

August

2020



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## **Nebraska Expectant and Parenting Grant**

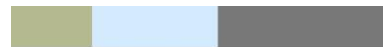
Office of Population Affairs (OPA) *Pregnancy Assistance Fund (PAF)*

*Grantee: NDDHS Division of Public Health*

*Sub-Grantee: Nebraska Children and Families Foundation*

# FINAL EVALUATION REPORT

JULY 2018 – JUNE 2020



Schmeeckle Research Inc.

Joyce Schmeeckle, Ph.D.

Will Schmeeckle, M.A.

Lincoln, NE

402.477.5407

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## EXECUTIVE SUMMARY

Nebraska Children (NC) implemented a two-year (July 2018 – June 2020) Pregnancy Assistance Fund (PAF) grant from the Nebraska Department of Health and Human Services (NDHHS) who received funds from the Federal Office of Population Affairs (OPA) to serve expectant and parenting young people ages 14-25. The grant funded three community collaboratives in year 1: Douglas County, Lincoln County (North Platte), and Madison County (Norfolk). The grant funded two additional communities in year 2: Lancaster County and Sarpy County.

## EVALUATION METHODS AND PARTICIPATION NUMBERS

Listed in Table 1 are the methods and the participation numbers for each of the strategies/evaluation concept used to collect evaluation information for the project. Full reports for each are located in the body of the report (see Table of Contents).

**Table 1. Evaluation Methods and Participation Numbers**

<b>Strategy/ Evaluation</b>	<b>Methods Data Collection/Dates</b>	<b>Participants</b>
<b>1. Project Performance Measures</b>	Collected young people participant numbers and demographics; and partners by community Quarterly dashboards of information by community and overall	5 Communities (i.e., yrs. 1 and 2 - Douglas County, Lincoln County, Madison County; yr. 2 Lancaster County and Sarpy County)
<b>2. Families Thrive Training</b>	Training occurred October 2018 – March 2020  1. Training Evaluation 2. Retrospective Participant Surveys 3. 3-4-month Follow-up Surveys (Sept 2019 – May 2020) 4. Trainer Survey (June 2020)	176 Training Participants; 58 Organizations; 5 Communities; 26 new trainers trained  1. N = 41 2. N = Response Range: 62-124 3. N = 69 4. N = 12
<b>3. Continuous Quality Improvement (CQI)</b>	Process Evaluation - Key Informant Interviews  1. March/April 2019 2. November 2019 3. June 2020	Community Coalition Coordinator and Central Navigators, and NC Staff (March/Apr 2019; Nov 2019 and June 2020: 19 participants Nov and June)
<b>4. Douglas County Maternity Leave Pilot Program</b>	Pre/Post Assessments November 2019 – June 2020	4 mothers in Douglas County
<b>5. Social Influencer Program</b>	Social Media Analytics March 2019-June 2020	3 Social Influencers
<b>6. Youth Served Feedback</b>	Survey for Young Adult Parents June 2020	60 Young Adult Parent Respondents

## SUMMARY OF PROJECT EVALUATION RESULTS

The PAF grant provided not only additional concrete supports to young people in five communities, but also created community awareness and focus on the expectant and parenting young people to address the needs of the whole family. The uniqueness of each community, the level of system integration and collaboration already in place connecting with this population, may have had some impact on consistent change across all five communities, but all experienced some level of growth within the community and overall system as a result of the grant.

**Dual-generation Impact.** Communities and NC staff believed the grant was responsible for a shift in helping both the young person and their children. Future funding of communities by NC will be more integrated in order to impact the two generations, including the concept as a best practice for the organization. Not only in most communities did the grant provide resources for both parent and child, but also witnessed the shift in community providers and coaching agencies perception from only serving young people to serving the entire family.

**Youth Services.** Coaching was seen as the “important thing” in addition to support service funds. With the guidance of a coach, the young person helps identify needs, then the coach helps them connect to resources, and continues with them, sometimes for years if needed, to help them maneuver through difficult times. Coaches also help them set goals and find ways to think through next steps. Some communities (e.g., Douglas County and Lancaster County) have a fully developed process for coaches in the communities while others are still in the process of developing a more standardized process. The term “coach” may be more formal in some communities than in others. Most young people have a coach, but support services funding may be accessed without a coach.

**Collaborative Partners.** New partnerships and collaborations noted were schools, hospitals, and connecting the parenting and early childhood system with the young people system. By June 2020, NC observed collaborative partners still missing from most communities were housing and juvenile justice. However, the increase in collaboration between new partners increased substantially during the COVID-19 pandemic. Service providers developed creative ways to stay connected and work together, and brought new people on board that are interested in strengthening the relationship long-term. Some communities noted individual agencies that are beginning to be involved in the collaborative that were not previously engaged.

**System Impact.** In November of 2019, PAF has had some observed changes to the community service provider system, but some feel like it may be a bit premature to experience any large-scale changes. What was newly observed is the consistent discussion and inclusion about this population at community meetings, and the expansion of collaboration and closer working relationships among central navigators and community partners. Increased flexibility with the

funding that led to a change in how NC contracts with communities was also noted as a system change between funder and communities.

## SUMMARY TABLES

The two-year grant was implemented in the first three community cohorts (Douglas County, Madison County and Lincoln County) with funding and confirmed process not available until the end of 2018. It took some time for communities to understand the parameters of the funding, determine what qualified and was allowable for support services funds for young people, and to recruit and enroll qualified young people in the community. By the beginning of year 2 of the grant, however, year 1 cohorts' communities were doing well, as year 2 cohorts were brought on board to begin the same process. Lancaster County had an infrastructure in place to serve youth immediately, but Sarpy County however did not, and therefore struggled with recruitment until collaboration with Douglas County intensified in the last quarter.

Tables 2-4 highlight the individual-level results of the project, community collaborative-level results (including Families Thrive training), and system-level results. Overall, at the individual level (Table 2), grant enrollment goals were met or exceeded, and communities expanded their awareness of the needs for young people who were pregnant and parenting. Concrete supports, or support services funds, were effective in providing much needed financial support to young people through rent, utilities, baby items, etc. Coaching also was an important component to the support of young parents.

At the community collaborative-level (Table 3), all communities had opportunities to engage in Families Thrive training but at various saturation levels across the communities. The impact to the system through the training is somewhat evident where training has been embraced, such as Douglas County, with intentions to continue community wide training. However, there is less interest in continuing Families Thrive training in the future in other communities. The onset of the COVID-19 pandemic altered the course of the implementation of the project from interruptions with training, to providing coaching virtually. Communities were challenged to find new ways to enroll participants, and provide additional needed concrete support services, as well as virtual coaching to young people who were parenting or expecting.

Finally, at the system-level, collaborative partners were expanded, and other system changes occurred as a result of the grant. This included expansion of young people 'as parents' language in both NDHHS and NC, to a broader and more enduring awareness by community providers of considering young people as parents when providing services and support. Again, with the pandemic, communities quickly enhanced their collaboration to meet the urgent concrete needs, and coaches determined ways to connect virtually with young people. Virtual connection may continue even after the pandemic as a preferred method of communicating for some youth.

