

Table 8 below shows FRCs' (N=62) top three sources of funding and all sources of funding in 2019. For example, 85% (N=53) of FRCs reported that they received restricted grants for programs, and 66% (N=41) of FRCs reported that restricted grants for programs were one of their *top three* funding sources. The top three funding sources were restricted grants for programs (private foundation or corporate support), county/city (local government) funds, and unrestricted funding (fundraising from individuals, corporate, and foundations).

Table 8

The top three funding sources were **restricted grants, county/city funds, and unrestricted funding.**

Funding source	Top three sources of funding		All sources of funding	
	Number of FRCs	Percent of FRCs	Number of FRCs	Percent of FRCs
Restricted grants for programs (private foundation or corporate support)	39	66%	50	85%
County/city (local government) funds	36	61%	41	69%
Unrestricted funding (fundraising from individuals, corporate, foundations)	34	58%	51	86%
WA State Department of Commerce	6	10%	13	22%
WA DCYF Child Welfare	5	8%	8	14%
WA Department of Social and Health Services	3	5%	7	12%
Fees or other earned income	3	5%	11	19%
WA DCYF non-child welfare funding (e.g., Home Visiting Services Account, ECEAP, ESIT)	0	0%	11	19%
Other funding	25	40%	29	47%

Some FRC respondents (N=29) described a variety of “other funding” sources. These include state and federal education funds (e.g., OSPI, Title I Head Start, school districts, state and federal health funds (e.g., Medicaid, Washington Health Care Authority, Department of Health), contracts with partners and social service agencies (e.g., United Way of King County), and other federal funds (e.g., FEMA, HUD, COVID-19 relief funds).

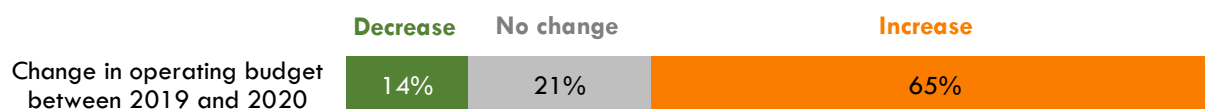
Effect of COVID-19 Relief Funds on FRC Operating Budgets in 2020



Fifty-two FRCs reported how their operating budget was impacted between 2019 and 2020. **About two-thirds (N= 34) of FRCs increased their operating budget (see Figure 10), perhaps due in part to pandemic relief funds.** About one in five (N=11, 21%) experienced no change, while 14% (N=7) experienced a decrease. Thirteen FRCs provided descriptions of budget changes during the pandemic. FRCs received an increase in funds from federal, state, and local governments to adapt programs and increase resources to meet family needs. Similarly, private foundation funds and donations supported the expansion of family support services and resources to reach as many families as possible.

Figure 10

About two in three FRCs **increased their budgets** between 2019 and 2020.



Number of Employees and Volunteers

Figure 11 below shows the number of full-time employees, part-time employees, and volunteers at each FRC in 2019. The number of organizations responding to this set of questions varied (54 responded regarding full-time employees, 45 regarding part-time employees, and 49 regarding volunteers). FRCs varied widely in the size of their staff and volunteer base. **Nearly half of FRCs (N=25, 46%) employed three or fewer full-time employees, and just over half (N=24, 53%) employed three or fewer part-time employees.** One in five FRCs (N=10, 20%) reported having 10 to 19 volunteers, and nearly half of FRCs (N=22, 45%) reported having 20 or more volunteers. (Because engaging parents in roles such as peer support, parent leaders, and advocates is considered a mark of quality among family support programs, many FRC volunteers are likely parents who have at one time been a program participant.)

Figure 11

Nearly half of organizations had **20 or more volunteers** in 2019.

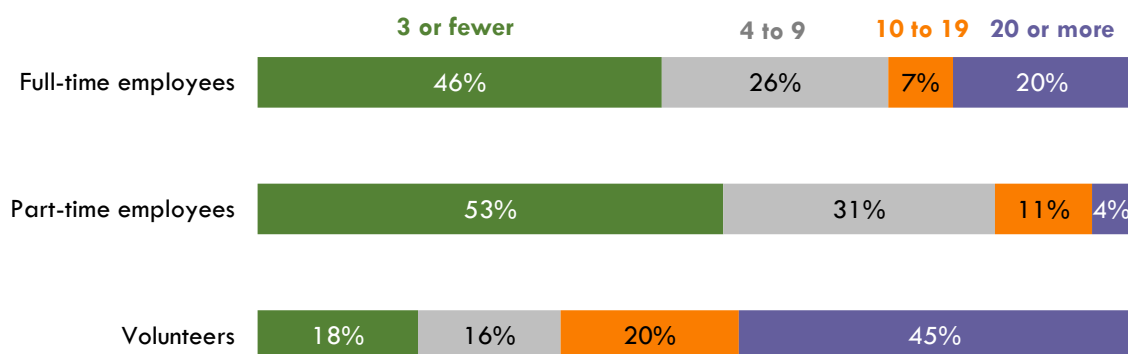


Figure 12 below shows the extent to which FRCs ($N=61$) depend on volunteers during nonpandemic times. About three in five ($N=36$, 59%) reported that they depend on volunteers moderately or heavily, while nearly two in five ($N=23$, 38%) reported that they depend on volunteers slightly. Only 3% did not rely on volunteers at all.

Figure 12

About three in five FRCs **rely on volunteers** moderately or heavily in nonpandemic times.



Co-Location

Three in five organizations ($N=38$, 60%) were co-located with another organization. The types of co-located organizations are presented in Table 9 below ($N=63$). Primary schools, community centers, government agencies, and community-based organizations were the most common locations to host FRCs. (As noted previously, school districts in Clark County have invested in school-based FRCs and represent most of the organizations co-located with a school.)

Table 9

FRCs were most frequently co-located with **primary schools, community centers, government agencies, and community-based organizations.**

Co-location	Number of FRCs	Percent of FRCs
Primary school	15	24%
Community center	13	21%
Government agency (e.g., WIC, out-stationed government worker)	12	19%
Community-based organizations (e.g., colleges, nonprofit organizations, service clubs)	10	16%
Mental health center (e.g., counseling center)	7	11%
Secondary school	6	10%
Faith-based organization	5	8%
Food pantry	4	6%
Health center	4	6%
Early childhood center (e.g., ECEAP, Head Start)	3	5%
Library	2	3%

Community Partnerships

The vast majority of FRCs (90%) reported having six or more community partnerships.

Among the 58 organizations that responded to this question, 10% (N=6) had 1 to 5 partnerships, 47% (N=27) had 6 to 10 partnerships, 36% (N=21) had 11 to 15 partnerships, and 7% (N=4) had 16 or more partnerships. The median number of partnerships was 10 (range was 1 to 17).

Single programs operating independently of each other but sharing clients do not work. We've found that the more of a "team" there is, the better off that client will be. We treat our service partners as teammates, with the focus that the client is at the center of services. While this is a culture shift to truly put the client first, we've seen lasting change, which is really what's important in this work. (I-5 Corridor FRC)

As shown in Table 10 below, the most common community partners are early childhood centers and schools (N=53, 91%), mental health professionals (N=53, 91%), faith communities (N=47, 88%), and the medical community (N=48, 83%). About two-thirds of FRCs (N=39, 67%) reported partnering with DCYF Child Welfare.

Other community partners reported included libraries, elected officials, service clubs, food banks, housing developers, and universities/colleges.

Table 10

The most common community partners are **early childhood centers and schools, mental health professionals, and faith communities.**

Partner	Number of FRCs	Percent of FRCs
Early childhood centers and schools	53	91%
Mental health professionals	53	91%
Faith communities	51	88%
Medical community	48	83%
Private business	43	74%
Law enforcement	43	74%
Domestic violence advocates	43	74%
DCYF Child Welfare	39	67%
Immigrant and refugee community organizations	35	60%
Substance use treatment agencies	31	53%
Policy makers	26	45%
Tribal communities	26	45%
Court system	24	41%
Chamber of Commerce	24	41%
Perinatal services (e.g., doulas)	15	26%
Military	14	24%
Other	8	14%

Effect of COVID-19 Pandemic on FRCs' Ability to Forge New Partnerships



In Figure 13 below, responses from 58 FRCs show that some FRCs ($N=24$, 41%) gained new partners during the pandemic. Some FRCs ($N=18$, 31%) lost some partners and gained some partners, and 26% ($N=15$) experienced no change. In comments, FRCs explained that some partnerships were put on “hold” during the pandemic, while the depth of the relationships with existing partners deepened and some new partnerships formed, particularly with faith-based organizations and providers of basic needs, like diaper banks, food banks, or technology supports.

Figure 13

About two in five FRCs gained new partners during the pandemic.



Use of Family Support Frameworks and Quality Standards

Over the past 20 to 30 years, the family support field has developed guidelines to codify and frame family support practices in order to support program capacity development, monitoring, learning, and evaluation. The FRC Landscape Survey asked respondents about their familiarity with and use of three longstanding widely used guidelines:

*The Family Support Principles*⁴⁷

In 1996, the Family Resource Coalition adopted the *Nine Principles of Family Support Practice* that have formed the foundation of the family support approach. The principles describe a *family support approach* that aims to support and build on families' strengths, rather than focus on “fixing” deficiencies. The principles also describe a responsive, strengths-based, multi-generational, community-based approach that is “based on equality” and affirms and strengthens families' “cultural, racial and linguistic identities.”

*The Strengthening Families Protective Factor Framework*⁴⁸

In 2003, the Center for the Study of Social Policy (CSSP) introduced the *Strengthening Families Approach and Protective Factors Framework*. Drawing upon multiple studies from the field, the Strengthening Families Approach is rooted in interrelated protective factors that have been shown to be related to family strengths and optimal child development across *all* families (not just those with particular risk factors).

*The Standards of Quality for Family Strengthening and Support*⁴⁹

The *Standards of Quality for Family Strengthening and Support (SQFSS)* were first developed by the California Network of Family Support in 2012 and later adopted and refined by the National Family Support Network with the most recent version published in February 2021. The SQFSS are a framework and associated tools for family support stakeholders to use for planning,

⁴⁷ Langford and CSSP, “Role of Family Support.”

⁴⁸ Center for the Study of Social Policy, “Protective Factors Framework.”

⁴⁹ National Family Support Network, “Standards of Quality”

providing, and assessing quality family support services. (See Appendix E for a summary of each of these guidelines.)

Use of one or more of these guidelines is a marker of quality. The guidelines can also serve as cornerstones to identify and provide collective supports for FRCs.

Figure 14 below shows FRCs' (N=62) use of Family Support Principles, the Strengthening Families Protective Factors Framework, and Standards of Quality for Family Strengthening and Support. **Nearly two in three FRCs (N=39, 64%) reported that they were familiar with and used Family Support Principles**, and a slightly smaller percentage (N=37, 60%) were familiar with and used the Strengthening Families Protective Factors Framework. About two in five (N=24, 39%) were familiar with and used Standards of Quality for Family Strengthening and Support.

Figure 14

Nearly two in three FRCs are familiar with and use Family Support Principles.

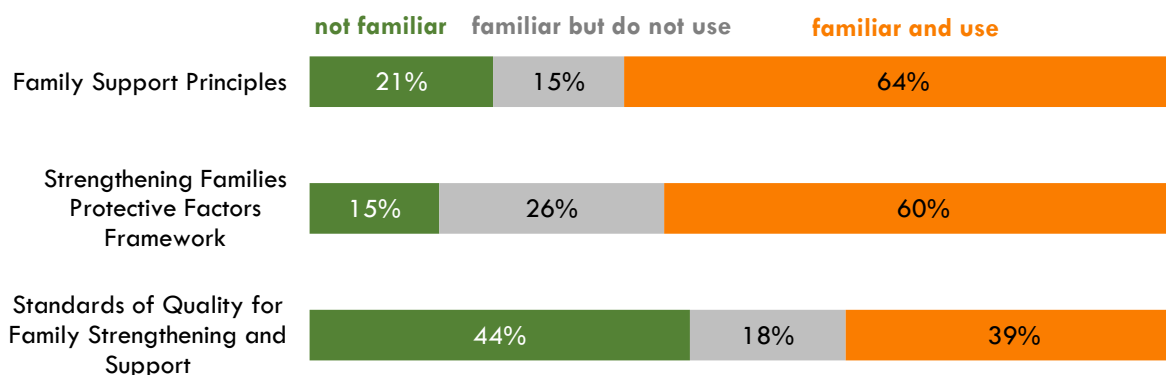
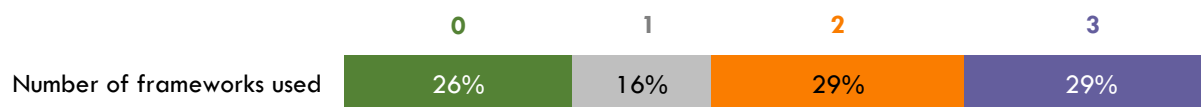


Figure 15 below shows the number of frameworks (listed in Figure 14) that are used by each FRC (N=62). About three in ten FRCs (N=18, 29%) used all three frameworks, 29% (N=18) used two, 16% (N=10) used one, and 26% (N=16) used none.

Figure 15

About three in ten FRCs used all three frameworks – Family Support Principles, SFPF, and SQFSS – and a similar proportion used none of the three frameworks.



Data Collection for Monitoring, Learning, and Evaluation

Collecting, summarizing, and analyzing data about program participation, program quality, and program outcomes is a marker of quality for family support programs. Communication about, learning from, and applying the lessons of those evaluation practices are markers of high quality.⁵⁰ However, FRCs are frequently small organizations, with limited staff and budgets, managing an array of data collection expectations from funders and stakeholders. Furthermore, **the flexible and decentralized nature of FRCs allows them to be responsive to unique families**

⁵⁰ National Family Support Network (NFSN), *Standards of Quality Workbook*.

and unique communities, but also complicates efforts to collect, manage, and understand data across their different services and across different FRCs. Most FRCs collect data on program service utilization but only about half engage in near-term outcome evaluation. FRCs use a variety of methods to collect and manage data and many (43%) use one or more databases specific to a particular program or funder.

Nineteen respondents responded to an open-ended invitation to describe any challenges they faced with regard to tracking and analyzing data. Respondents described challenges in collecting data, such as limited staff capacity for data collection, challenging settings for data collection (such as walk-ins and community events), difficulties in devising and implementing systems to collect unduplicated data, and families' reluctance to share personal information. A second challenge described by several respondents was finding a data system to meet the organization's needs, in some cases complicated by being part of an umbrella organization with data systems or data requirements that did not align with the FRC's practices and needs. Funders' requirements also seem to create challenges for organizations, such as duplicative data entry and data that does not help inform overall program planning and design. FRCs with multiple centers described challenges tracking data across locations. One FRC described a system-level evaluation challenge citing, for example, their desire to understand how their efforts to provide home visits to 130 pregnant and new parents relates to the total number of families receiving home visits in the county and to the total number of births in the county.

“(If I could decide how to spend funds to support FRCs) I would create a common data system and common resource database that could be shared across the state with all FRCs.” (Eastern Washington FRC)

“...(I)t is critical that individual sites at schools can have the flexibility to look different depending on the needs of their community. Holding everyone to specific outputs can be difficult and cause extra stress.” (School-Based FRC)

Incredibly busy day-to-day demands of client needs and walk-in visits/calls make it difficult to document with completeness. Funder reporting requirements and board requests help administrative staff pause and take the time to analyze data. (Rural FRC)

More and more funding sources (especially if they are tied to specific programs or services) require lots of data collection - given our agency's small size, the amount of time spent on data collection, input etc. can significantly reduce . . . face-to-face time with clients, which remains our organization's priority. (Rural FRC)

It is sometimes difficult to pull the data from the data base in a way that gets the information that we are seeking. Case Management data base is quite expensive. Some funders require data entry into a specific database which creates duplicative data entry. (I-5 Corridor FRC)

As shown in Table 11 below among 58 FRCs responding to this question, the vast majority of FRCs ($N=54$, 93%) collect information on program service utilization, and most collect family or household-level data ($N=44$, 81%), satisfaction surveys ($N=42$, 74%), and donor information ($N=41$, 71%). About three in five ($N=35$, 62%) reported conducting a community needs assessment, and half ($N=29$, 50%) reported conducting a near-term outcome evaluation.

Additional analysis shows that about one in three FRCs ($N=18$, 31%) collected one to three types of information, 43% ($N=25$) collected four or five types of information, and 26% (15) collected six types of information.

Table 11

Most FRCs collect data on program service utilization.

Types of information collected	Number of FRCs	Percent of FRCs
Program service utilization	54	93%
Family or household-level data	47	81%
Satisfaction surveys	43	74%
Donor information	41	71%
Community needs assessment	36	62%
Near-term outcome evaluation	29	50%
Other	3	5%

Table 12 below shows the various methods FRCs ($N=58$) use to solicit and incorporate feedback. The most common methods are client satisfaction surveys ($N=42$, 72%) and parent/caregiver advisory groups ($N=36$, 62%). Smaller proportions of FRCs utilize a community advisory board ($N=21$, 36%), a suggestion box ($N=15$, 26%), parent/caregiver representative(s) on the board of directors ($N=15$, 26%), or a youth advisory board ($N=9$, 16%). Other methods to solicit and incorporate feedback (reported by 12%, $N=7$, of FRCs) include ongoing informal feedback and input from families.

Additional analysis shows that two FRCs (3%) reported that they had no methods to solicit and incorporate feedback. Nearly half ($N=27$, 47%) had one or two methods, and half ($N=29$, 50%) had three to five methods.

Table 12

FRCs employ a variety of methods to solicit and incorporate feedback.

Methods to solicit and incorporate feedback	Number of FRCs	Percent of FRCs
Client satisfaction survey	42	72%
Parent/caregiver advisory group	36	62%
Community advisory board	21	36%
Suggestion box	15	26%
Parent/caregiver representative(s) on Board of Directors	15	26%
Youth advisory board	9	16%
Other	7	12%

As shown in Table 13 below FRCs (N=58) most common methods for collecting data were electronic spreadsheets (N=45, 78%) and paper forms (N=41, 71%). **About three in five FRCs (N=36, 62%) had a dedicated database unique to their organization, and 43% (N=25) had one or more databases specific to a particular program or funder.** Three FRCs mentioned a particular software to track donor information. These were Charity Tracker, Compass 360, and Salesforce.

Additional analysis shows that nearly half of FRCs (N=28, 48%) reported using one or two types of data tracking, 31% (N=18) reported using three types and 21% (N=21) reported using four or five types.

Table 13

Two out of five FRCs use **databases specific to a particular program or funder.**

Data tracking	Number of FRCs	Percent of FRCs
Electronic spreadsheet (e.g., Excel, Google Sheets)	45	78%
Paper forms	41	71%
Dedicated database unique to organization (e.g., Access, Efforts to Outcomes)	36	62%
One or more databases specific to a particular program or funder (e.g., VisitTracker, Efforts to Outcomes, NowPow)	25	43%
Data analytics software (e.g., Power BI, Tableau, Sigma)	5	9%

In Table 14 below responses from 58 FRCs show that nearly all FRCs (N=55, 95%) report using their data for program monitoring and improvement, and nearly as many (N=52, 90%) report using their data to fulfill funder requirements. About four in five FRCs (N=46, 79%) use their data to communicate with clients, volunteers, and the community. Other uses of data (reported by 7%, N=4, of FRCs) include informing decision-making and grant writing.

Additional analysis shows that four FRCs (7%) used data for only one purpose and 21% (N=12) used data for two purposes. Two in three (N=39, 67%) used data for three purposes, and 5% (N=3) used data for four purposes.

Table 14

Almost all FRCs use their data for **program monitoring and improvement.**

Data use	Number of FRCs	Percent of FRCs
Program monitoring and improvement (e.g., continuous quality improvement)	55	95%
Fulfilling funder requirements	52	90%
Communicating with clients, volunteers, and the community	46	79%
Other	4	7%

In Table 15 below, responses from 58 FRCs show that about three in four FRCs assess changes in children ($N=43$, 74%) and changes in parents ($N=42$, 72%). Less than half ($N=27$, 47%) assess changes in life skills, and about two in five ($N=24$, 41%) assess changes in agency partnerships. One in three ($N=19$, 33%) assess changes in community awareness.

Additional analysis shows that five FRCs ($N=5$, 9%) reported that they did not assess any outcomes. About three in ten ($N=17$, 29%) assessed one to two outcomes, 40% ($N=23$) assessed three outcomes, and 22% ($N=13$) assessed four to six outcomes.

Table 15

About three in four FRCs assess changes in children and changes in parents.

Outcome measures	Number of FRCs	Percent of FRCs
Changes in children (e.g., social-emotional development; school readiness)	43	74%
Changes in parents (e.g., parenting skills and knowledge, social connection, other protective factors)	42	72%
Changes in life skills (e.g., computer skills, language skills, job skills)	27	47%
Changes in agency partnerships	24	41%
Changes in community awareness (e.g., hate crime incidents, social justice)	19	33%
Other	2	3%

OPPORTUNITIES TO SUPPORT AND STRENGTHEN FRCs: PRIORITIES, CHALLENGES, AND DREAMS⁵¹

FRCs' responses to open-ended questions about their top strategic priorities or proactive organizational goals (N=48 FRCs), current challenges or concerns (N=50 FRCs), and recommendations to an imaginary FRC funding committee (N=46 FRCs) together reflect a set of core themes. These themes can inform efforts to support and strengthen FRCs and augment statewide systems and structures to support all families, mitigate the impacts of poverty, and prevent child maltreatment. These core themes suggest that from the respondents' perspective, FRCs in Washington can be strengthened through:

Funding and other supports to provide more services and serve more families

Funding and other supports to build organizational and staff capacity, such as providing professional development, paying a living wage, and addressing or preventing burnout

Flexible, sustainable funding across the diversity of FRC needs and capacities

Supports for family engagement ranging from forming connections with isolated families to engaging families as partners and leaders

Supports for diversity, equity, and inclusion and antiracism, such as building organizational capacity and connecting with culturally diverse community members

Investing in collective efforts, systems, and other shared resources across FRCs to increase collaborations among community and state partnerships and reduce duplication of services

I would like to note the importance that (having) successful programs/services does not mean that we are funded adequately. There have been times when it feels like we have not received funding because we are seen as "already successful" and organizations with specific improvements (needed) are awarded instead. Particularly when it comes to capacity building funding organizations can be at very different stages of capacity building and growth, and those stages of development shouldn't be the focus and compared to each other when making funding decisions. (I-5 Corridor FRC)

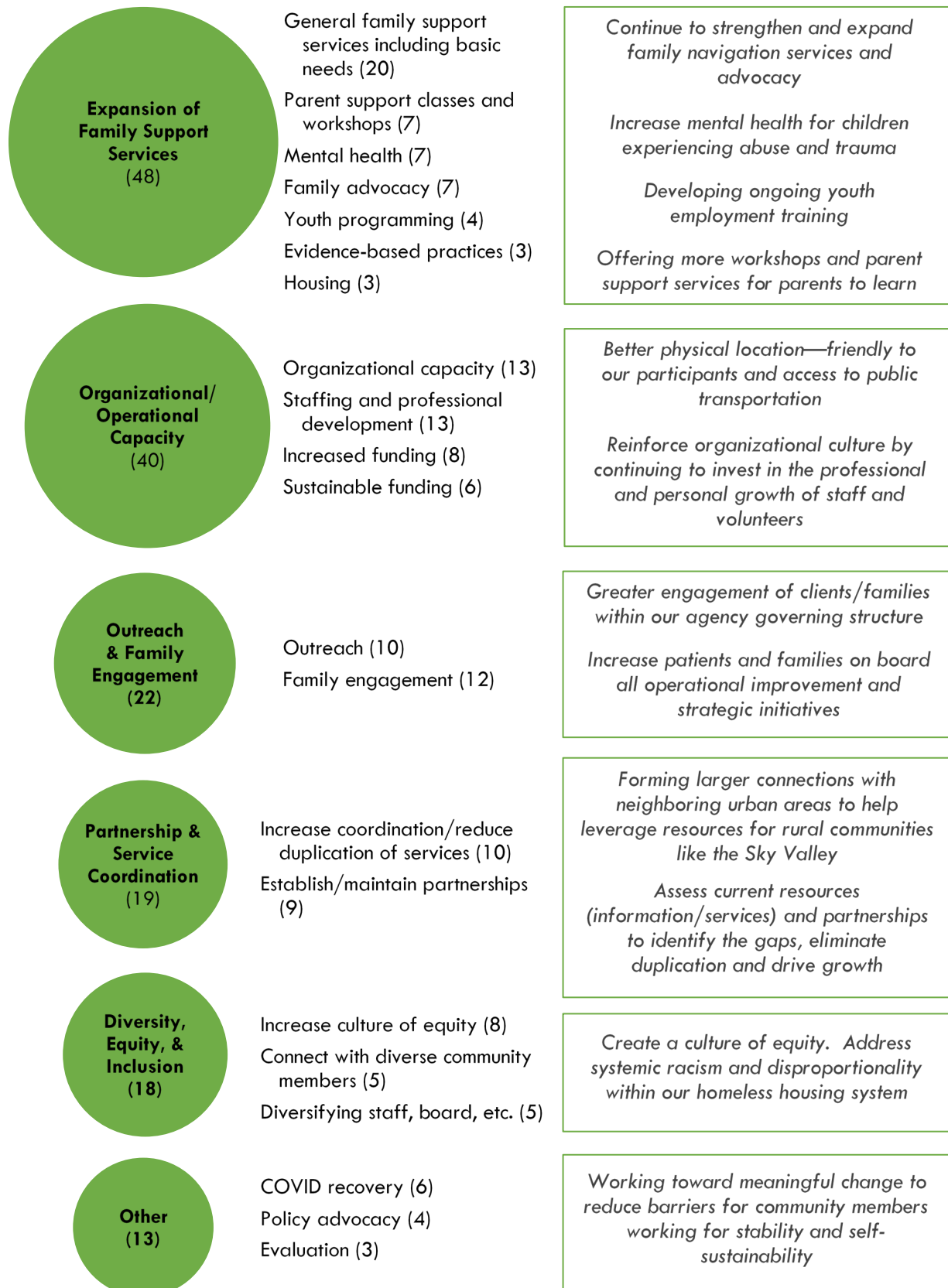
Strategic Priorities and Proactive Organizational Goals

Asked to name up to three strategic priorities and/or proactive organizational goals, 48 FRCs entered at least one response. Figure 16 below lists the major themes and sub-categories of those responses. The priorities identified by most respondents related to expansion of family support services; operational and organizational capacity (e.g., staff salaries, work force development). Many respondents named priorities related to outreach and family engagement, partnership and service coordination, and diversity, equity, and inclusion. A few respondents named priorities associated with COVID-19 recovery, policy advocacy, and evaluation.

⁵¹ Analysis note: Most of the data summarized in this section were collected through open-ended questions, the primary purpose of which was to reflect the subjective perspectives of the respondents and generate a list of themes or ideas that FRC respondents may hold. The team has included the numbers of responses associated with a particular theme for contextual information, but these data do not lend themselves to a frequency analysis (e.g., percentages of respondents).

Figure 16

FRCs most frequently reported strategic priorities related to offering more services to more families.

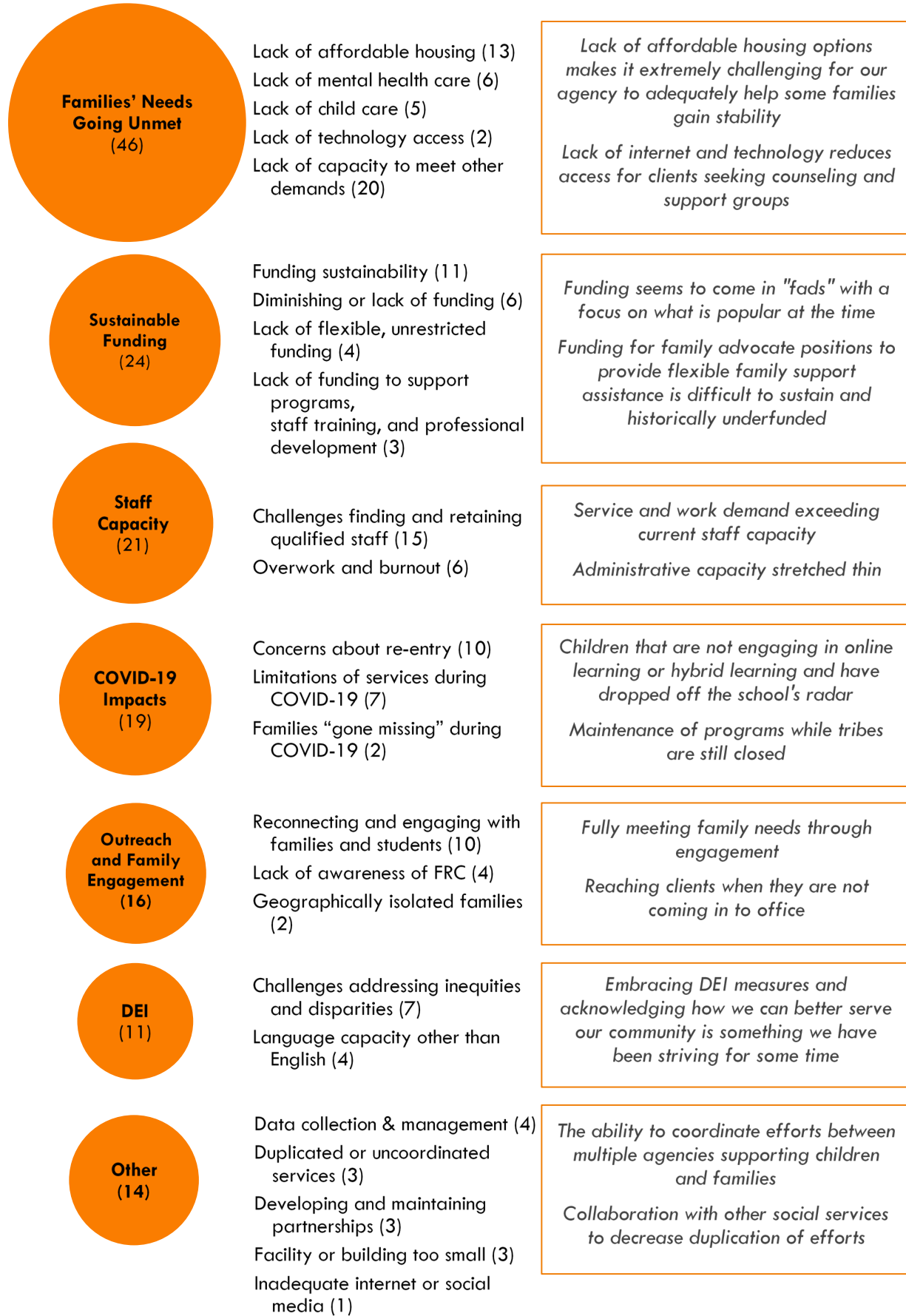


Challenges and Concerns

Asked to list up to three challenges or concerns currently facing FRCs, 50 respondents named at least one challenge or concern. Figure 17 below lists the major themes and describes the subcategories of those responses. Nearly all respondents named concerns about failing to meet families' needs as a top challenge or concern. Many respondents listed a lack of flexibility and lack of unrestricted funding (which make it difficult for FRCs to meet the needs of families), challenges with hiring and retaining staff, and pandemic-related limitations on FRCs' capacity to connect with families. Additional challenges listed related to reconnecting and engaging with families and students, and addressing diversity, equity, and inclusion (especially after the pandemic reinforced and exacerbated systemic racial and ethnic disparities). In addition, some challenges mirrored FRCs' named priorities associated with infrastructure (facilities too small, inadequate internet, or inadequate social media); evaluation (lack of ability to track, collect impact outcomes across different households); and challenges with partnership and collaboration (such as difficulties collaborating and coordinating or frustrating duplication of efforts).