**Table 2. Individual-level Results**

<b>Evaluation Question</b>	<b>Evaluation Results</b>	<b>Successes</b>	<b>Challenges and Lessons Learned</b>	<b>Data Source</b>
<b><i>Were participation numbers achieved?</i></b>	<p><i>Goal: 600</i></p> <ul style="list-style-type: none"> <li>950 expectant or parenting young people served</li> <li>1,100 dependent children</li> <li>70% were 20 or older</li> <li>87% were women</li> <li>approximately 67% identified themselves as non-white</li> <li>approximately 30% were pregnant/expecting</li> </ul>	<ul style="list-style-type: none"> <li>Enrollment of young people in NEPG-PAF continued to be strong in year 2 with little effort or need for recruitment by communities with 4 of the 5 communities reaching individual community goals.</li> </ul>	<ul style="list-style-type: none"> <li>Sarpy County was unable to meet their community participation goal with the short 1-year timeframe but in March began collaborating with Douglas County to serve 33 young people for the year with the goal of 60.</li> </ul>	Performance Measures/Key Informant Interviews
<b><i>Did young parents feel supported?</i></b>	<ul style="list-style-type: none"> <li>83% of surveyed young parents agreed/strongly agreed have been understanding of their needs.</li> <li>89% of surveyed young parents said the services they received mostly or completely helped them meet their own goals or needs.</li> </ul>	<ul style="list-style-type: none"> <li>Virtual communication during the pandemic may continue as a preferred method of communicating for some young people that help eliminate transportation or childcare concerns.</li> </ul>	<ul style="list-style-type: none"> <li>Coaches meeting virtually with young people during pandemic; waiting list for coaches in Douglas County and Norfolk.</li> </ul>	Survey for Young Adult Parents/Key Informant Interviews
<b><i>Were young people satisfied with services?</i></b>	<ul style="list-style-type: none"> <li>90% of surveyed young parents were satisfied or very satisfied with services received.</li> <li>84% of surveyed young parents were satisfied/very satisfied with the process of receiving services.</li> <li>83% agreed or strongly agreed that people have been understanding about my needs both as a young adult and a parent.</li> <li>85% felt comfortable seeking out services and supports for myself and my child.</li> </ul>	<ul style="list-style-type: none"> <li>"These programs, especially the teen and young parent program, have allowed me to parent in the healthy way possible and have taught me to check myself when I am not being healthy with my daughter." (young parent survey respondent)</li> </ul>	<ul style="list-style-type: none"> <li>When asked how their children's needs could be better met, young parents indicated 1) more services, 2) education, 3) more activities.</li> </ul>	Survey for Young Adult Parents
<b><i>What services were accessed by young people?</i></b>	<p>Most commonly accessed services were</p> <ul style="list-style-type: none"> <li>support services fund (45%)</li> <li>coaching (42%)</li> <li>working with central navigator (38%)</li> <li>social engagement/peer support (38%)</li> </ul>	<ul style="list-style-type: none"> <li>Communities believe coaching is a key component of the project, and noted that meeting needs of young people through concrete supports</li> </ul>	<ul style="list-style-type: none"> <li>Due to the pandemic, communities were challenged on how to alter how services were delivered to young people.</li> <li>Challenged to meet the financial needs of the young</li> </ul>	Survey for Young Adult Parents/Key Informant Interviews

	<ul style="list-style-type: none"> <li>70% of young parents reported accessing more than one service</li> </ul>	was a success of the project.	people in some communities.	
<b><i>How did concrete supports impact young people?</i></b>	<ul style="list-style-type: none"> <li>mothers participated in the Maternity Leave Pilot in Douglas County</li> <li>all 4 would not have been able to stay home with the baby without the program</li> <li>all were able to maintain safe and stable housing and able to pay bills</li> <li>all 4 had a childcare plan</li> </ul>	<ul style="list-style-type: none"> <li>Concrete supports provided needed baby items, rent assistance, utilizes, and household items to sustain young people.</li> <li>With COVID-19, provided additional concrete supports in Douglas County during pandemic.</li> <li>Increased collaboration with services providers to meet increased needs.</li> </ul>	<ul style="list-style-type: none"> <li>Only 1 of the 4 young women in the Maternity Leave Pilot returned to work after their leave.</li> <li>Need for available and affordable housing and transportation for young people in the communities.</li> </ul>	Key Informant Interviews/ Maternity Leave Pilot Program Evaluation
<b><i>Was dual-generation Impact achieved?</i></b>	<ul style="list-style-type: none"> <li>Communities and NC staff believed the grant was responsible for a shift in helping both the young person AND the children.</li> <li>Communities witnessed the shift in community providers and coaching agencies perception from only serving young people to serving the entire family.</li> </ul>	<ul style="list-style-type: none"> <li>NC will integrate funding for dual generation impact as a best practice for the organization.</li> <li>Stronger collaborative relationships between providers that serve young people and those that serve children.</li> </ul>	<ul style="list-style-type: none"> <li>All the potential is there, but it is too early to determine the true impact of the project, believed stakeholders.</li> </ul>	Key Informant Interviews

**Table 3. Community Collaborative-level Results**

Evaluation Question	Results	Successes	Challenges and Lessons Learned	Data Source
<b><i>How did COVID-19 effect implementation?</i></b>	<ul style="list-style-type: none"> <li>• Since March of 2020, and the onset of the directed health measures, how youth were served changed extensively with applications and coaching going “virtual”.</li> <li>• The financial stress on young people in the community was immediate and therefore financial support in at least one county (i.e., Douglas County) was expanded.</li> </ul>	<ul style="list-style-type: none"> <li>• Community service providers strengthened their collaboration in order to provide supports with additional help with rent, utilities, baby items, etc.</li> </ul>	<ul style="list-style-type: none"> <li>• It is anticipated paying bills will be a future challenge for young people with utility and rent policies reverting to business as usual.</li> </ul>	Key Informant Interviews
<b><i>Were there a sufficient number of grantee and partner staff trained to implement NEPG-PAF or to work with expectant/parenting young people?</i></b>	<ul style="list-style-type: none"> <li>• 309 total community members participated in community trainings</li> <li>• 176 participants from 58 organizations participated in Families Thrive training across five communities</li> <li>• 89 out of the 176 unique participants (51%) completed all five modules</li> </ul>	<ul style="list-style-type: none"> <li>• 26 individuals from 18 different organizations trained as new trainers in Families Thrive</li> </ul>	<ul style="list-style-type: none"> <li>• Some communities were challenged to recruit a sufficient number of participants to for Families Thrive training.</li> </ul>	Performance Measures/ Families Thrive Training Data
<b><i>How did those trained on Families Thrive improve knowledge and understanding of the family system model?</i></b>	<p>In a retrospective survey, Families Thrive training participants reported:</p> <ul style="list-style-type: none"> <li>• an increase from 45% before the training to 98% after the training in terms of the Family Thrives premises and how to apply them to their work.</li> <li>• an increase from 48% before the training to 97% after the training in terms of being knowledgeable about the family systems model.</li> </ul>	<ul style="list-style-type: none"> <li>• “It is wonderful when someone with a more punitive view of dealing with young people finally get that a strengths-based perspective is healthier,” commented a trainer.</li> </ul>	<ul style="list-style-type: none"> <li>• The sectors of education, faith-based, housing, and juvenile justice were most commonly selected as the sectors as missing from Families Thrive trainings by the trainers.</li> </ul>	Families Thrive Training Survey/ Families Thrive Trainer Survey
<b><i>Will Families Thrive be sustained in the communities?</i></b>	<ul style="list-style-type: none"> <li>• NC will continue to seek funding for Families Thrive training through other funding sources.</li> </ul>	<ul style="list-style-type: none"> <li>• Douglas County will continue either through NC or through other community partnerships.</li> </ul>	<ul style="list-style-type: none"> <li>• There is less interest in continuing Families Thrive training in the future in the other four communities.</li> </ul>	Key Informant Interviews



<b><i>Did social media influencers increase awareness and communicate resources?</i></b>	<p>March 2019 through June 2020, three influencers created a total of</p> <ul style="list-style-type: none"> <li>• 204 social posts.</li> <li>• on average, 229 impressions were made per post</li> <li>• on average 19% of the accounts who have viewed the posts were not following the influencer's account prior to seeing the post but was as high as 85% for some posts</li> </ul>	<ul style="list-style-type: none"> <li>• Three Social Media Influencers posted twice a week utilizing their own social media accounts to provide resources, awareness, and down to earth relatable advice to other expecting and parenting young people around the state of Nebraska.</li> </ul>	<ul style="list-style-type: none"> <li>• Since March 2020, social media posts declined substantially.</li> </ul>	Social Media Influencers' Analytics
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**Table 4. System-level Results**

<b>Evaluation Question</b>	<b>Results</b>	<b>Successes</b>	<b>Challenges and Lessons Learned</b>	<b>Data Source</b>
<b><i>What was the number of Community Partners actively engaged?</i></b>	<ul style="list-style-type: none"> <li>• 529 partners actively engaged</li> <li>• 42% of all partners from the social or human services sector</li> </ul>	<ul style="list-style-type: none"> <li>• In Norfolk (Madison County), the school became a new partner through the Sixpence program.</li> <li>• Norfolk has learned to trust the coaching partners to best meet the needs of the young people.</li> </ul>	<ul style="list-style-type: none"> <li>• Coaching partners in North Platte (Lincoln County) changed; and there was a perceived in need of coach training for a consistent training model in the community.</li> <li>• The broader the network creates more referrals to the project.</li> </ul>	Performance Measures/Key Informant Interviews
<b><i>Did the project increase collaborative partnerships?</i></b>	<ul style="list-style-type: none"> <li>• Collaborative partnerships in all communities were strengthened as a result of the grant as commented by all five communities.</li> <li>• "I would say the that the major benefit of the PAF grant is that it has drawn more partners interested in working together," stated one community, but echoed by many others.</li> <li>• Sarpy County believed their biggest accomplishment was "bridging the gap" between Sarpy and Douglas Counties.</li> </ul>	<ul style="list-style-type: none"> <li>• New partnerships and collaborations noted were schools, hospitals.</li> <li>• Connecting the parenting and early childhood system with organizations serving young people.</li> <li>• Working with United Way as a new partner in Douglas County.</li> </ul>	<ul style="list-style-type: none"> <li>• NC observed collaborative partners still missing from most communities were housing and juvenile justice.</li> </ul>	Key Informant Interviews

<p><b><i>Did Families Thrive training improve provider services for young people with potential change to the “system” of providers?</i></b></p>	<ul style="list-style-type: none"> <li>• On average, 80% of participants rated each of the five modules as “very useful” or “extremely useful”.</li> <li>• Range of 85% to 92% for each premise reported that they often or always incorporate when working with young people the six premises of Families Thrive.</li> <li>• Range of 74% to 84% for each premise reported for premises incorporated into organization.</li> <li>• 87% perceived Families Thrive as positively impacting the systems level</li> <li>• Over 50% indicated the positive changes of “increased awareness of how providers fit into the overall system serving youth”, “meeting new service providers”, and/or “improved our collaboration” as a result of the training.</li> </ul>	<ul style="list-style-type: none"> <li>• Central Plains, the state’s primary coaching agency, embraced Youth and Families Thrive as a best practice.</li> <li>• NDHHS is interested in training all Family Service Specialists on Families Thrive.</li> <li>• The impact to the system through the training is somewhat evident where training has been fully embraced, such as Douglas County.</li> </ul>	<ul style="list-style-type: none"> <li>• All communities had opportunities to engage in Families Thrive training but at various saturation levels across the communities. “It still feels like we need new trainings to help,” commented one community.</li> <li>• Three of the five communities were unsure if they would continue to provide Family Thrives training in the community in the future.</li> <li>• Transitioning the training to virtual is a challenge for the trainers.</li> </ul>	<p>Families Thrive Follow-up Survey Results/ Key Informant Interviews</p>
<p><b><i>What services to expectant and parenting young people will be sustained?</i></b></p>	<ul style="list-style-type: none"> <li>• NC to sustain the work through Community Well-being funds based on priorities.</li> <li>• Encourage communities to continue social influencer program by funding positions locally</li> <li>• Locate funding to sustain the Maternity Leave program in Omaha.</li> <li>• Sustain, through various funding sources, the Sixpence position in the high school in Norfolk</li> <li>• Continue to offer educational classes to young people online in Lincoln County.</li> <li>• Host future community baby showers.</li> </ul>	<ul style="list-style-type: none"> <li>• Concept of working with the whole family with coaches and service providers will remain in communities regardless of funding.</li> </ul>	<ul style="list-style-type: none"> <li>• Financial sustainability of the project strategies is still unknown for many communities.</li> </ul>	<p>Key Informant Interviews</p>
<p><b><i>Was the project effective in changing people’s mental model in relationship to expectant and parenting young people?</i></b></p>	<ul style="list-style-type: none"> <li>• NDHHS and NC are both expanding their internal language to include young people as parents.</li> <li>• NC funding to community collaboratives will encompass young people as parents, if communities identify the population as a priority.</li> </ul>	<ul style="list-style-type: none"> <li>• Communities observed increased awareness by providers of the need to service both young people and their children – serving the whole family.</li> </ul>	<ul style="list-style-type: none"> <li>• Some communities reported seeing little change in community attitude regarding young parents.</li> <li>• The shift to be inclusive of both young person and child had already occurred in some communities prior to the project.</li> </ul>	<p>Key Informant Interviews</p>

<b><i>What were the long-term effects of changes occurring as a result of COVID-19?</i></b>	<ul style="list-style-type: none"> <li>Many communities expressed that the pandemic increased the effectiveness of the referral process.</li> <li>Increased connectedness of service providers by coming together to meet the needs of the young people in the communities.</li> </ul>	<ul style="list-style-type: none"> <li>Online application process will be continued in North Platte.</li> <li>Connection virtually with young people may continue as a positive outcome of the changes.</li> </ul>	<ul style="list-style-type: none"> <li>Increased concrete needs.</li> <li>Realigning budgeted dollars to meet the concrete needs of the young people.</li> </ul>	
<b><i>Did the project promote new programs and policies?</i></b>	<ul style="list-style-type: none"> <li>Maternity Leave Pilot Program in Douglas County.</li> <li>NDHHS changing written policy to consider young people that are parenting.</li> <li>NDHHS created a new Youth and Family Voice Choice Advocate position.</li> </ul>	<ul style="list-style-type: none"> <li>Douglas County plans to sustain the Maternity Leave program.</li> <li>NC reviewed internal policies to reflect language of young people and their children.</li> <li></li> </ul>	<ul style="list-style-type: none"> <li>To be considered for the Maternity Leave program, young women must have saved \$1,000 in order to receive the \$2,000 match.</li> </ul>	Key Informant Interviews
<b><i>Will the project be sustained?</i></b>	<ul style="list-style-type: none"> <li>NC integrated funding dollars to serve this population.</li> </ul>	<ul style="list-style-type: none"> <li>Coalitions have the options of budgeting with NC funds to sustain the project.</li> </ul>	<ul style="list-style-type: none"> <li>Locating funding to continue to service young parents.</li> </ul>	Key Informant Interviews