Figure 17

FRCs most frequently reported challenge or concern is **families' needs going unmet.**



Dream Scenario: How Would Respondents Spend Funds for FRCs?


An open-ended question on the survey asked respondents to imagine being part of a committee charged with deciding how to use a large amount of funds to support and strengthen FRCs (see Figure 18, N=46 FRCs). Their responses fell into four categories: More services and more FRCs, general operating funds, systems and shared resources across FRCs, and flexible funding.

Figure 18

In a dream scenario, many FRCs would recommend investing in expanding prevention services and general operating costs of FRCs.

More services and more FRCs

Fund more family support services focused on prevention and family strengthening (33)




- Concrete supports**, like cash supports, diapers, food support, bus passes, gas cards, etc. (11)
- Family supports**, like mental health care, substance abuse treatment, parent coaching, etc. (10)
- Family advocacy**, or case management, family navigation, one-on-one family supports (9)
- Child care**, like child care subsidies, and after-hours and crisis care (5)

Respondents recommend spending money on:

- ...essential needs, diaper banks, food distribution efforts, transportation needs-bus passes and gas cards.
- ...counselors, mental health professionals to support families.
- ...case management and one-on-one supports.
- ...a LOT more funding for childcare - both for families to use on childcare, and also to build local childcare capacity.
- ...expand(ing) FRC services in (our) county and other small communities in (nearby) counties. We think there is a need for more community-based family support centers like the one we currently have.
- ...PREVENTION, PREVENTION, PREVENTION

General operating funds

Provide general operating funds to spend on both hard and soft infrastructure (32)



- Physical infrastructure** (accommodate more services/more families, storage space, equipment) (11)
- Hiring and retaining **qualified staff** (9)
- Workforce** training and professional development (7)
- Staff time to focus on **community partnerships and service coordination** (3)

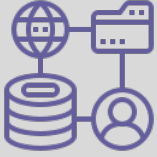
Respondents recommend spending money on:

- ...a core funding stream to keep the lights on (and) that allows us to leverage other funds.
- ...bigger spaces for all FRCs to accommodate families.
- ...funding to meet the greatest needs we have identified (which may be areas which we find difficult funding in traditional ways, such as our DEI effort, or staff retention).
- ...most grants we receive cover 1/3 to 1/2 of staff salaries, so support to assure living wages is crucial.

...(the) *TIME* and *EXPERTISE* of an employee to build trust between organizations, coordinate data-sharing, and make referrals ...a Site Coordinator for the Resource Center to facilitate, add more partners, connect with families (facilitate a family leadership group), build excitement and coordinate programming across organizations to meet the needs of families.

Systems and shared resources for FRCs

Invest in shared resources for FRCs (23)



- Equitable, participatory **systems to fund FRCs** that meet local needs (10)
- Shared data systems** for intake, monitoring, tracking referrals, etc. (6)
- Building and strengthening **networks, partnerships, and collaborations** (5)

Respondents recommend spending money on:

- ... *opportunities for visitations of current FRCs to allow coordinators to learn from each other to help develop future plans. service provider partnerships to be on site.*
- ...*a common data system and common resource database that could be shared across the state with all FRCs.*
- ...*strengthening the networks and partnerships between FRC's and DSHS, mental health, childcare programs, etc.*
- ...*support(ing) the work of different family centers via a participatory budgeting process.*
- ...*(systems for funding decisions because) it is not enough to just base funding on population size because in the more rural settings, you have to do more with very limited resources and cannot refer families to other entities.*
- ...*to look at funding decisions from an organizational, team, and individual needs, looking at ability to fund collaborations, not just single entities.*

Flexible funding

Provide funding that allows FRCs flexibility to make decisions about whom they serve (20)



- Flexible and equitable funds** (13)
- Unrestricted criteria for hiring** of family advocates (6)
- Unrestricted funding to **a specific region** (1)

Respondents recommend spending money on:

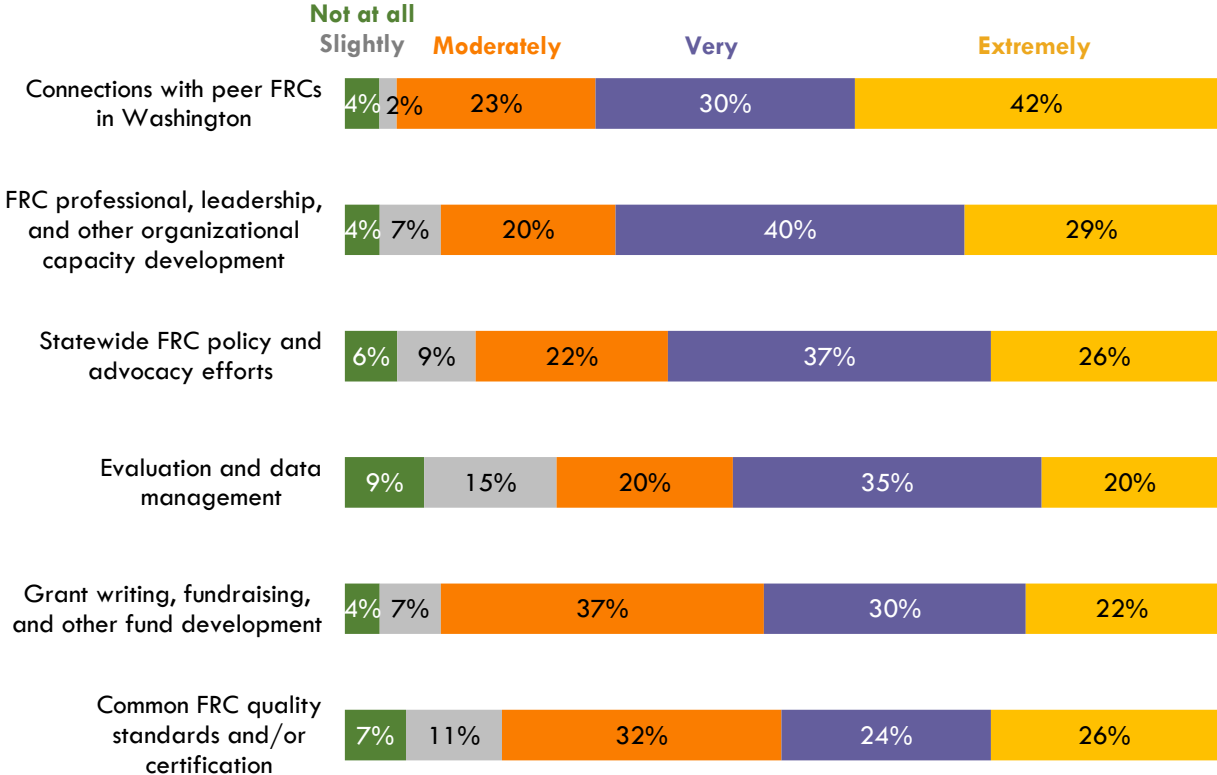
- ...*(flexible funding because) each community is so different, and each FRC can provide different services to meet their community's needs. Restricting support to certain issues or demographics wouldn't appropriately serve each community in the way they need it. Trust the FRCs know their communities best and can reach those most vulnerable.*
- ...*(flexible funding because) any of our current funding sources in these areas (especially county and state funding) have too many restrictions, requirements, etc. that get in the way of helping clients in distress in the ways that they want and need support and assistance, and that respects their own judgement, strengths, and insights.*
- ...*(flexible funding because) most funders have specific criteria for who can be served with the funds. Family Advocates need to have the flexibility to support ANY family walking in the door with ANY kind of need. [Family advocate funds] have specific criteria such as must be a survivor of DV, must be literally homeless etc. ALL families need help at times. Increasing capacity to provide dedicated family advocate services with the only criteria being that they are part of a family will dramatically increase access to services and the speed at which families are served.*

Interest in Collective Efforts and Centralized Supports

As described above, a statewide FRC work group convened by the Children’s Home Society of Washington has been meeting for over a year to advocate for legislation establishing a common definition and a core set of principles for FRCs, as well as to explore opportunities for other collective supports for FRCs, like a statewide FRC network.

Figure 19 below shows the percentage of FRCs interested in centralized support related to the various elements of running an FRC. The number of organizations responding to this set of questions ranged from 37 to 47. **Interest was relatively high for each of the six elements with 50% or more of respondents describing themselves as “very” or “extremely” interested in all of the elements.** Respondents were most interested in making connections with peer FRCs in Washington (72% very or extremely interested) and professional, leadership, and other organizational capacity development (69% very or extremely interested). Respondents were also interested in statewide FRC policy and advocacy efforts (63% very or extremely interested).

Figure 19
Most FRCs are interested in connecting with peer FRCs in Washington.



CONCLUSIONS

The responses to this landscape study and related FRC stakeholder efforts in the state show that **there is a lot of energy and interest related to the FRC approach in Washington in 2021**. There are some promising funding opportunities to potentially capitalize on that interest, including the federal Family First Prevention Act⁵² and American Rescue Plan,⁵³ and recent investments in family supports by the Washington Legislature. The results of this landscape study show that FRCs are playing an important role in communities around the state, building and maintaining relationships with families and connecting them to supportive programs and resources. During the COVID-19 pandemic in 2020, FRCs built on some of their key strengths, particularly their relationships with families and community partners, and adapted their approaches to get needed concrete, informational, and emotional supports to families at a critical time. At the same time, FRCs are grappling with organizational challenges like constrained funding and difficulty supporting and retaining staff. They are also operating in a context marked by systemic racial inequity, economic disparities, and increased rates of substance abuse and mental health struggles, all complicated by the COVID-19 pandemic and the associated economic and interpersonal dislocation.

This study produced a list (in Appendix D) of 84 FRCs and near FRCs and an additional list (provided to DCYF) with 109 possible FRCs. These lists, and the associated contact information, are important building blocks to the ongoing work of DCYF, the FRC Workgroup hosted by the Children's Home Society of Washington, the existing regional FRC networks, and other FRC stakeholders. The decisions and processes of those groups—and of FRCs and potential FRCs themselves—will address, for example, what specifically to fund, which organizations to fund, what data to collect and how to manage and use it, what quality measures to use, and what common approaches to embrace. Over time, this will help clarify how many Washington FRCs there are and what exactly being an FRC in Washington means in terms of services, approach, and quality.

A process to assess needs for, and community desires for, FRCs is among possible next steps for stakeholders. Such an assessment could consider concentrations of child abuse and neglect reports, poverty, or other proxies for community need, but should, above all, recognize that FRCs are one strategy to connect with and engage families among a range of strategies. Communities themselves (however “community” is defined in different contexts) are often best situated to determine which options within that range of strategies are suited to the local context.

An important challenge for any next steps will be to center the FRCs and the families they serve, especially in funding and decision-making contexts in which the needs of government and other funders can too easily dominate. The needed flexibility to respond to unique and evolving family and community contexts often conflicts with larger systems' needs to, for example, meet very specific funding goals or produce particular data summaries. **Stakeholders with different points of view and experiences within the FRC ecosystem will need to communicate and collaborate to balance flexibility and responsiveness with accountability, quality, learning, and evaluation.** Models from other states, such as Colorado, can be helpful in informing Washington FRC systems-building efforts to achieve a productive balance. The perspectives of FRCs reflected in this study will ideally provide productive starting places for those conversations and collaborations.

⁵² The Children's Defense Fund, “Family First Prevention Services Act.”

⁵³ U.S. Department of the Treasury, “FACT Sheet: The AMERICAN Rescue Plan Will Deliver Immediate Economic Relief to Families.”

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APPENDIX A: FRC LANDSCAPE STUDY QUESTIONS IDENTIFIED BY DCYF

The Contractor will design, implement, and report on the Family Resource Center landscape study that will answer a number of questions related to the status of FRCs in Washington. Understanding that what FRCs have traditionally offered may have and may continue to shift during the worldwide pandemic of COVID-19, the Contractor should assess how FRCs have traditionally offered services and what approaches are being used during the pandemic and how FRCs are looking ahead to activities in the future. To the extent possible, the landscape study will answer at least the following questions:

- (1) How many FRCs are operating in Washington?
- (2) What services, supports, resources and activities are offered through FRCs?
- (3) What kinds of fund sources are utilized to support activities of FRCs?
- (4) What approaches to staffing and administration have FRCs utilized over time?
- (5) What aspects of the Standards of Quality are being implemented, formally, or informally?
- (6) What are the successes and challenges for FRCs?
- (7) What are ongoing needs and sustainability strategies identified by FRCs?
- (8) How does FRCs see themselves as a part of their communities and statewide efforts to support strengthening families and avoiding child abuse and neglect?
- (9) Who are the target populations being served by the FRCs (age focus, geographic, cultural, other unique attribute)?
- (10) To what extent does the FRC work with other community partners, including DCYF Child Welfare and are there specific strategies for serving Child Welfare-involved families?
- (11) What types of FRC offerings are provided in a setting (brick and mortar) vs supported in-home, community partner settings, grants or other approaches?
- (12) What kinds of data and data management approaches are used to document and measure work, outcomes, successes of the various approaches of FRCs?