# NEBRASKA CHILDREN NEPG-PAF GRANT

## FINAL EVALUATION RESULTS

### YEARS 1 AND 2 – CUMULATIVE REPORT

#### PROJECT DESCRIPTION

The Nebraska Expectant and Parenting Grant (NEPG) work is being accomplished through the Pregnancy Assistance Fund (PAF), a two-year (July 2018 – June 2020), federal grant through the Office of Population Affairs (OPA). The Nebraska Department of Health and Human Services (NDHHS) – Public Health is the grantee but sub-contracted with Nebraska Children (NC) to implement the grant work plan.

The population of focus for the NEPG work is specifically aimed at expectant and parenting 14-25-year old's and their children who have endured trauma caused by involvement in the child welfare, juvenile justice, or other experiences harmful to positive development, such as homelessness, runaway, and sex trafficking/exploitation.

Generally, youth are served in the following way (as described by one interviewee): after the central navigator completes an intake on a youth, the intake is then forwarded on to a service provider that can offer coaching or case management, and/or link them to appropriate needed services. The new and additional piece provided by this grant, is to link services for the children as well.

NEPG work aims to affect change at both the individual and the system level. **Intended outcomes at the individual level:** NEPG work aims to

- Increase protective factors for expectant and parenting young adults
- Increase parenting effectiveness and parental resiliency
- Decrease parental stress
- Increase economic self-sufficiency for NEPG participants

**Intended outcomes at the system level:** NEPG work aims to

- Increase the sustainability of services for expectant and parenting young people within local community systems

**Longer term,** a key intended outcome of this work is to

- Reduce two-generation involvement in the child welfare system among children under age 5 years

The following methodologies (previously outlined in Table 1 in the Executive Summary) were employed for the final evaluation of the project:

1. Community Performance Measures/Dashboards
2. Families Thrive Evaluations and Surveys
3. Key Informant Interviews with Communities and NC Staff
4. Young Adult Parent Survey
5. Evaluation of Douglas County's Maternity Leave Pilot Program
6. Social Influencer Social Media Analytics

The process evaluation, and other data analysis, was contracted through an external evaluation organization, Schmeeckle Research, located in Lincoln, Nebraska.

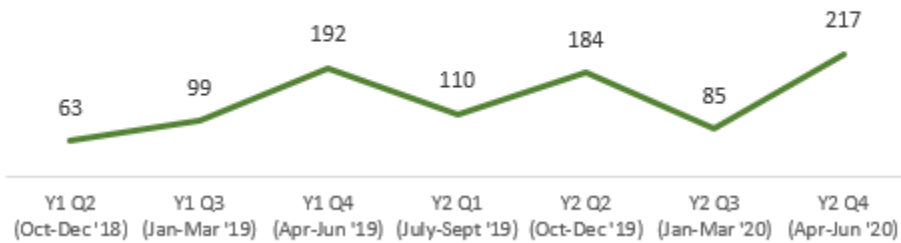
## PERFORMANCE MEASURES (DASHBOARD)

### PAF Grant Dashboard: Years 1 and 2 Combined (October 2018 – June 2020)

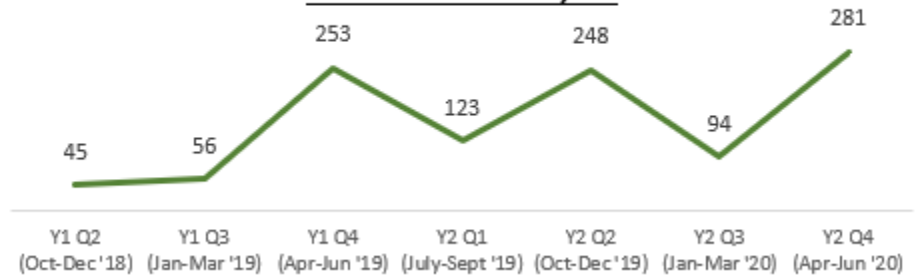
#### PAF Participants and Their Children

950 parents and 1,100 dependent children were served by PAF

**Figure 1. New PAF participants**  
**TOTAL PARTICIPANTS: 950**

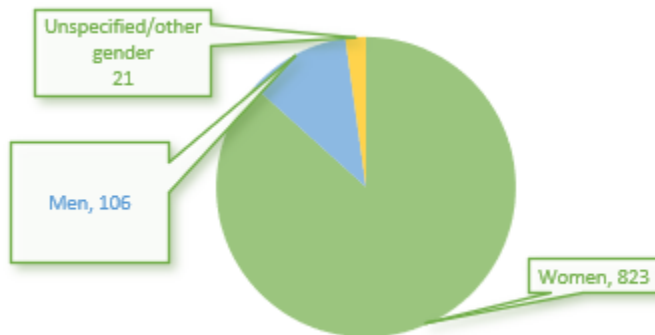


**Figure 2. Dependent children of new PAF participants**  
**TOTAL CHILDREN: 1,100**



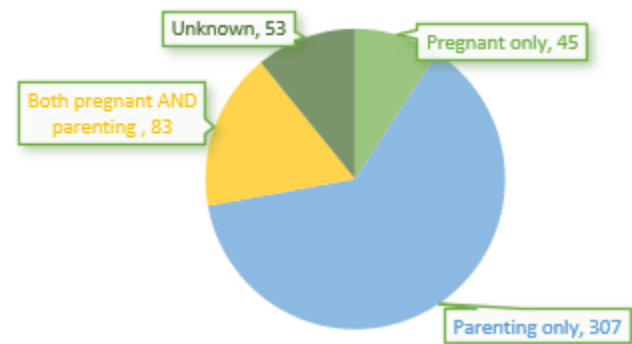
**Figure 3. PAF participants (years 1 and 2)**

87% of participants were women



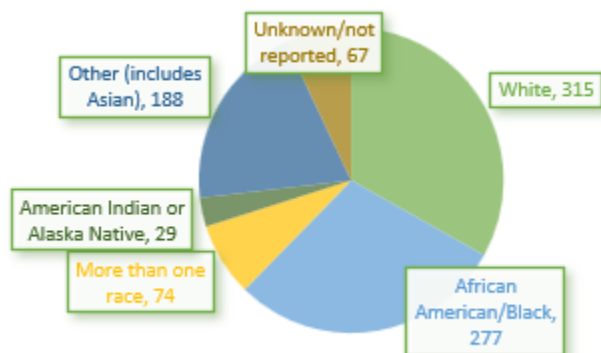
**Figure 4. PAF participants by parenting status (began tracking Oct. 2019)**