APPENDIX B: ARTICULATIONS OF THE DEFINITION OF AN FRC

Source	Definition
WA State Senate Bill Report HB 1237 (Passed March 2021) ⁵⁴	<p>A unified single point of entry where families, individuals, children, and youth in communities can obtain information, an assessment of needs, referral to, or direct delivery of family services in a welcoming and strength-based manner. An FRC is designed to meet the needs, cultures, and interests of the communities the FRC serves.</p> <p>Family services may be delivered directly to a family at the FRC by the FRC staff or by providers who contract with or have provider agreements with the FRC.</p> <p>Each FRC must have one or more family advocate who screens and assesses a family’s needs and strengths.</p>
National Family Support Network ⁵⁵	<p>A community or school-based welcoming hub of support, services, and opportunities for families that:</p> <ul style="list-style-type: none"> Utilizes an approach that is multi-generational, strengths-based, and family-centered Reflects and is responsive to community needs and interests Provides support at no or low cost for participants Builds communities of peer support for families to develop social connections that reduce isolation and stress
Defining Characteristics for the FRC Landscape Study	<p>Place-based - unified point of entry; welcoming and strengths-based; drop-in to use a printer or ask for information; a place for conversations or hanging out</p> <p>Information, resources, and referrals - families coming through the door have access to pamphlets describing community resources; offer concrete supports such as food pantries and diaper closets; link families to services in the community</p> <p>Family advocate(s) - perform screening, needs and strengths assessment; goal-setting if requested by the family</p> <p>Direct family support service - offered by staff or contracted partners includes parent/caregiver education and support programs, life skills advocacy, formal services for children and youth</p> <p>Community building and civic engagement - events and programs such as community celebrations and fairs, parent leadership program, voter registration, advocacy and advocacy training</p> <p>Family-focused - activities, programs, and events are intentionally directed towards families (parents, caregivers, children, multigenerational)</p>
Defining Characteristics of Place-Based	Operate using a set of standards or a framework for implementing programs and assessing outcomes, such as the National Family

54 Washington State Legislature, “HB 1237.”

55 National Family Support Network (NFSN), “What is a Family Resource Center?”

Source	Definition
<p>Programs, such as Family Resource Centers (Casey Family Programs, 2019)</p>	<p>Support Network’s <u>Standards of Quality for Family Strengthening</u> or the <u>Strengthening Families Protective Factors Framework</u> developed by the Center for the Study of Social Policy. (Or customized standards for a state or other jurisdiction.)</p> <p>Seek to be welcoming spaces that can be utilized by a mixture of diverse community members.</p> <p>Partner with families and whole communities using strengths-based, multi-generational, family-centered approaches.</p> <p>Provide services that are grounded in a strengths-based approach, are culturally sensitive and, when possible, linguistically competent, or offered in languages that reflect the families and communities being served.</p> <p>Be prevention-focused and aim to improve parents’ protective factors.</p> <p>Coordinate, implement, and make referrals to a multitude of services in order to provide comprehensive and flexible individualized and group-based support to address families’ complex needs, including a focus on concrete needs and evidence-based practices.</p> <p>Develop parent and community leadership to support advocacy efforts and family and community resilience.</p> <p>Have a diverse, high-quality and well-trained staff.</p> <p>Be an integral part of the community — serving as a link between families, schools, support services, and the community — and sustain strong partnerships with a variety of other community-based providers, system leaders, and key stakeholders in order to adequately address local needs.</p> <p>Be reflective and adaptable in order to address the specific needs of the community in which they are located.</p>
<p>Key Components of Family Resource Centers (Pampel and Beachy-Quick, OMNI Institute for the Colorado Family Resource Center Association, 2013)⁵⁶</p>	<p>Inclusion of a Diverse Population in Programs and Services</p> <p>Strong Collaborative Relationships between Staff and Families</p> <p>Strengths-Based Approach to Service Delivery</p> <p>Focus on Prevention and Long-Term Growth</p> <p>Involvement of Peers, Neighbors, and Communities</p> <p>Coordination of Multiple Services</p> <p>High-Quality Staff Training and Coaching</p>

⁵⁶ Pampel and Beachy-Quick, “Key Components of Family Resource Centers”

APPENDIX C: SUMMARY OF SHORT SURVEY DATA FROM NEAR FRCs

During the course of the study, the study team determined that there might be many “Near FRCs.” that may or may not have responded to our FRCFinder (Many will have read the “defining characteristics” and screened themselves out and but some did not screen themselves out despite not meeting all the criteria.) The organizations included in the data in this appendix are not an exhaustive list of the state’s “Near FRCs,” nor are they necessarily a representative sample. They are, however, a group of organizations that have most, but not all, of the defining characteristics of an FRC and as such can shed some light on characteristics of “Near FRCs.”

Of the 84 organizations that completed the survey, 21 met some, but not all, of the criteria to be considered an FRC. These organizations completed a short version of the survey, the results of which are presented here.

Counties Served by Near FRC Respondents

Figure 20 and Table 16 show the primary county served by each near FRC. Most responding near FRCs were in Western Washington, specifically in Clark and King counties.

Figure 20

The vast majority of near FRC survey respondents were located in **Western Washington**.



Table 16

Most responding near FRCs were located in Clark and King Counties.

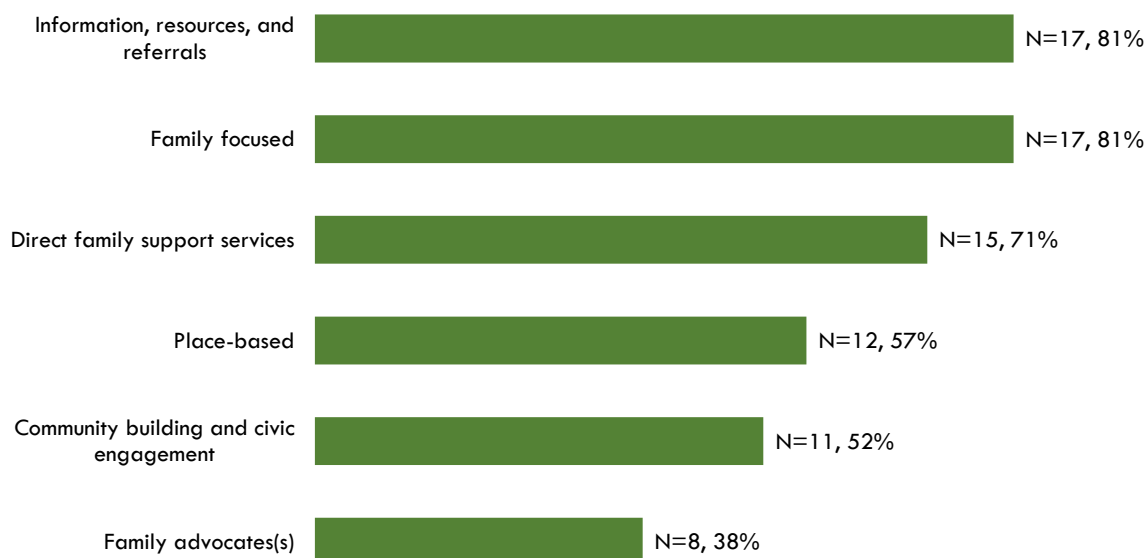
Primary county served	Number of near FRCs	Percent of near FRCs
Clark	4	19%
King	4	19%
Pierce	2	10%
Snohomish	2	10%
Spokane	2	10%
Benton	1	5%
Chelan	1	5%
Clallam	1	5%
Cowlitz	1	5%
Skagit	1	5%
Whatcom	1	5%
Yakima	1	5%
Total	21	100%

What Criteria Were Met by Near FRCs?

Figure 21 shows the FRC criteria met by each of the 21 near FRCs. The majority of near FRC organizations ($N=17$, 81%) offered information, resources, and referrals and were family focused. About three in ten ($N=15$, 71%) offered direct family support services. Smaller proportions reported that they were place-based ($N=12$, 57%) or provided community building and civic engagement ($N=11$, 52%). Nearly two in five near FRCs ($N=8$, 38%) had at least one family advocate on staff.

Figure 21

The majority of near FRC organizations offered information, resources, and referrals and were family focused.



What Do Near FRCs Offer Families? Services, Supports, Resources, and Activities

Figure 22 shows the percentage of the 21 near FRCs that offer various family advocacy and concrete support services onsite. The green bars indicate how many near FRCs offer a given service, and the gray bars indicate how many near FRCs offer a given service through a partner. The vast majority of near FRCs ($N=18$, 86%) provide referrals to healthcare services or public benefit programs onsite, while 14% ($N=3$) offer such referrals through a partner. About three in four near FRCs also offer family advocacy ($N=16$, 76%). Smaller proportions of near FRCs offer services related to child welfare system involvement: 24% ($N=5$) offer differential response and 19% ($N=4$) offer child welfare visitation supervision.

Figure 22

Almost all near FRCs offer referrals to health care services or public benefit programs and family advocacy.

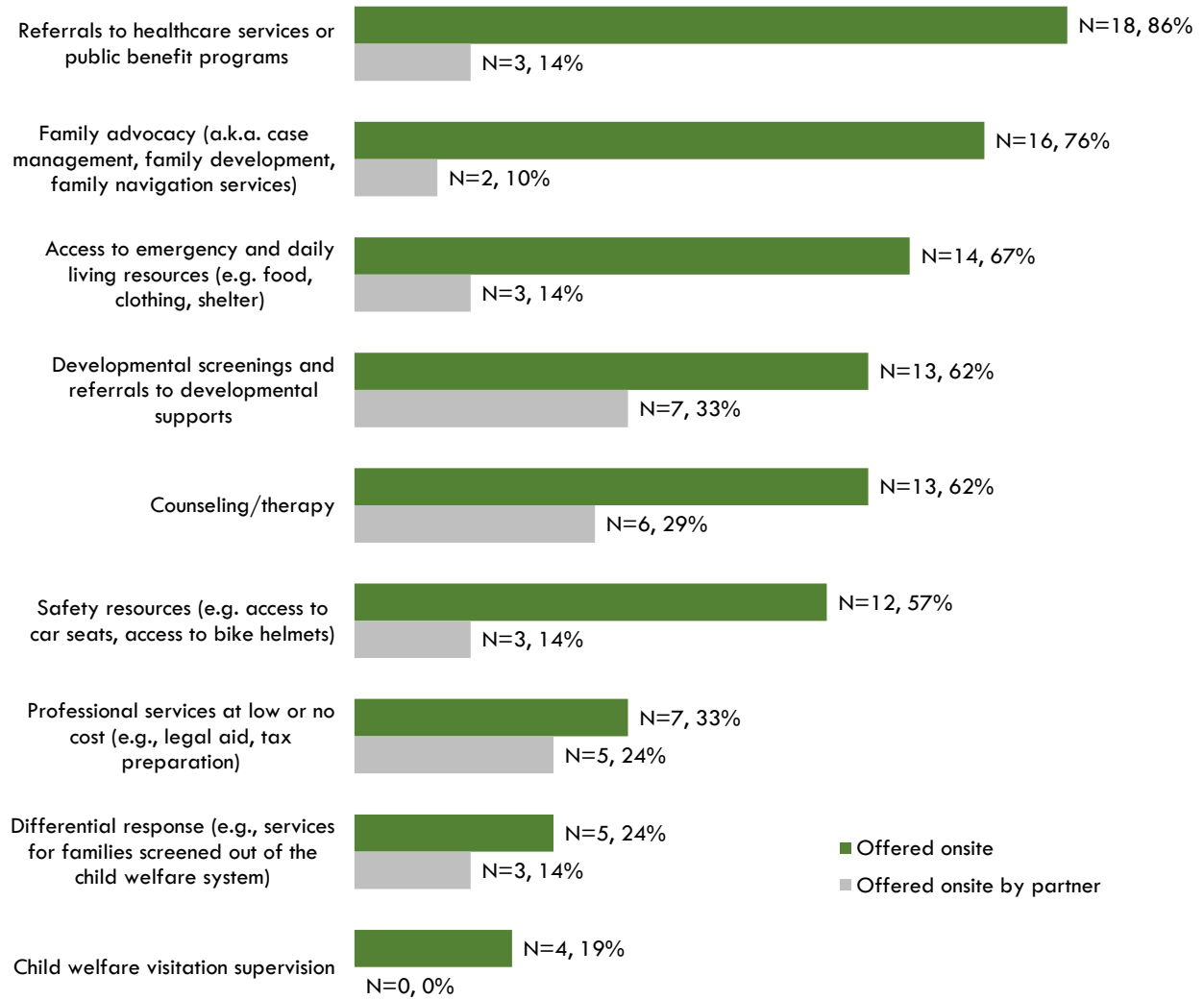


Figure 23 (N=21) shows the percentage of near FRCs offering various family support services onsite. Seven in ten near FRCs offer parenting education (N=15, 71%) and about three in five (N=13, 62%) offer youth development activities/classes. Smaller proportions of near FRCs offered drop-off child care (N=4, 19%), parent/caregiver drop-in programs (N=1, 5%), and respite and crisis child care services (N=1, 5%).

Figure 23
Near FRCs offer a **variety of family support services.**

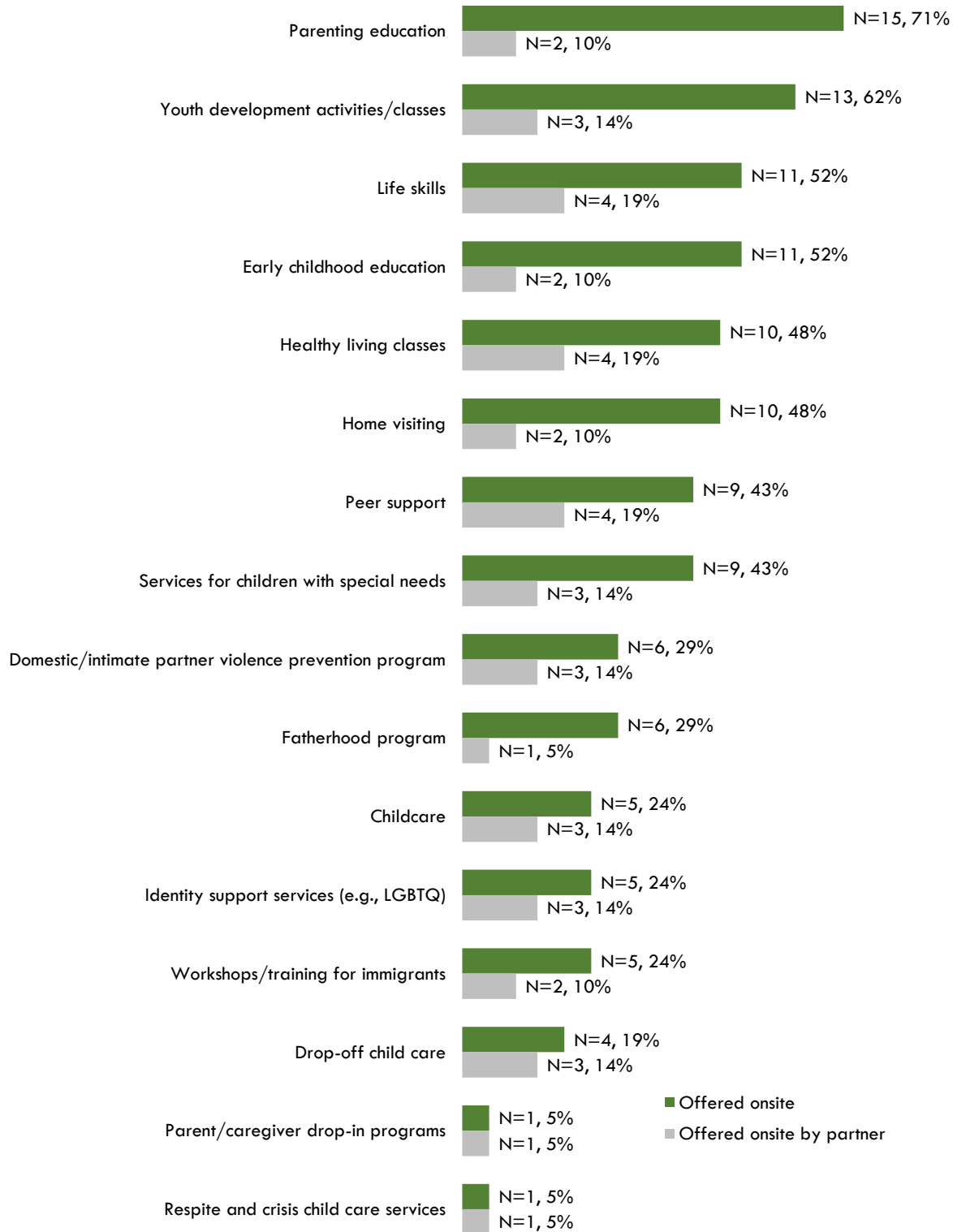
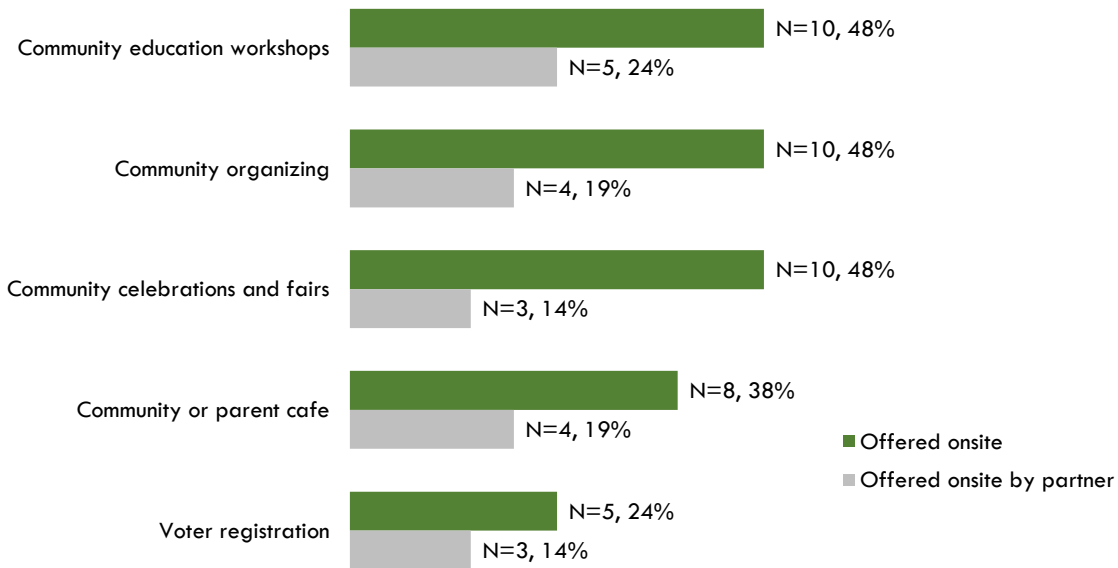


Figure 24 (N=21) presents the percentage of near FRCs offering various community building and civic engagement services. About half of near FRCs provided community education workshops (N=10, 48%), opportunities for community organizing (N=10, 48%), and community celebrations and fairs (N=10, 48%). Smaller proportions offered community or parent cafes (N=8, 38%) and voter registration (N=5, 24%).

Figure 24

About half of near FRCs offer community education workshops, community organizing, and community celebrations and fairs.



APPENDIX D: FRC INDEX

Please note: Asterisks (*) indicate that an organization is considered a “near FRC.” The list below contains information supplied by survey respondents in response to a request to “complete the contact information for the organization for which you are completing the FRC Landscape Survey. Enter the information as you would like it to appear in a published list of FRCs.” The study team confirmed URLs and mailing addresses by checking FRC websites. Phone numbers were also compared to FRC website info, but not changed unless an obvious typo was found. In cases where the provided phone number differed substantially from the one on the website, the team favored the one provided during the survey, since it was usually a direct number for a person at the organization, rather than a general one.

Primary County Served	FRC Name	Website	Address	City	ZIP	Email Address	Phone	Contact Person
Benton	Catholic Charities (Richland)*	www.catholiccharitiescw.org/	2139 Van Giesen St.	Richland	99354	kpalomarez@catholiccharitiescw.org	509-946-4645	Kendra Palomarez
Chelan	Wenatchee Family Resource Center (Children's Home Society of Washington)*	www.childrenshomesociety.org	1014 Walla Walla Ave.	Wenatchee	98801	kristin.collier@chs-wa.org	509-663-0034	Kris Collier
Clallam	First Step Family Support Center	www.firststepfamilysupportcenter.org	323 E. 6th St.	Port Angeles	98362	fstep@olympen.com	360-457-8355	Nita Lynn
Clallam	Lower Elwha Head Start*	www.elwha.org	291 Spokwes Dr.	Port Angeles	98363	debbie.hales@elwha.org	360-461-7091	Debbie Hales
Clallam	Lutheran Community Services Northwest - Clallam County	www.lcsnw.org	2634 S. Francis St.	Port Angeles	98362	llyon@lcsnw.org	360-452-5437	Lisa Lyon
Clark	Anderson Elementary Family-Community Resource Center (Vancouver Public Schools)*	anderson.vansd.org/frc/	2215 NE 104th St., #5641	Vancouver	98686	marissa.valencia-mendez@vansd.org	360-313-1536	Marissa Valencia-Mendez
Clark	Burton Elementary Family & Community Resource Center (Evergreen Public Schools)	www.evergreenps.org/resource-centers/home	14015 NE 28th St.	Vancouver	98682	tricia.harding@evergreenps.org	360-604-4980	Tricia Harding

Primary County Served	FRC Name	Website	Address	City	ZIP	Email Address	Phone	Contact Person
Clark	Discovery Middle School Family-Community Resource Center (Vancouver Public Schools)	disco.vansd.org/fcrc/	800 E. 40th St.	Vancouver	98663	amalia.franco@vansd.org	360-313-3300	Amalia Franco
Clark	East County Family Resource Center (Children's Home Society of Washington)	www.childrenshomesociety.org	1702 C St.	Washougal	98671	andy.tucker@chs-wa.org	360-334-5556	Andy Tucker
Clark	Endeavour Elementary Family & Community Resource Center (Evergreen Public Schools)	www.evergreenps.org/resource-centers/home	2701 NE Four Seasons Ln.	Vancouver	98684	emily.brucher@evergreenps.org	360-604-4928	Emily Brucher
Clark	Fort Vancouver High School Family-Community Resource Center (Vancouver Public Schools)	fort.vansd.org/fcrc/	5700 E. 18th St.	Vancouver	98661	cindy.cooper@vansd.org	360-313-4179	Cindy Cooper
Clark	Fruit Valley Family-Community Resource Center (Vancouver Public Schools)	fruitvalley.vansd.org/fcrc/	3410 NW Fruit Valley Rd.	Vancouver	98660	staci.boehlke@vansd.org	360-907-7158	Staci Boehlke
Clark	Hough Elementary Family-Community Resource Center (Vancouver Public Schools)	hough.vansd.org/fcrc/	1900 Daniels St.	Vancouver	98660	annette.mccabe@vansd.org	360-313-2107	Annette McCabe
Clark	Image Elementary Family & Community Resource Center (Evergreen Public Schools)	www.evergreenps.org/resource-centers/home	5201 NE 131st Ave.	Vancouver	98682	julie.hanke@evergreenps.org	360-604-6853	Julie Hanke
Clark	McLoughlin Middle School Family-Community Resource Center (Vancouver Public Schools)	mac.vansd.org/fcrc/	5802 MacArthur Blvd.	Vancouver	98661	marisol.garcia@vansd.org	360-313-3642	Marisol Garcia
Clark	Ogden Elementary Family-Community Resource Center (Vancouver Public Schools)*	ogden.vansd.org/fcrc/	3200 NE 86th Ave.	Vancouver	98662	lori.weedman@vansd.org	360-313-2550	Lori Weedman

Primary County Served	FRC Name	Website	Address	City	ZIP	Email Address	Phone	Contact Person
Clark	Orchards Elementary Family & Community Resource Center (Evergreen Public Schools)	www.evergreenps.org/resource-centers/home	11405 NE 69th St.	Vancouver	98662	jennifer.beeks@evergreenps.org	360-604-6978	Jennifer Beeks
Clark	Pioneer Elementary School Family & Community Resource Center (Evergreen Public Schools)	www.evergreenps.org/resource-centers/home	7212 NE 166th Ave.	Vancouver	98682	rose.cuneta@evergreenps.org	360-604-3301	Rose Cuneta
Clark	Roosevelt Elementary Family-Community Resource Center (Vancouver Public Schools)*	roosevelt.vansd.org/category/fcrc-2/	2901 Falk Rd.	Vancouver	98661	elizabeth.tiegs@vansd.org	360-313-2623	Elizabeth Tiegs
Clark	Sacajawea Elementary Family-Community Resource Center (Vancouver Public Schools)*	www.vansd.org/fcrc/	700 NE 112th St.	Vancouver	98685	brenda.starr@vansd.org	360-313-2774	Brenda Starr
Clark	Sifton Elementary Family & Community Resource Center (Evergreen Public Schools)	www.evergreenps.org/resource-centers/home	7301 NE 137th Ave.	Vancouver	98682	carmella.bender@evergreenps.org	360-604-6679	Carmella Bender
Clark	Silver Star Elementary School Family & Community Resource Center (Evergreen Public Schools)	www.evergreenps.org/resource-centers/home	10500 NE 86th St.	Vancouver	98662	justin.stpierre@evergreenps.org	360-604-6782	Justin St. Pierre
Clark	Truman Elementary Family-Community Resource Center (Vancouver Public Schools)	www.vansd.org/fcrc/	4505 NE 42nd Ave.	Vancouver	98661	michelle.ames@vansd.org	360-313-2904	Michelle Ames
Clark	Vancouver Family Resource Center (Children's Home Society of Washington)	www.childrenshomesociety.org	309 W. 12th St., PO Box 605	Vancouver	98666	andy.tucker@chs-wa.org	360-334-5556	Andy Tucker
Clark	Walnut Grove Family-Community Resource Center (Vancouver Public Schools)	walnutgrove.vansd.org/fcrc/	6103 NE 72nd Ave.	Vancouver	98661	lindsey.mayer@vansd.org	360-313-2964	Lindsey Mayer

Primary County Served	FRC Name	Website	Address	City	ZIP	Email Address	Phone	Contact Person
Cowlitz	Community Caring Project/Parents' Place*	www.parentsplacelv.org	928 23rd Ave.	Longview	98632	kathiegriffin50@hotmail.com	360-414-9212	Kathleen Griffin
Cowlitz	Longview School District, Family Community Resource Center (located at Monticello MS)	www.longviewschools.com/family-resources/family-community-resource-center	1225 28th Ave.	Longview	98632	mdubois@longview.k12.wa.us	360-575-7767	Mollie DuBois
Island	Readiness To Learn	www.readinesstolearn.org	723 Camano Ave.	Langley	98260	rtlfprograms@readinesstolearn.org	360-221-6808 ext 4321	Gail LaVassar
King	Angle Lake Community Resource Center (Lutheran Community Services Northwest)	www.lcsnw.org	4040 S. 188th St., Suite 300	SeaTac	98188	jkang@lcsnw.org	206-584-9824	Jay Kang
King	Atlantic Street Center Kent Site*	www.atlanticstreetcenter.org	610 W. Meeker St., Suite 201	Kent	98032	pelat@atlanticstreet.org	206-454-3908	Dr. Pela Terry
King	Atlantic Street Center Main Site	www.atlanticstreetcenter.org	2103 S. Atlantic St.	Seattle	98144	pelat@atlanticstreet.org	206-454-3908	Dr. Pela Terry
King	Center for Human Services Shoreline Family Support Center	www.chs-nw.org	17018 15th Ave. NE	Shoreline	98155	admin@chs-nw.org	206-362-7282	Tanya Laskelle
King	Congolese Integration Network	www.cinseattle.org	19550 International Blvd., Suite 103	Seatac	98188	francoise@cinseattle.org	206-751-3543	Francoise Milinganyo
King	Encompass	www.encompassnw.org	1407 Boalch Ave. NW	North Bend	98045	nela.cumming@encompassnw.org	425-281-5993	Nela Cumming
King	Family Resource Support Program (Chinese Information & Service Center)	www.cisc-seattle.org/programs/family-support/	655 156th Ave. SE, Suite #380	Bellevue	98007	kariaw@cisc-seattle.org	206-957-8538	Karia Wong

Primary County Served	FRC Name	Website	Address	City	ZIP	Email Address	Phone	Contact Person
King	International Family Resource Center (Chinese Information & Service Center)	www.cisc-seattle.org/programs/family-support/	611 S. Lane St.	Seattle	98104	familycenter@cisc-seattle.org	206-957-8538	Karia Wong
King	Neighborhood House - High Point	www.nhwa.org	6400 Sylvan Way SW	Seattle	98126	gregk@nhwa.org	206-226-9107	Gregory Kusumi
King	North Seattle Family Resource Center (Children's Home Society of Washington)	www.childrenshomesociety.org/	2611 NE 125th St., Suite 145	Seattle	98125	nsfc@chs-wa.org	206-364-7930	Ann Fuller
King	South King County Family Resource Center (Children's Home Society of Washington)*	www.childrenshomesociety.org/	212 Fifth Ave. S	Kent	98032	skcfc@chs-wa.org	253-854-0700	Ann Fuller
King	South King Healthcare Services*	www.southkinghealthcare.org	110 2nd St. SW, #145	Auburn	98001	southkinghealthcare@outlook.com	253-517-8372	Rachael Gathoni
King	Together Center*	www.togethercenter.org	16225 NE 87th St., Suite A5	Redmond	98052	operations@togethercenter.org	425-869-6699	Kim Sarnecki
King	United Indians of All Tribes Foundation	www.unitedindians.org	PO Box 99100	Seattle	98199	uiatffamilyservices@unitedindians.org	206-285-4425	Mike Tulee
King	Vashon Youth and Family Services Family Place	www.vyfs.org	9822 SW Gorsuch Rd.	Vashon	98070	familyplace@vyfs.org	206-463-5502	Belinda Olvera-Jovanovich
Mason	South Puget Intertribal Planning Agency	www.spipa.org	3104 SE Old Olympic Hwy.	Shelton	98584	info@spipa.org	360-426-3990	Whitney Jones
Okanogan	Colville Tribal Head Start	www.colvilletribes.com/head-start	PO Box 150	Nespelem	99155	carmelita.campos.hds@colvilletribes.com	509-634-6091	Carmelita E. Campos
Okanogan	Room One	www.roomone.org	315 Lincoln St., PO Box 222	Twisp	98856	kelly@roomone.org	509-997-2050	Kelly Edwards