Approximately 30% of participants were expecting/parenting

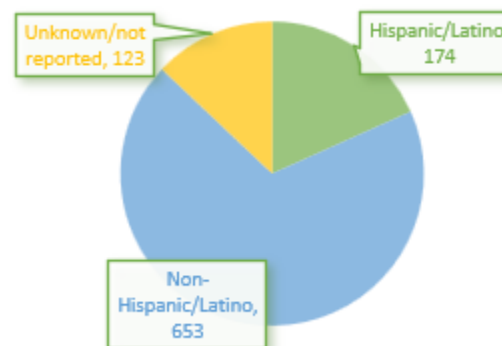


**Figure 5. PAF participants by race (years 1 and 2)**

*PAF participants were a highly diverse group of young people (approximately 67% non-white)*

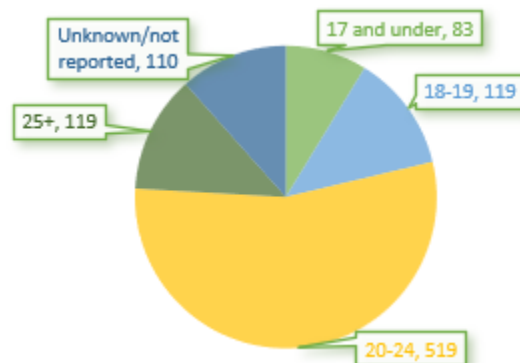


**Figure 6. PAF participants by ethnicity (years 1 and 2)**



**Figure 7. PAF participants by age (years 1 and 2)**

*76% of participants were age 20 or older*

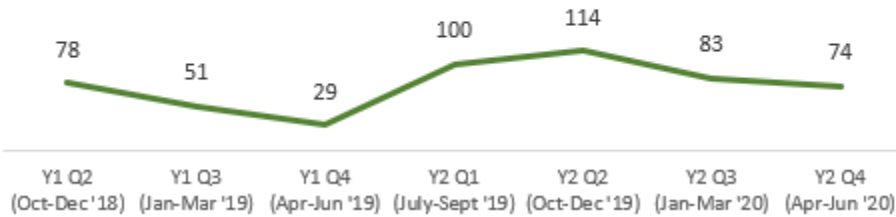


## **Program Partners and Grantee Staff**

*529 partners were actively engaged and 309 grantee and partner staff were trained*

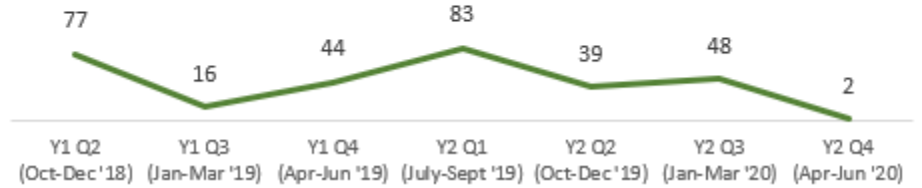
**Figure 8. Program partners actively engaged**

**TOTAL PARTNERS: 529**



**Figure 9. Grantee and partner staff trained to implement PAF or to work with expectant and parenting population**

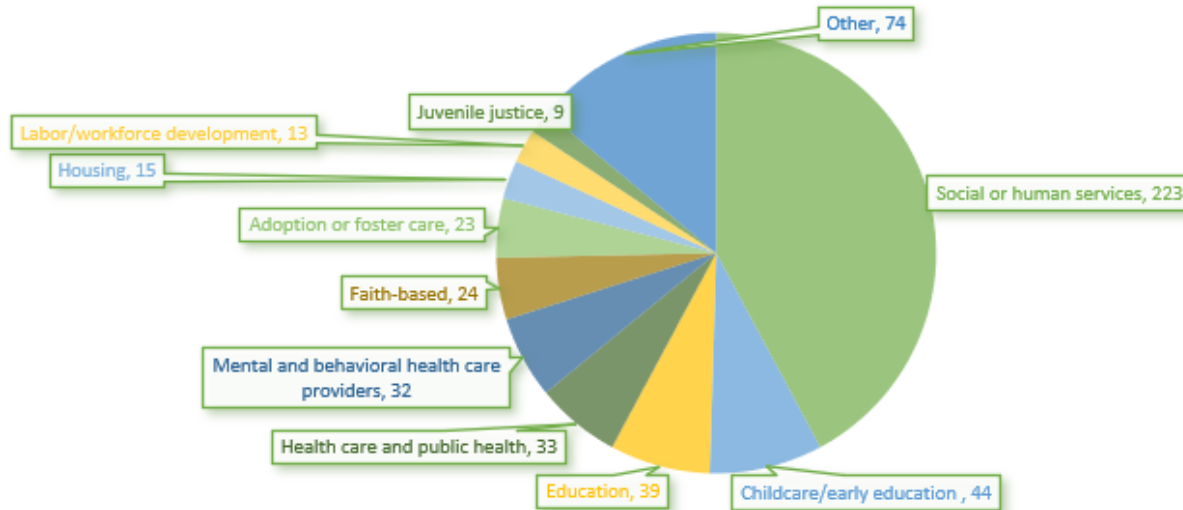
**TOTAL TRAINED: 309**



**Figure 10. Program partners actively engaged by sector (years 1 and 2)**

*Program partners were engaged across a wide array of sectors*

*Partners from the social or human services sector accounted for 42% of all partners*





**Community-Level Data**  
**October 2018 – June 2020**

**PAF Participants and their Children**

<b>Table 5</b>	<b>New PAF participants</b>							
	<b>Y1 Q2</b> Oct-Dec '18	<b>Y1 Q3</b> Jan-Mar '19	<b>Y1 Q4</b> Apr-Jun '19	<b>Y2 Q1</b> July-Sept '19	<b>Y2 Q2</b> Oct-Dec '19	<b>Y2 Q3</b> Jan-Mar '20	<b>Y2 Q4</b> Apr-Jun '20	<b>Total</b>
<b>Madison County</b>	24	7	7	?	29	11	25	<b>103</b>
<b>Lincoln County</b>	<i>5 or fewer</i>	14	32	8	30	14	28	<b>128</b>
<b>Douglas County</b>	37	78	153	58	47	26	115	<b>514</b>
<b>Sarpy County</b>	-	-	-	<i>5 or fewer</i>	<i>5 or fewer</i>	<i>5 or fewer</i>	24	<b>33</b>
<b>Lancaster County</b>	-	-	-	43	73	31	25	<b>172</b>

<b>Table 6</b>	<b>Dependent children of new PAF participants</b>							
	<b>Y1 Q2</b> Oct-Dec '18	<b>Y1 Q3</b> Jan-Mar '19	<b>Y1 Q4</b> Apr-Jun '19	<b>Y2 Q1</b> July-Sept '19	<b>Y2 Q2</b> Oct-Dec '19	<b>Y2 Q3</b> Jan-Mar '20	<b>Y2 Q4</b> Apr-Jun '20	<b>Total*</b>
<b>Madison County</b>	30	7	20	?	40	18	24	<b>139</b>
<b>Lincoln County</b>	6	23	45	7	35	17	29	<b>162</b>
<b>Douglas County</b>	9	26	188	55	34	22	159	<b>493</b>
<b>Sarpy County</b>	-	-	-	<i>5 or fewer</i>	9	<i>5 or fewer</i>	32	<b>45</b>
<b>Lancaster County</b>	-	-	-	60	130	34	37	<b>261</b>