Primary County Served	FRC Name	Website	Address	City	ZIP	Email Address	Phone	Contact Person
Pierce	Bethel Family Center	www.bethelservices.org	18020 B St. E.	Spanaway	98387	bsc@bethelsd.org	253-800-6850	Caitlin McConnell
Pierce	Eastside Family Resource Center	www.tpchd.org/healthy-people/family-support-partnership	3569 E. Roosevelt Ave.	Tacoma	98404	cching@tpchd.org	253-961-6830	Carrie Ching
Pierce	Franklin Pierce Family Resource Center	www.fpschools.org	315 129th St. S.	Tacoma	98444	info@fpschools.org	253-298-3000	Blanca Sagastizado
Pierce	Key Peninsula Family Resource Center (Children's Home Society of Washington)	www.childrenshomesociety.org	17010 S. Vaughn Rd. NW	Vaughn	98394	gina.cabiddu@chs-wa.org	253-884-5433	Gina Cabiddu
Pierce	Lorene's Place II	www.lplacekids.org	3819 100th St. SW, Suite 8A	Lakewood	98499	lp2fc@lplacekids.org	253-230-0647	Jacqueline Tutt
Pierce	Orting Family Resource Center*	www.tpchd.org/healthy-people/family-support-partnership	120 Washington Ave. N	Orting	98360	sbutt@tpchd.org	360-893-8500	Shannon Butt
Pierce	Sumner-Bonney Lake Family Center	www.sumnersd.org/domain/436	1508 Willow St., Portable 705	Sumner	98390	ida_cortez@sumnersd.org	253-891-6153	Ida Cortez
Pierce	White River Family Resource Center*	https://www.answerscounseling.org/	250 W. Main St., Bldg. 200, PO Box 2050	Buckley	98321	leah@answerscounseling.org	360-829-5883	Leah Haugen
San Juan	Joyce L. Sobel Family Resource Center	www.sjifrc.org	PO Box 1981	Friday Harbor	98250	info@jlsfrc.org	360-378-5246	Jennifer Armstrong
San Juan	Lopez Island Family Resource Center	www.lifrc.org/	23 Pear Tree Ln.	Lopez Island	98261	info@lifrc.org	360-468-4117	Barbara Schultheiss
San Juan	Orcas Community Resource Center	www.orcascrc.org	374A N. Beach Rd., #931	Eastsound	98245	info@orcascrc.org	360-376-3184	Erin O'Dell

Primary County Served	FRC Name	Website	Address	City	ZIP	Email Address	Phone	Contact Person
Skagit	Community Action of Skagit County	www.communityactionskagit.org	330 Pacific Pl.	Mt. Vernon	98273	crc@communityactionskagit.org	360-416-7585	Candace Weingart
Skagit	Help Me Grow-Skagit Family Resource Center*	www.helpmegrowskagit.com	Children's Museum of Skagit County, 432 Fashion Way	Burlington	98233	helpmegrowskagit@gmail.com	360-630-8352	Cate L. Anderson
Skagit	Skagit County Brigid Collins Family Support Center	www.brigidcollins.org	917 S. 3rd St.	Mount Vernon	98225	contact@brigidcollins.org	360-428-6622	Elizabeth Morgan
Snohomish	Arlington Community Resource Center (Volunteers of America Western Washington)	www.voaww.org/acrc	3210 Smokey Point Dr., Suite #103	Arlington	98223	arlingtoncrc@voaww.org	360-322-6988	Lynsey Gagnon
Snohomish	Everett Community Resource Center (Lutheran Community Services Northwest)	www.lcsnw.org	215 W. Mukilteo Blvd.	Everett	98203	nps@lcsnw.org	206-694-5700	Jay Kang
Snohomish	Familias Unidas (Lutheran Community Services Northwest)	www.lcsnw.org	215 W. Mukilteo Blvd.	Everett	98203	nps@lcsnw.org	206-694-5700	Jay Kang
Snohomish	Lake Stevens Community Resource Center (Volunteers of America Western Washington)*	www.voaww.org/lscrc	9015 Vernon Rd.	Lake Stevens	98258	lgagnon@voaww.org	425-405-2252	Lynsey Gagnon
Snohomish	North Counties' Family Services	www.ncfs.family	PO Box 1103	Darrington	98241	wyonnef@gmail.com	360-436-0334	Wyonne Perrault
Snohomish	Sky Valley Integrated Service Center (Volunteers of America Western Washington)	www.voaww.org/skyvalley	701 1st St.	Sultan	98294	lgagnon@voaww.org	360-793-2400	Lynsey Gagnon
Snohomish	Take the Next Step	www.ttns.org	202 S. Sams St.	Monroe	98272	admin@ttns.org	360-794-1022	Laron Olson

Primary County Served	FRC Name	Website	Address	City	ZIP	Email Address	Phone	Contact Person
Snohomish	Washington Family Engagement*	www.wafamilyengagementent.org	6628 212th St. SW, Suite 204	Lynnwood	98036	adie@wafamilyengagementent.org	425-273-1595	Adie Simmons
Spokane	Galland-Ashlock Family Resource Center*	www.childrenshomesociety.org	2323 N. Discovery Pl.	Spokane Valley	99216	spokane@chs-wa.org	509-747-4174	Nick Flett
Spokane	Northeast Community Center	www.necommunitycenter.com	4001 N. Cook St.	Spokane	99207	drichardson@necommunitycenter.com	509-487-1603	David Richardson
Spokane	Spokane Valley Partners*	www.svpart.org	10814 E. Broadway Ave.	Spokane Valley	99206	info@svpart.org	509-927-1153	Calvin Coblentz
Spokane	Vanessa Behan	www.vanessabehan.org	2230 E. Sprague Ave.	Spokane	99202	ybcn@vanessabehan.org	509-598-7490	Kristena O'Hara
Thurston	Family Education and Support Services Regional Resilience Center	fort.vansd.org/frc/	PO Box 14907	Tumwater	98506	shelly@familyess.org	360-754-7629	Shelly Willis
Thurston	Family Support Center of South Sound	www.fscss.org	3545 7th Ave. SW, Suite 200	Olympia	98502	trishg@fscss.org	360-754-9297	Trish Gregory
Thurston	Monarch Children's Justice and Advocacy Center	www.monarchcjac.org/	3020 Willamette Dr. NE	Lacey	98503	tambrad.monarch@caclm.org	360-923-1884	Tambra Donohue, PhD
Thurston	South Sound Parent to Parent	www.ssp2p.org	2108 Caton Way SW	Olympia	98502	ksmith@ssp2p.org	360-352-1126	Kim Smith
Walla Walla	Walla Walla Center for Children & Families	www.wwccf.org	1150 W. Chestnut St.	Walla Walla	99362	sbowen@wwps.org	509-526-1760	Samantha Bowen
Walla Walla	Walla Walla Family Resource Center (Children's Home Society of Washington)	www.childrenshomesociety.org	14 Edwards Dr.	Walla Walla	99362	louise.bourassa@chs-wa.org	509-529-2130	Louise Bourassa
Whatcom	East Whatcom Regional Resource Center*	www.oppco.org/ewrrc	8121 Pony Express Way	Maple Falls	98266	info@oppco.org	360-599-3944	Jessica Bee
Whatcom	Whatcom County Brigid Collins Family Support Center	www.brigidcollins.org	1231 N. Garden St., #200	Bellingham	98225	contact@brigidcollins.org	360-734-4616	Jenn Lockwood

Primary County Served	FRC Name	Website	Address	City	ZIP	Email Address	Phone	Contact Person
Whitman	Boost Collaborative	www.boostcollaborative.org	588 SE Bishop Blvd., Suite A	Pullman	99163	knelson@boostcollaborative.org	509-332-4420	Karen Elizabeth Nelson
Yakima	Nuestra Casa*	www.nuestracasawa.org	906 E. Edison Ave.	Sunnyside	98944	caty@nuestracasawa.org	509-839-7602	Caty Padilla
Yakima	Wellness House	www.wellness-house.org	210 S. 11th Ave., Suite 40	Yakima	98902	info@wellness-house.org	509-575-6686	Amy Zook
Yakima	Yakima Children's Village	www.yakimachildrevillage.org	3801 Kern Rd.	Yakima	98902	traciehoppis@yvmh.org	509-574-3200	Tracie Hoppis

APPENDIX E: FAMILY SUPPORT PRINCIPLES, FRAMEWORKS, AND STANDARDS

Principles of Family Support

1. Staff and families work together in relationships based on equality and respect.
2. Staff enhance 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 multi-cultural 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.

(Family Resource Coalition 1996)

The Strengthening Families Protective Factor Framework

This framework is based on the Center for the Study of Social Policy work in 2005. It is a research-informed strength-based approach to build five key protective factors in families, programs, and communities.

Parental resilience – ability to manage and function well when confronted with challenges, adversity, and trauma

Social connections – positive relationships that provide emotional, informational, instrumental, and spiritual support

Knowledge of parenting and child development – understanding child development and parenting strategies that support physical, cognitive, language, and social and emotional development

Concrete support in times of need: Access to concrete support and services that address a family's needs and help minimize stress caused by challenges.

Social and emotional competence of children – family and child interactions that help children develop the ability to communicate clearly, recognize and regulate their emotions and maintain relationships.

(From the Center for the Study of Social Policy, Protective Factors)

Standards of Quality for Family Strengthening & Support

Family Centeredness - values families and recognizes them as integral to the Program.

Family Strengthening - supports families to be strong, healthy, and safe, thereby promoting their success and optimal development

Diversity, Equity, and Inclusion – values, respects, and embraces families’ diversity, and advances equity and inclusion

Community Building – works collaboratively with various stakeholders and supports families’ civic engagement, leadership development and ability to effect systems change

Evaluation - looks at areas of program strength, as well as areas for further development, to guide continuous quality improvement and achieve positive results for families

Adapted from the Standards of Quality for Family Strengthening & Support Workbook (National Family Support Network February 6, 2021, p. 8).

APPENDIX F: THE FRCFINDER OUTREACH DOCUMENT AND FRCFINDER SURVEY

Please see the FRCFinder outreach document and FRCFinder survey on the following pages.

Help Identify & Support Family Resource Centers!

Family Resource Center Landscape Study

About the Study.

Family resource centers (FRCs) play a unique role in supporting and connecting families to an array of services. The Department of Children, Youth & Families (DCYF) and other family support stakeholders are exploring ways to engage and support FRCs in their work. The Family Resource Center (FRC) Landscape Study team is identifying Washington organizations that meet this definition:



FRCs Provide:

- ✓ Information and referral
- ✓ Family advocacy (e.g., screening, needs and strengths assessment, goal-setting)
- ✓ Family supportive services (e.g., parenting education, new-parent support groups, diaper closets) provided directly or through contracted providers

FRCs Are Organizations That Are:

- ✓ Place-based locations where families can go and be welcomed (when there are not pandemic-related restrictions in place)
- ✓ Strengths-based, designed to build community, and designed to meet the needs, cultures, and interests of the communities served

Family resource centers are known by many names: youth and family centers, family support centers, family success centers, or information and service centers. They may have a unique community name, such as the Chinese Information Service Center (in King County).

How You Can Help.

- ➡ Complete the [FRC Finder form](#) and share contact information for organizations that fit the description.
- ➡ Forward this request to anyone who may be able to identify organizations.

****We hope to identify FRCs across the state by April 15th, 2021****

For more information, contact: FRCstudy@kaseylangleyconsulting.com



What is the FRC Landscape Study?

Strengthening Families Washington at DCYF contracted with a team of researchers to learn more about family resource centers across the state. The study consists of four key tasks:

Identify as many FRCs as possible (via the FRC Finder)	March-April 2021
Conduct an online survey of FRCs focused on study questions	April-May 2021
Conduct key informant interviews to explore key FRC topics	March-May 2021
Summarize information and prepare an FRC landscape report	June-July 2021

Why did DCYF commission this study?

FRCs play a unique role in connecting families to resources, particularly in times of need. The COVID-19 pandemic has highlighted FRCs as a vital piece of infrastructure to support individuals and families. There are significant gaps in knowledge about the number and location of FRCs in Washington and the capacity, funding, strengths, and challenges of FRCs across the state. Through this study, DCYF seeks to build upon and contribute to efforts to support and learn about FRCs in Washington (including the past and ongoing efforts of the City of Seattle and the Children's Home Society of Washington) and to better understand FRCs' potential role in statewide efforts to support and strengthen families.



What are family resource centers (FRCs)?

FRCs are *place-based organizations* that provide a unified *single point of entry* for anyone in the community. They *provide information, assess needs, make referrals to family services, and offer direct delivery of family services* (by FRC staff or contracted providers). FRCs are *welcoming and strengths-based* and are designed to meet the needs, cultures, and interests of the communities served. Families and family advocates work *in partnership* to develop and pursue families' goals in increasing self-reliance and self-sufficiency.⁵⁷

Family resource centers can be stand-alone nonprofit organizations, or they can be housed within another organization, like a hospital or the YMCA.

Some family resource centers serve a particular cultural or linguistic community. Others focus on serving communities with common experiences, such as families who are immigrants or refugees, or families living in the same neighborhood or the same rural community. Like families, family resource centers can have many unique formations and specific characteristics.

⁵⁷ As of 3-1-2021, [HB 1237](#) Defining Family Resource Centers passed in the Washington House of Representatives and has been introduced in the Washington Senate.



Family Resource Center (FRC) Finder

Family Resource Center (FRC) Finder

Thank you for helping us identify Family Resource Centers throughout Washington State!

We'd appreciate your contact information (in case we have follow-up questions about the information you provide).

Name

Email Address

Family Resource Centers (FRCs) provide:

- Information, assessment, and referral
- Family advocacy (e.g., screening, needs and strengths assessment, goal-setting)
- Family supportive services (e.g., parenting education, food pantries, diaper closets) provided directly or through contracted providers

FRCs are:

- Physical (place-based) locations where families can go and be welcomed
- Strengths-based, designed to build community, and designed to meet the needs, cultures, and interests of the communities served

Some organizations may oversee multiple FRCs. These "umbrella organizations" help run FRCs that are located in different places. We are seeking contact information for each individual FRC. If you are (or know of) an organization that runs multiple FRCs, **please provide contact information for each individual location.**

Please help us identify as many FRCs as possible! Please share contact information below. You do not need to fill out all the fields if you don't have all the information.

Name of FRC

City / town

Name of contact person

Email address of contact person

Phone number

Website

Notes/comments (optional)

Do you have contact information for another FRC?

Yes

No



Family Resource Center (FRC) Finder

Family Resource Center (FRC) Finder

Terrific! Please share contact information below.

Name of FRC

City / town

Name of contact person

Email address of contact person

Phone number

Website

Notes/comments (optional)

Do you have contact information for another FRC?

Yes

No

NOTE: The FRCFinder questions repeated, allowing respondents to provide contact information for up to 20 FRCs.

APPENDIX G: THE FRC LANDSCAPE SURVEY

Instructions

Thank you for choosing to complete the FRC Landscape Survey. Completion of the survey will help the Washington State Department of Children, Youth, and Families (DCYF) and other stakeholders better understand the current and potential roles family resource centers play.

Before you get started, please read the following guidelines:

- Survey questions focus on specific information about your family resource center (FRC) organization and we hope to receive one completed survey per FRC location.
- We recommend that one representative from your organization completes the survey. This should be someone with knowledge about organizational characteristics, operations, services, programs, and evaluation.
- We suggest that you first browse all the questions in the survey.
- We ask you to answer all the questions to the best of your knowledge about the organization. (Some questions will require you to look at the fiscal year report for 2019 and 2020, respectively.)
- You may skip any questions that you are not comfortable answering.
- Some questions have a couple of underlined words. This indicates that if you hover the cursor over it you will get a brief definition.
- You or your organization will not be penalized in any way for not completing the survey. This is completely voluntary.
- The survey can take between 45-60 minutes.
- Please note that the survey saves your current answers every time you press NEXT or PREVIOUS. This will allow you to continue at a later time as long as you do not close the browser and use the same link to return to where you left off. When you are done, please do not forget to click on the SUBMIT button at the end of the survey.
- The survey will be closed on May 24, 2021.

All data collected will be shared with DCYF, including the name of the person completing the survey. All responses will be summarized and reported as aggregated data and the summary report will include a list of FRCs completing the survey. A summary of the study will be shared widely in the fall of 2021. The name of the person completing the survey will not be included in public reports. All persons completing the survey will be notified when the report is released.

We are pleased to offer a \$25 e-gift card (Tango Card) as thank you for completing the survey. This offer is limited to one Tango Card per Family Resource Center with a single location OR one per location if the FRC has multiple locations. The gift card may be used by the person who fills out the survey, subject to the rules and expectations of their organization.

If you have any questions, please contact us via email at FRCstudy@kaseylangleyconsulting.com.

Please help us identify as many FRCs as possible! Please share contact information below. You do not need to fill out all the fields if you don't have all the information.

Name of FRC

City / town

Name of contact person

Email address of contact person

Phone number

Website

Notes/comments (optional)

Do you have contact information for another FRC?

Yes

No



Family Resource Center (FRC) Finder

Family Resource Center (FRC) Finder

Respondent Contact Information

Please provide the name, title, and email address of the person completing the survey for the organization (or for one of its sites).

* 1. Please provide your name, official title or role, phone number, and email address. Please note that this question is one of the few required throughout the survey. This is in case we need to contact you for further clarification on your responses.

First Name

Last Name

Role/title in your organization (e.g., CEO, Executive Director, Director of Operations, Program Manager, Program Director)

Phone Number (xxx-xxx-xxxx)

Email address

Organization Contact Information

Some organizations are part of an umbrella organization or have multiple sites that meet the characteristics of a family resource center as defined for this FRC Landscape Study ([National Family Support Network](#); [House Bill 1237](#)). If this is the case, we ask that for each qualifying site you or an appropriate staff completes a survey.

2. Is the organization or site for which you are completing the survey part of a larger, umbrella organization that manages some functions like contracting or human resources?

- No, the organization is independently run
- Yes, the site is part of an umbrella organization (please specify name of the organization)

* 3. Please indicate the name of the family resource center organization, location, or site for which you will be completing the survey. If you are completing the survey for an FRC site that is part of a larger organization, please use a name specific for the site. (For example, CISC Eastside Family Resource Center).

4. Please complete the contact information for the organization listed above for which you are completing the FRC Landscape Survey. Enter the information as you would like it to appear in a published list of FRCs in Washington state.

Contact Person

Name of Organization or Site

Address

Address 2

City/Town

ZIP/Postal Code

Email Address (Generic, such as "info@..." if possible)

Phone Number (xxx-xxx-xxxx)

5. What is your organization's or site's website? Please do not include https:// in the URL address.

6. Is the organization or site part of a family resource center network -- that is an association of similar organizations that share ideas and approaches?

No

Yes. Please specify name(s) of network.

7. Below is a list of characteristics of family resource centers as defined for this FRC Landscape Study (National Family Support Network; House Bill 1237). **Please check yes or no if your organization prior to the implementation of COVID-19 safety measures had any of these:**

	YES - had prior to COVID-19 safety measures	NO - didn't have prior to COVID-19 safety measures
Place-based - unified point of entry; welcoming and strengths-based; drop-in to use a printer or ask for information; a place for conversations or hanging out	<input type="radio"/>	<input type="radio"/>
Information, resources, and referrals - families coming through the door have access to pamphlets describing community resources; offer concrete supports such as food pantries and diaper closets; link families to services in the community	<input type="radio"/>	<input type="radio"/>
Family advocate(s) - perform screening, needs and strengths assessment; goal-setting if requested by the family	<input type="radio"/>	<input type="radio"/>
Direct family support service - offered by staff or contracted partners includes parent/caregiver education and support programs, life skills advocacy, formal services for children and youth	<input type="radio"/>	<input type="radio"/>
Community building and civic engagement - events and programs such as community celebrations and fairs, parent leadership program, voter registration, advocacy and advocacy training	<input type="radio"/>	<input type="radio"/>
Family-focused - activities, programs, and events are intentionally directed towards families (parents, caregivers, multi-generational, children)	<input type="radio"/>	<input type="radio"/>

If your organization does not meet all the characteristics, but partners with organizations that do, we still want to hear from you! We will ask you to complete a shorter survey where you will have an opportunity to tell us about your services and partners.

Organizations that meet these characteristics will continue with the survey.

NOTE: Before you answer the following question, please review your answers above carefully.

* 8. Does your organization or site meet all the characteristics of a family resource center described above?

- Yes - My organization or site **meets** all characteristics (You will continue with the survey)
- No - My organization or site meets some, but **does not meet** all characteristics. (You will continue with a shorter survey)

If you have any questions, please do not hesitate to contact us at FRCstudy@kaseylangleyconsulting.com

Organization Characteristics

In this section, we are interested in the primary service areas (counties and cities where community members come from), year established, and whether your organization or site is physically housed or co-located with other organizations.

Remember to complete all the questions from here on for ONLY the organization (or specific site) for which you are completing the FRC Landscape survey.

9. In the first box below, please select the county where *most* families serve by {{Q3}} live. Use the additional boxes to note additional counties where a significant portion of families you serve live.

	Counties A-Z	Counties A-Z	Counties A-Z
County served (+ up to two additional counties)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (4-6)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (7-9)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (10-12)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (13-15)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (16-18)	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you serve less than a full county, please indicate the cities or towns where most of the families that you serve live. For example, if you choose Pierce Co. you might only service families in the Tacoma and Fife areas, but not Buckley.

10. Please use the comment box below to add any other information related to the service areas covered by {{Q3}} (optional).

11. In what year was {{Q3}} established? Use YYYY format.

12. Is {{Q3}} co-located with other organizations? Please **check all that apply**.

- No co-located with other organization(s)
- Community center
- Faith-based organization
- Food pantry
- Government agency (e.g., WIC, out-stationed government worker)
- Health center
- Library
- Mental health center (e.g., counseling center)
- Primary school
- Secondary school
- Other (please specify)

13. Please select how best to describe {{Q3}}'s use of the Family Support Principles, Strengthening Families Protective Factors Framework and the Standards of Quality for Family Strengthening and Support. For each row select one option.

	Do not know/ not familiar	Familiar, but don't use	Familiar and use (e.g., in designing services, tracking performance)
Family Support Principles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strengthening Families Protective Factors Framework (SFPF)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Standards of Quality for Family Strengthening and Support (SQFSS)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please use the comment box below to explain your answer (optional).

Approaches to Staffing and Administration

In this section, we are interested in your organization's or site's operations (e.g., staffing, budgets) during non-COVID times, so please use the 2019 calendar year information to respond, unless we specify a different time frame.

Remember to complete this section with information on the specific site for which you are completing the survey.

14. For the **2019 calendar year**, please indicate the number of paid professionals and support staff employed, and volunteers recruited by {{Q3}}. **Please report only staff who support the work of the organization or site.** Enter only numbers for each choice. Decimals, percents, commas and other non-numeric characters are not accepted.

Number of **full-time** paid employees (32 hours or more per week)

Number of **part-time** paid employees (31 hours or fewer per week)

Number of **volunteers** who support the work of the organization or site

15. **In non-pandemic times**, to what extent does {{Q3}} depend on volunteers?

- Not at all – we don't use volunteers
- Slightly – we use volunteers, but can easily operate without volunteers
- Moderately – we use volunteers and rely on them for a portion of our operations
- Heavily – our organization relies on volunteers to operate

Please use the comment box below to explain your answer (optional).

16. **For calendar years 2019 and 2020, did you have one or more paid family advocates on staff at {{Q3}}?** *A family advocate is someone who screens and assesses a family's needs and strengths. If requested by the family, the family advocate shall assist the family with setting its own goals, and together with the family, develop a written plan to pursue the family's goals in working towards a greater level of self-reliance or in attaining self-sufficiency. (House Bill-1237 2021-22)*

	Pre-COVID-19 (Calendar Year 2019)	During COVID-19 (Calendar Year 2020)
No family advocates on staff	<input type="checkbox"/>	<input type="checkbox"/>
Yes, at least one family advocate on staff	<input type="checkbox"/>	<input type="checkbox"/>

Please use this comment box to explain your answer (optional).

17. Select **all funding sources** for {{Q3}} in the **calendar year 2019**. **Check all that apply.**

- WA DCYF Non-Child Welfare Funding (e.g., Home Visiting Services Account, ECEAP, ESIT)
- WA DCYF Child Welfare
- WA Department of Social and Health Services
- WA State Department of Commerce
- County/City (Local Government) Funds
- Fees or Other Earned Income Not Listed Above (e.g., fees collected from classes, community presentations)
- Restricted Grants for Programs (Private Foundation or Corporate Support)
- Unrestricted Funding (Fundraising from Individual, Corporate, Foundations)
- Other (please specify)

* 18. This question shows the funding sources checked in the previous question. Now, we ask you to choose the **TOP THREE funding sources** for **{{Q3}}** in the calendar year 2019. Check top three.

- WA DCYF Non-Child Welfare Funding (e.g., Home Visiting Services Account, ECEAP, ESIT)
- WA DCYF Child Welfare
- WA Department of Social and Health Services
- WA State Department of Commerce
- County/City (Local Government) Funds
- Fees or Other Earned Income Not Listed Above (e.g., fees collected from classes, community presentations)
- Restricted Grants for Programs (Private Foundation or Corporate Support)
- Unrestricted Funding (Fundraising from Individual, Corporate, Foundations)
- [Insert text from Other]

19. Please use the comment box below to add any other information about your funding sources (optional).

20. What was **{{Q3}}**'s **total operating budget in the 2019 calendar year**? Please enter a number only. Commas, decimals and other non-numerical characters are not accepted.

21. Did the total operating budget for **{{Q3}}** increase, decrease, or stay the same from the 2019 to 2020 calendar year?

- Operating budget increased from 2019 to 2020
- Operating budget decreased from 2019 to 2020
- Operating budget stayed the same from 2019 to 2020

Please explain the differences in the operating budgets between 2019 and 2020 (optional).

Characteristics of Families Served

Please complete the following section using information from the 2019 calendar year, unless otherwise noted.

Remember to complete this section with data for only the organization or site for which you are completing the survey.

22. Please estimate total number of unduplicated children and adults {{Q3}} served (ranging from drop-in to more formal services) in the **2019 calendar year**. Enter a number only. Decimals, commas, and other non-numeric characters are not accepted.

Estimated Number of **Young Children ages 0-5**

Estimated Number of **School-aged Children ages 6-17**

Estimated Number of **Adults ages 18-59**

Estimated Number of **Older Adults ages 60+**

23. Did the number of unduplicated children and adults that {{Q3}} serves significantly differ **between 2019 and 2020**?

	Significantly increased between 2019 and 2020	Significantly decreased between 2019 and 2020	Stayed the same between 2019 and 2020
Number of children served	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of adults served	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please use the comment box below to explain your answer (optional).

24. We know that many individuals come through your doors for support and for community events. We are interested in finding out what populations are a particular strength or focus at {{Q3}}. **Please check all that apply that describe your organization's focus population(s).**

- | | |
|--|---|
| <input type="checkbox"/> Families of children and youth with special healthcare needs | <input type="checkbox"/> Refugee populations |
| <input type="checkbox"/> African families | <input type="checkbox"/> Fathers |
| <input type="checkbox"/> Immigrant/mixed-status families | <input type="checkbox"/> Formerly incarcerated individuals |
| <input type="checkbox"/> Individuals and/or families impacted by domestic/intimate partner violence | <input type="checkbox"/> Arab/Middle Eastern families |
| <input type="checkbox"/> Migrant workers and families | <input type="checkbox"/> Asian or Asian American families |
| <input type="checkbox"/> Rural communities | <input type="checkbox"/> Black or African American families |
| <input type="checkbox"/> Tribal communities | <input type="checkbox"/> Hispanic or Latinx families |
| <input type="checkbox"/> Family, Friend, and Neighbor (FFN) child care providers | <input type="checkbox"/> Mothers |
| <input type="checkbox"/> LGBTQ individuals and families | <input type="checkbox"/> Native Hawaiian and/or other Pacific Islander families |
| <input type="checkbox"/> Formerly or currently homeless or houseless families or youth | <input type="checkbox"/> Parents and/or Caregivers caring for children |
| <input type="checkbox"/> School-aged teens | |
| <input type="checkbox"/> Other focus populations, such as specific identity or cultural groups (please specify). | |

25. Is there any additional important information about the community and focus population that you serve? Please share in the comment box below (optional).

26. Does {{Q3}} have the capacity to directly engage with families in a language other than English? Please indicate which languages at least some direct service staff at your organization speak fluently. **Check all that apply.**

- | | |
|---|--|
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Punjabi |
| <input type="checkbox"/> Mandarin and/or Cantonese | <input type="checkbox"/> Arabic |
| <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Kurdish |
| <input type="checkbox"/> Russian | <input type="checkbox"/> Khmer |
| <input type="checkbox"/> Tagalog | <input type="checkbox"/> Pacific Island Languages |
| <input type="checkbox"/> Korean | <input type="checkbox"/> Native American Languages |
| <input type="checkbox"/> Somali | <input type="checkbox"/> Ukrainian and/or other Eastern European Languages |
| <input type="checkbox"/> Amharic | <input type="checkbox"/> Hindi |
| <input type="checkbox"/> Tigrinya | <input type="checkbox"/> American Sign Language |
| <input type="checkbox"/> Other African Languages | <input type="checkbox"/> Japanese |
| <input type="checkbox"/> Other language(s) (please specify) | |

27. Is there any additional important information about the racial identity, cultural identify and/or languages spoken among the families that you serve? Please share in the comment box below (optional).

28. Please **estimate the percentage** of families that {{Q3}} serves that fit the following income descriptions. "FPL" stands for federal poverty line. Please note that all choices must add up to 100%. **Enter numbers only.** Decimals, commas or other non-numeric characters are not accepted.

Less than 100% of the FPL (\$26,500 or less for a household of 4)

Between 101%-200% of the FPL (between \$26,501-\$52,000 for a household of 4)

Greater than 201% of the FPL (\$52,001+ for a household of 4)

Unknown

29. Is there any additional important information about the income description of the families that you serve?
Please share in the comment box below (optional).