<b>Table 7</b>	<b>PAF participants (October 2018 – June 2020)</b>				
	<b>Madison County</b>	<b>Lincoln County</b>	<b>Douglas County</b>	<b>Sarpy County</b>	<b>Lancaster County</b>
<b>Women</b>	90	116	426	32	159
<b>Men</b>	12	12	69	<i>5 or fewer</i>	12
<b>Transgender/other gender</b>	<i>5 or fewer</i>	0	19	0	<i>5 or fewer</i>
<b>Total</b>	<b>103</b>	<b>128</b>	<b>514</b>	<b>33</b>	<b>172</b>

<b>Table 8</b>	<b>PAF participants by parenting status (Oct. 2019* – June 2020)</b>				
	<b>Madison County</b>	<b>Lincoln County</b>	<b>Douglas County</b>	<b>Sarpy County</b>	<b>Lancaster County</b>
<b>Expecting only</b>	9	6	6	6	18
<b>Parenting only</b>	32	52	104	21	95
<b>Both expecting and parenting</b>	24	14	25	7	16
<b>Unknown</b>	0	0	53	0	0
<b>Total</b>	<b>65</b>	<b>72</b>	<b>188</b>	<b>34</b>	<b>129</b>

\*Began tracking Oct. 2019

<b>Table 9</b>	<b>PAF participants by race (Oct. 2018 – June 2020)</b>				
	<b>Madison County</b>	<b>Lincoln County</b>	<b>Douglas County</b>	<b>Sarpy County</b>	<b>Lancaster County</b>
<b>White</b>	62	101	69	17	66
<b>African American/Black</b>	<i>5 or fewer</i>	6	236	<i>5 or fewer</i>	25
<b>American Indian or Alaska Native</b>	8	<i>5 or fewer</i>	8	0	8
<b>Asian</b>	<i>5 or fewer</i>	0	0	<i>5 or fewer</i>	<i>5 or fewer</i>
<b>More than one race</b>	<i>5 or fewer</i>	0	26	<i>5 or fewer</i>	44
<b>Other</b>	23	11	115	9	27
<b>Unknown/not reported</b>	<i>5 or fewer</i>	<i>5 or fewer</i>	60	0	<i>5 or fewer</i>
<b>Total</b>	<b>103</b>	<b>128</b>	<b>514</b>	<b>33</b>	<b>172</b>

<b>Table 10</b>	<b>PAF participants by ethnicity (Oct. 2018 – June 2020)</b>				
	<b>Madison County</b>	<b>Lincoln County</b>	<b>Douglas County</b>	<b>Sarpy County</b>	<b>Lancaster County</b>
<b>Hispanic/Latino</b>	24	11	107	9	23
<b>Non-Hispanic/Latino</b>	76	112	337	23	105
<b>Unknown/not reported</b>	<i>5 or fewer</i>	<i>5 or fewer</i>	70	<i>5 or fewer</i>	44
<b>Total</b>	<b>103</b>	<b>128</b>	<b>514</b>	<b>33</b>	<b>172</b>

<b>Table 11</b>	<b>PAF participants by age (Oct. 2018 – June 2020)</b>				
	<b>Madison County</b>	<b>Lincoln County</b>	<b>Douglas County</b>	<b>Sarpy County</b>	<b>Lancaster County</b>
<b>17 and under</b>	9	<i>5 or fewer</i>	24	9	39
<b>18-19</b>	18	9	58	<i>5 or fewer</i>	31
<b>20-24</b>	62	94	250	20	93
<b>25+</b>	14	19	76	<i>5 or fewer</i>	9
<b>Unknown/not reported</b>	0	<i>5 or fewer</i>	106	0	0
<b>Total</b>	<b>103</b>	<b>128</b>	<b>514</b>	<b>33</b>	<b>172</b>

***Program Partners and Grantee Staff***

<b>Table 12</b>	<b>Program partners actively engaged</b>							
	<b>Y1 Q2</b> Oct-Dec '18	<b>Y1 Q3</b> Jan-Mar '19	<b>Y1 Q4</b> Apr-Jun '19	<b>Y2 Q1</b> July-Sept '19	<b>Y2 Q2</b> Oct-Dec '19	<b>Y2 Q3</b> Jan-Mar '20	<b>Y2 Q4</b> Apr-Jun '20	<b>Total</b>
<b>Madison County</b>	11	4	8	?	14	10	6	<b>53</b>
<b>Lincoln County</b>	12	17	6	44	18	23	24	<b>144</b>
<b>Douglas County</b>	55	30	15	16	7	9	11	<b>143</b>
<b>Sarpy County</b>	-	-	-	20	66	39	33	<b>158</b>
<b>Lancaster County</b>	-	-	-	20	9	2	0	<b>31</b>

<b>Table 13</b>	<b>Grantee and partner staff trained to implement PAF or to work with expectant and parenting population</b>							
	<b>Y1 Q2</b> Oct-Dec '18	<b>Y1 Q3</b> Jan-Mar '19	<b>Y1 Q4</b> Apr-Jun '19	<b>Y2 Q1</b> July-Sept '19	<b>Y2 Q2</b> Oct-Dec '19	<b>Y2 Q3</b> Jan-Mar '20	<b>Y2 Q4</b> Apr-Jun '20	<b>Total</b>
<b>Madison County</b>	17	3	0	?	0	32	0	<b>52</b>
<b>Lincoln County</b>	10	13	2	0	0	0	0	<b>25</b>
<b>Douglas County</b>	69	0	23	77	0	13	2	<b>184</b>
<b>Sarpy County</b>	-	-	-	0	16	3	0	<b>19</b>
<b>Lancaster County</b>	-	-	-	6	23	0	0	<b>29</b>

<b>Table 14</b>	<b>Program partners actively engaged by sector (Oct. 2018 – June 2020)</b>					
	<b>Madison County</b>	<b>Lincoln County</b>	<b>Douglas County</b>	<b>Sarpy County</b>	<b>Lancaster County</b>	<b>TOTAL</b>
<b>1. Social or human services</b>	13	63	79	54	14	<b>223</b>
<b>2. Other</b>	3	26	18	22	5	<b>74</b>
<b>3. Childcare/early education</b>	3	21	11	9	0	<b>44</b>
<b>4. Education</b>	3	7	3	23	3	<b>39</b>
<b>5. Health care and public health</b>	15	7	9	4	0	<b>35</b>
<b>6. Mental and behavioral health care providers</b>	11	6	0	6	7	<b>30</b>
<b>7. Faith-based</b>	0	4	1	19	0	<b>24</b>
<b>8. Adoption or foster care</b>	0	2	18	3	0	<b>23</b>
<b>9. Housing</b>	0	6	2	5	2	<b>15</b>
<b>10. Labor/workforce development</b>	0	2	2	9	0	<b>13</b>
<b>11. Juvenile justice</b>	5	0	0	4	0	<b>9</b>
<b>Total</b>	<b>53</b>	<b>144</b>	<b>143</b>	<b>158</b>	<b>31</b>	<b>529</b>

## FAMILIES THRIVE RESULTS

### FAMILIES THRIVE TRAININGS

#### Community Trainings – Modules

Families Thrive trainings were held between October 2018 and March 2020 in all five cohort communities. Table 15 shows the number of trainings by community. Planned trainings were cancelled due to Covid-19.