Services, Support, Resources, and Activities

This past year upended many of the services that organizations like yours provided the community. In this section, we would like to learn about the services, supports, resources, and activities your organization or site offered to community members before the pandemic, during the pandemic, and what your plans are for the future. Remember to complete the following questions using data from your organization or site.

30. In the following question, we list five definitional characteristics of family resource centers. Check the characteristics that best describe {{Q3}}. For each characteristic, please **check all that apply**: Available Pre-COVID-19; Available During COVID-19; Plan to be available Post-COVID-19.

	Available Pre-COVID-19 (2019)	Available During COVID-19	Plan to be Available Post-COVID-19
Place-based - unified point of entry; welcoming and strength-based; drop-in to use printer or ask for information; place for conversations/hanging-out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information, resources, and referrals - families coming through the door have access to pamphlets describing community resources; offer concrete supports such as food pantries and diaper closets; link families to services in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family advocate(s) - perform screening, needs and strengths assessment; goal setting if requested by family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family support services - offered by staff or contracted partners such as parent education and support programs, life skills advocacy, formal services for children and youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community building and civic engagement services - events and programs such as, community celebrations and fairs, parent leadership program, voter registration, advocacy and advocacy training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. What innovations and “pivots” has {{Q3}} employed during the COVID-19 pandemic? (Check all that apply.)

	Pivot/innovation during COVID-19	Plan to keep post COVID-19
Increased offering of material items (food, diapers, cleaning supplies, personal protective equipment)	<input type="checkbox"/>	<input type="checkbox"/>
Increased offering of information, referral, and family advocacy	<input type="checkbox"/>	<input type="checkbox"/>
Added new events and activities (COVID-safe) to combat isolation, such as drive-thru events, connections through social media, and virtual groups	<input type="checkbox"/>	<input type="checkbox"/>
Adapted services for online delivery (e.g., virtual parenting education classes, virtual “home” visits, virtual play groups)	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

Please note that the next three questions ask you to consider services implemented during the 2019 calendar year. If you hover your cursor over the underlined words, you can see definitions for the types of services implemented: family advocacy and concrete support services, family support services, and community building and civic engagement services.

Remember to complete this section with data from the organization or site for which you are completing the survey.

32. Please select the family advocacy and concrete support services that {{Q3}} offered in the **2019 calendar year**. For each choice, please **check all that apply** for whether the services are offered on site by your organization or partner organization. Please select "not offered at our location" for services not offered on site.

	Offered at our location by our organization	Offered at our location by partner organization	Not offered at our location
Access to emergency and daily living resources (e.g. food, clothing, shelter)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family advocacy (a.k.a. case management, family development, family navigation services)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Counseling/therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home visiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety resources (e.g. access to car seats, access to bike helmets)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developmental screenings and referrals to developmental supports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Differential response (e.g., services for families screened out of the child welfare system)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child welfare visitation supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Referrals to healthcare services or public benefit programs (e.g., SNAP, WIC, Medicaid/CHIP, housing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional services at low or no cost (e.g., legal aid, tax preparation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other family advocacy and concrete support services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If your organization offered other family advocacy and concrete support services, please describe them below.

33. Please select the family support services that {{Q3}} offered in the **2019 calendar year** that focused on (1) parenting education and support, (2) formal services for children and youth, and (3) life skills advocacy. For each choice, **please check all that apply** for whether the services are offered on site by your organization or community partner. Please select "not offered at our location" for services not offered on site.

	Offered at our location by our organization	Offered at our location by partner organization	Not offered at our location
Early childhood education (e.g., part-day preschool, play and learn groups)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Childcare (e.g., infant/toddler, full-day preschool, before/after school care)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drop-off child care (e.g., while parents/caregivers are participating in services)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services for children with special needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fatherhood program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent/caregiver drop-in programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home visiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respite and crisis child care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer support (e.g., parent2parent, child kinship caregivers, new parent groups, 12-step groups)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic/intimate partner violence prevention program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth development activities/classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Healthy living classes (e.g., nutrition, exercise, anger management, stress relief)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workshops/training for immigrants (e.g., Know Your Rights training)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life skills (e.g., financial planning, computer literacy, job training, literacy training)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identity support services (e.g., LGBTQ)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other family support services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If your organization offered other family support services, please describe them below.

34. Please select the community building and civic engagement services that {{Q3}} offered in the **2019 calendar year**. For each choice, **please check all that apply** for whether the services are offered on site by your organization or community partner. Please select "not offered at our location" for services not offered on site.

	Offered at our location by our organization	Offered at our location by partner organization	Not offered at our location
Voter registration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community or parent cafe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community organizing (e.g., advocacy activities, advocacy training, community issue prioritization)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community education workshops (e.g., violence prevention, CPR training, disaster recovery/preparedness, promotores network)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community celebrations and fairs (e.g, health fair, job fair, cultural celebration)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other community building and civic engagement services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If your organization offered other community building and civic engagement services, please describe them below.

Community Partners

We understand that family support services cannot be completely provided by one organization. For this reason, community partnerships and collaborations are formed to leverage resources and funds to support families' well-being. In the next couple of questions, we ask you to share the kinds of partnerships you have with different local, state, federal, and national entities and any changes to these partnerships during the pandemic.

Remember to complete this section with data for only the organization (or site) for which you are completing the survey.

35. This question lists community partners that sometimes family resource centers engage with to support and leverage their resources. Please check **all the community partners** that {{Q3}} partnered with during the **2019 calendar year**. (Check all that apply.)

- Chamber of Commerce
- Court system
- Domestic violence advocates
- DCYF child welfare
- Early childhood centers and schools
- Faith communities
- Immigrant and refugee community organizations
- Law enforcement
- Medical community
- Mental health professionals
- Military
- Perinatal services (e.g. doulas)
- Policy makers
- Private business
- Substance use treatment agencies
- Tribal communities
- Other (please specify)

* 36. This question lists the community partners that you selected in the previous question. This time, we ask that you **select TOP THREE community partners** that {{Q3}} partnered with during the **2019 calendar year**.

(Check top three.)

- Chamber of Commerce
- Court system
- Domestic violence advocates
- DCYF child welfare
- Early childhood centers and schools
- Faith communities
- Immigrant and refugee community organizations
- Law enforcement
- Medical community
- Mental health professionals
- Military
- Perinatal services (e.g. doulas)
- Policy makers
- Private business
- Substance use treatment agencies
- Tribal communities
- [Insert text from Other]

37. During the pandemic, did {{Q3}}'s engagement with community partners change?

- Yes, we gained new partners
- Yes, we lost some partners
- No, we stayed with the same partners
- We gained some partners, lost some partners

Please use the comment box below to explain your answer (optional).

Evaluation Capacity

In this section, we would like to know what types of information your organization or site collects and how the information is used. Please think about the 2019 calendar year.

Remember to complete this section for only the organization or site for which you are completing the survey.

38. What types of information does {{Q3}} collect? Please **check all that apply**.

- Program service utilization (tracks participation in programs and services)
- Family or household-level data (demographics, family needs assessment, child assessment)
- Satisfaction surveys (participant satisfaction with programs/services)
- Near-term outcome evaluation (surveys impact of programs/services on participant's knowledge, behavior, attitudes, or other relevant measures)
- Community needs assessment (surveys families or larger community in identifying community issues and priorities)
- Donor information
- Other (please specify)

39. What methods does {{Q3}} have in place to solicit and incorporate feedback from parents, caregivers, and community members? Please **check all that apply**.

- Parent/caregiver advisory group
- Client satisfaction survey
- Suggestion box
- Parent/caregiver representative(s) on Board of Directors
- Community advisory board
- Youth advisory board
- Other (please specify)

40. How does {{Q3}} track data? Please **check all that apply**.

- Paper forms
- Electronic spreadsheet (e.g., Excel, Google Sheets)
- Dedicated database unique to our organization (e.g., Access, Effort to Outcomes)
- One or more databases specific to a particular program or funder (e.g., VisitTracker, Effort to Outcomes, NowPow)
- Data analytics software (e.g., Power BI, Tableau, Sigma, etc.)
- Other (please specify)

41. What does {{Q3}} use the data for? Please **check all that apply**.

- Fulfilling funder requirements
- Communicating with clients, volunteers, and the community
- Program monitoring and improvement (e.g., continuous quality improvement)
- Other (please specify)

42. Please indicate which of the following outcome measures are used by {{Q3}}. **Check all that apply**.

- Changes in parents (e.g., parenting skills and knowledge; social connection; other protective factors)
- Changes in children (e.g., social-emotional development; school readiness)
- Changes in life skills (e.g., computer skills, language skills; job skills)
- Changes in community awareness (e.g., crime-hate incidents; social justice)
- Changes in agency partnerships
- Other (please specify)

43. Please share any challenges that {{Q3}} may have in tracking and analyzing data from clients, donors, and others (optional).

Closing Questions

FRCs are being impacted by unique strengths and challenges from the past year (including the myriad impacts of the pandemic and approaches to anti-racism and racial equity) alongside familiar strengths and challenges associated with staffing, funding, outreach, and service delivery. In the next two questions, please tell us about your organization's or site's pressing challenges or concerns and your top plans and proactive priorities.

Remember to complete this section for only the organization or site for which you are completing the survey.

44. Please list up to three **challenges or concerns** currently facing {{Q3}}.

Challenge or concern #1

Challenge or concern #2

Challenge or concern #3

45. Please list up to three **strategic priorities and/or proactive organizational goals** of {{Q3}}.

Strategic priority #1

Strategic priority #2

Strategic priority #3

46. In a dream scenario, imagine that you are on a committee charged with supporting and strengthening Washington FRCs. The committee makes funding decisions and has a large amount of funds available. How would you recommend the committee spend that money?

47. Several other states and localities have a central organization, government entity, or network that works across FRCs. To what extent would {{Q3}} be interested in centralized support related to the following elements of running an FRC?

	Not at all interested	Slightly interested	Moderately interested	Very interested	Extremely interested
Statewide FRC policy and advocacy efforts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluation and data management (capacity building and common resources and approaches)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
FRC professional development, leadership development, and other organizational capacity development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Grant writing, fundraising, and other fund development (capacity building and common resources)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Common FRC quality standards and/or certification	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Connections with peer FRCs in Washington	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please use this box to add another option or explain any of your responses. (Optional)

48. Is there anything else about {{Q3}} that you think is important to share with us? Please use this space below for any additional information about your FRC.

A large, empty rectangular box with a thin black border, intended for the respondent to provide additional information about their FRC.

Short Survey Version

Organization Characteristics

In this section, we are interested in the primary service areas (counties and cities) that you serve and whether your organization is physically housed or co-located with other organizations.

49. In the first box below, please select the county where *most* families {{Q3}} serves live. Use the additional boxes to note additional counties where a significant portion of families you serve live.

	Counties A-Z	Counties A-Z	Counties A-Z
County served (+ up to two additional counties)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (4-6)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (7-9)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (10-12)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (13-15)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional counties served (16-18)	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you serve less than a full county, please indicate the cities or towns where most of the families that you serve live. For example, if you choose Pierce Co. you might only service families in the Tacoma and Fife areas, but not Buckley.

50. Please use the comment box below to add any other information related to the service areas covered by {{Q3}} (optional).

51. Is {{Q3}} co-located with other organizations? Please **check all that apply**.

- No co-located with other organization(s)
- Community center
- Faith-based organization
- Food pantry
- Government agency (e.g., WIC, out-stationed government worker)
- Health center
- Library
- Mental health center (e.g., counseling center)
- Primary school
- Secondary school
- Other (please specify)

Please note that the next three questions ask you to consider services implemented during the 2019 calendar year. If you hover your cursor over the underlined words, you can see definitions for the types of services implemented: family advocacy and concrete support services, family support services, and community building and civic engagement services.

Remember to complete this section with data from the organization or site that you are completing the survey for.

52. Please select the family advocacy and concrete support services that {{Q3}} offered in the **2019 calendar year**. For each choice, **please check all that apply** for whether the services are offered on site by your organization or partner organization.

	Offered at our location by our organization	Offered by our organization at a partner's location	Our organization does not offer this service
Access to emergency and daily living resources (e.g. food, clothing, shelter)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family advocacy (a.k.a. case management, family development, family navigation services)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Counseling/therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home visiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety resources (e.g. access to car seats, access to bike helmets)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developmental screenings and referrals to developmental supports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Differential response (e.g., services for families screened out of the child welfare system)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child welfare visitation supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Referrals to healthcare services or public benefit programs (e.g., SNAP, WIC, Medicaid/CHIP, housing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional services at low or no cost (e.g., legal aid, tax preparation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other family advocacy and concrete support services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If your organization offered other family advocacy and concrete support services, please describe them below.

53. Please select the family support services that {{Q3}} offered in the **2019 calendar year** that focused on (1) parenting education and support, (2) formal services for children and youth, and (3) life skills advocacy. For each choice, **please check all that apply** for whether the services are offered on site by your organization or community partner. Please select "not offered at our location" for services not offered on site.

	Offered at our location by our organization	Offered at our location by partner organization	Not offered at our location
Early childhood education (e.g., part-day preschool, play and learn groups)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Childcare (e.g., infant/toddler, full-day preschool, before/after school care)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drop-off child care (e.g., while parents/caregivers are participating in services)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services for children with special needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fatherhood program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent/caregiver drop-in programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home visiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respite and crisis child care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer support (e.g., parent2parent, child kinship caregivers, new parent groups, 12-step groups)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic/intimate partner violence prevention program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth development activities/classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Healthy living classes (e.g., nutrition, exercise, anger management, stress relief)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workshops/training for immigrants (e.g., Know Your Rights training)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life skills (e.g., financial planning, computer literacy, job training, literacy training)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identity support services (e.g., LGBTQ)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other family support services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If your organization offered other family support services, please describe them below.

54. Please select the community building and civic engagement services that {{Q3}} offered in the **2019 calendar year**. For each choice, **please check all that apply** for whether the services are offered on site by your organization or community partner. Please select "not offered at our location" for services not offered on site.

	Offered at our location by our organization	Offered at our location by partner organization	Not offered at our location
Voter registration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community or parent cafe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community organizing (e.g., advocacy activities, advocacy training, community issue prioritization)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community education workshops (e.g., violence prevention, CPR training, disaster recovery/preparedness, promotores network)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community celebrations and fairs (e.g, health fair, job fair, cultural celebration)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other community building and civic engagement services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If your organization offered other community building and civic engagement services, please describe them below.

55. Is there anything else about {{Q3}} that you think is important to share with us? Please use this space below for any additional information about your organization.

Thank you for completing the survey!

This is the end of the survey.

Thank you for taking the time to complete the survey. In the next two-weeks, we will send one e-gift card (Tango Card) as thank you for completing the survey. This offer is limited to one Tango Card per organization with a single location or one per location if the organization has multiple locations. The gift card may be used by the person who filled out the survey, subject to the rules and expectations of your organization.

If you need to add information for another site, please use the link provided for that site in the invitation email.

Whenever you are ready, please click on the **submit** button below.

If you have any questions, please do not hesitate to contact us at FRCstudy@kaseylangleyconsulting.com