<b>Table 15</b>	<b>Number of trainings conducted by site</b>		
	<b>Module 1</b>	<b>Modules 2 and 3</b>	<b>Modules 4 and 5</b>
<b>Lancaster County</b>	2	2	1
<b>Douglas County</b>	2	3	3
<b>Lincoln County</b>	3	1	1
<b>Madison County</b>	2	1	1
<b>Sarpy County</b>	1	1	1

#### Training Participants

A total of 176 unique individuals across the three communities participated in at least one of the five training modules (Table 16).

<b>Table 16</b>	<b>Training participants by module and site</b>						
	<b>Module 1</b>	<b>Module 2</b>	<b>Module 3</b>	<b>Module 4</b>	<b>Module 5</b>	<b>Number of unique individuals receiving training</b>	<b>% Completing all 5 modules*</b>
<b>Lancaster County</b>	27	26	26	6	6	30	20.0%
<b>Douglas County</b>	50	51	42	45	45	66	68.2%
<b>Lincoln County</b>	24	19	19	13	13	25	52.0%
<b>Madison County</b>	35	12	12	9	9	36	25.0%
<b>Sarpy County</b>	17	17	17	16	16	19	84.2%
<b>Total</b>	<b>153</b>	<b>125</b>	<b>116</b>	<b>89</b>	<b>89</b>	<b>176</b>	<b>50.6%</b>

\*Assumes that those who completed Module 5, previously completed Modules 1-4.

Table 17 presents the number of participants and organizations by community who participated in at least one of the five Families Thrive Training Modules. A total of 58 unique organizations were represented by the 176 training participants.

<b>Table 17 Organizations receiving training by site*</b>				
<b>Lancaster County</b>	<b>Douglas County</b>	<b>Lincoln County</b>	<b>Madison County</b>	<b>Sarpy County</b>
<b>30 participants 6 organizations</b>	<b>66 participants 19 organizations</b>	<b>25 participants 15 organizations</b>	<b>36 participants 18 organizations</b>	<b>19 participants 7 organizations</b>
<ul style="list-style-type: none"> <li>• CEDARS</li> <li>• Family Service</li> <li>• Lincoln Public Schools</li> <li>• Lutheran Family Services</li> <li>• NCFE</li> <li>• UNL</li> </ul>	<ul style="list-style-type: none"> <li>• Boys Town</li> <li>• Central Plains</li> <li>• Charles Drew Health Center</li> <li>• Child Saving Institute</li> <li>• DHHS</li> <li>• GOALS</li> <li>• LCCNO</li> <li>• Lutheran Family Services</li> <li>• NCFE</li> <li>• Nebraska Children's Home Society</li> <li>• Nebraska Early Childhood Collaborative</li> <li>• NECC/TYPP</li> <li>• Omaha Healthy Start</li> <li>• Omaha Home for Boys</li> <li>• Project Everlast</li> <li>• Project Harmony</li> <li>• PromiseShip</li> <li>• Region6</li> <li>• Visiting Nurse Association</li> </ul>	<ul style="list-style-type: none"> <li>• Boys Town</li> <li>• Central Plains</li> <li>• Community Action</li> <li>• Compass</li> <li>• DHHS</li> <li>• Families First</li> <li>• Guardian Light</li> <li>• Independence Rising</li> <li>• NCFE</li> <li>• PALS</li> <li>• Region II</li> <li>• Saint Francis</li> <li>• Salvation Army</li> <li>• West Central Health Dept.</li> <li>• Women's Resource Center</li> </ul>	<ul style="list-style-type: none"> <li>• CASA</li> <li>• Central Plains</li> <li>• DHHS</li> <li>• ESU 1</li> <li>• Good Life Counseling</li> <li>• Indian Health Center</li> <li>• Midtown Health Center</li> <li>• Nebraska's Children's Home Society</li> <li>• Nebraska VR</li> <li>• Norfolk Family Coalition</li> <li>• Northeast NE Health Dept.</li> <li>• Northeast NE Community Action Partnership</li> <li>• Norfolk Public Schools</li> <li>• Oasis Counseling</li> <li>• Ponce Tribe of NE</li> <li>• Professional Partners</li> <li>• Region 4</li> <li>• The Zone</li> </ul>	<ul style="list-style-type: none"> <li>• All Communities Outreach Service</li> <li>• BSCC</li> <li>• Lift Up Sarpy</li> <li>• ESU 3 Head Start</li> <li>• Rescare</li> <li>• Resurrection Lutheran Church</li> <li>• Sarpy/Cass Health Dept.</li> </ul>
<b>Total number of organizations (unduplicated): 58</b> <b>Total number of training participants (unduplicated): 176</b>				

\*Does not include "new trainer" trainings.

Table 18 shows the number of individuals and their organizations who were trained as new trainers in Families Thrive. The train-the-trainer events all occurred during Year 1 of the grant.

<b>Table 18    New trainers receiving training by site (Year 1 only)</b>			
<b>Douglas County</b>	<b>Lincoln County</b>	<b>Madison County</b>	<b>Other Areas</b>
<b>4 new trainers</b> <b>3 organizations:</b> <ul style="list-style-type: none"> <li>• Central Plains Center</li> <li>• Family Advocate and Consultant</li> <li>• PromiseShip</li> </ul>	<b>2 new trainers</b> <b>1 organization:</b> <ul style="list-style-type: none"> <li>• Guardian Light</li> </ul>	<b>2 new trainers</b> <b>2 organizations:</b> <ul style="list-style-type: none"> <li>• Nebraska Children’s Home Society</li> <li>• Norfolk Family Coalition</li> </ul>	<b>18 new trainers</b> <b>15 organizations:</b> <ul style="list-style-type: none"> <li>• Central Plains Center – Statewide</li> <li>• Family Service – Lincoln</li> <li>• Fremont Family Coalition - Fremont</li> <li>• FYI Center - Fairbury</li> <li>• Gage County Diversion – Hallam</li> <li>• Kearney Public Schools – Kearney</li> <li>• Lutheran Family Services – Fremont</li> <li>• NC – Statewide</li> <li>• NE Indian Child Welfare Coalition – Native communities</li> <li>• Nebraska Children’s Home Society – Statewide</li> <li>• Panhandle Partnership – Scottsbluff</li> <li>• Society of Care – Native communities</li> <li>• University of NE Extension – McCook</li> <li>• Young Adult Learner – Lincoln</li> <li>• System of Care – Statewide</li> </ul>
<b>Total number of unique organizations (unduplicated): 18</b> <b>Total number of new trainers: 26</b>			

## RETROSPECTIVE SURVEY RESULTS

A retrospective knowledge-based survey was conducted at the end of each of training models (Modules 4 and 5 have a single survey covering both modules). Participants reported their knowledge of the various topics covered in each module varied from fairly low to fairly high before entering the training. Participants’ perceptions of their knowledge of the topics covered in the training increased substantially. For each survey item across all of the surveys, the vast majority (95% or higher) rated their knowledge/understanding of the topic in question as “quite a bit” or “very knowledgeable” after completing the training.

On a scale from 0 to 4 (with 4 being “very knowledgeable” or “a great deal”), the average scores on the retrospective surveys increased as follows:

- 0.9 point average increase for Module 1
- 1.1 point average increase for Module 2
- 1.2 point average increase for Module 3
- 1.0 point average increase for Modules 4 and 5

The remaining tables in this section present the quantitative results from the retrospective surveys, as well as a selection of open-ended comments provided by the training participants. Note that in Year 2 of the project, relatively minor revisions were made to the retrospective

survey items. Most survey items contain data from the entirety of the project. A small handful only contain data from Year 2.

**Module 1: Child, Adolescent, and Parenting Development**

<b>Table 19</b>	<b>I have an understanding of the Family Systems model, and the impact of family rules, communication style, and beliefs. (n=124)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	5.6%	21.0%	25.0%	35.5%	12.9%	<b>2.3</b>	<b>48.4%</b>
<b>After the training</b>	0.0%	0.0%	3.2%	44.4%	52.4%	<b>3.5</b>	<b>96.8%</b>

<b>Table 20</b>	<b>I have an understanding of the importance of attachment and ways to support young parents in promoting attachment with their child. (n=124)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.8%	5.6%	14.5%	41.9%	37.1%	<b>2.3</b>	<b>79.0%</b>
<b>After the training</b>	0.0%	0.0%	0.8%	25.0%	74.2%	<b>3.5</b>	<b>99.2%</b>

<b>Table 21</b>	<b>I have an understanding of adolescent and child brain development, and an understanding of ways that caregivers can be supportive of that development. (n=124)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.8%	8.1%	16.9%	48.4%	25.8%	<b>2.9</b>	<b>74.2%</b>
<b>After the training</b>	0.0%	0.0%	0.8%	33.1%	66.1%	<b>3.7</b>	<b>99.2%</b>

<b>Table 22</b>	<b>I have an understanding of the impact of trauma on the individual and an understanding of the concept of healing engagement. (n=124)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	2.4%	5.6%	19.4%	41.9%	30.6%	<b>2.9</b>	<b>72.5%</b>
<b>After the training</b>	0.0%	0.8%	0.8%	31.5%	66.9%	<b>3.7</b>	<b>98.4%</b>

<b>Table 23</b>	<b>I am able to talk comfortably with someone I am working with about how biases have impacted their life. (n=33)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.0%	3.0%	12.1%	48.5%	36.4%	<b>3.2</b>	<b>84.9%</b>
<b>After the training</b>	0.0%	0.0%	9.1%	33.3%	57.6%	<b>3.5</b>	<b>90.9%</b>



<b>Table 24</b>	<b>I have an understanding of childhood and youth developmental needs and the importance of supporting those needs, especially when the youth is a parent. (n=108)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	0.9%	5.6%	20.4%	48.1%	25.0%	<b>2.9</b>	<b>73.1%</b>
<b>After the training</b>	0.0%	0.0%	1.9%	29.6%	68.5%	<b>3.7</b>	<b>98.1%</b>

<b>Table 25</b>	<b>I understand that previous experiences may have impacted a person's ability to build relationships. (n=33)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	0.0%	3.0%	6.1%	18.2%	72.7%	<b>3.6</b>	<b>90.9%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	15.2%	84.8%	<b>3.9</b>	<b>100%</b>

<b>Table 26</b>	<b>I understand the Families Thrive premises and have gained awareness of ways in which to apply them in my work. (n=108)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	11.1%	17.6%	26.9%	26.9%	17.6%	<b>2.2</b>	<b>44.5%</b>
<b>After the training</b>	0.0%	0.0%	1.9%	30.6%	67.6%	<b>3.7</b>	<b>98.2%</b>

## **Module 2: Social-Emotional Competency**

<b>Table 27</b>	<b>I have an understanding of the five domains of social-emotional learning. (n=89)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	5.6%	19.1%	40.4%	29.2%	5.6%	<b>2.1</b>	<b>34.8%</b>
<b>After the training</b>	0.0%	0.0%	2.2%	29.2%	68.5%	<b>3.7</b>	<b>97.7%</b>

<b>Table 28</b>	<b>I have an understanding of the relationship between social-emotional competency and success at school and in work. (n=89)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	1.1%	6.7%	31.5%	43.8%	16.9%	<b>2.7</b>	<b>60.7%</b>
<b>After the training</b>	0.0%	0.0%	1.1%	23.6%	75.3%	<b>3.7</b>	<b>98.9%</b>

<b>Table 29</b>	<b>I can identify ways that parents and others need to support the social-emotional competency of children and youth. (n=89)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.0%	6.7%	32.6%	43.8%	16.9%	<b>2.7</b>	<b>60.7%</b>
<b>After the training</b>	0.0%	0.0%	1.1%	16.9%	82.0%	<b>3.8</b>	<b>98.9%</b>

<b>Table 30</b>	<b>I have an understanding of the impact of trauma and its connection to the components of social-emotional competencies. (n=89)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	1.1%	3.4%	23.6%	43.8%	28.1%	<b>2.9</b>	<b>71.9%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	19.1%	80.9%	<b>3.8</b>	<b>100%</b>

<b>Table 31</b>	<b>I have an understanding of the importance of self-awareness and self-care in order to support the social-emotional competency of those I work with. (n=72)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	2.8%	12.5%	30.6%	38.9%	15.3%	<b>2.5</b>	<b>54.2%</b>
<b>After the training</b>	0.0%	1.4%	1.4%	34.7%	62.5%	<b>3.6</b>	<b>97.2%</b>

<b>Table 32</b>	<b>I have an understanding of the development of social-emotional skills in youth and ways that I can support that development. (n=69)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.0%	11.6%	29.0%	42.0%	17.4%	<b>2.7</b>	<b>59.4%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	37.7%	62.3%	<b>3.6</b>	<b>100%</b>

<b>Table 33</b>	<b>I have ways of recognizing "social-emotional" gaps and strategies as to how I might address those. (n=69)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.0%	13.0%	33.3%	42.0%	11.6%	<b>2.5</b>	<b>53.6%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	42.0%	58.0%	<b>3.6</b>	<b>100%</b>

### Module 3: Resilience

<b>Table 34</b>	<b>I have an understanding of the impact of the family of origin on the development of resilience (n=76)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.0%	11.8%	25.0%	46.1%	17.1%	<b>2.7</b>	<b>63.2%</b>
<b>After the training</b>	0.0%	0.0%	1.3%	26.3%	72.4%	<b>3.7</b>	<b>98.7%</b>

<b>Table 35</b>	<b>I can identify characteristics of resilient parents (n=76)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.0%	9.2%	28.9%	35.5%	26.3%	<b>2.8</b>	<b>61.8%</b>
<b>After the training</b>	0.0%	0.0%	1.3%	22.4%	76.3%	<b>3.8</b>	<b>98.7%</b>

<b>Table 36</b>	<b>I can identify four factors that build resilience in children (n=76)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	2.6%	17.1%	26.3%	48.7%	5.3%	<b>2.4</b>	<b>54.0%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	32.9%	67.1%	<b>3.7</b>	<b>100%</b>

<b>Table 37</b>	<b>I can identify four factors that build resilience in adolescents (n=76)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	3.9%	15.8%	31.6%	42.1%	6.6%	<b>2.3</b>	<b>48.7%</b>
<b>After the training</b>	0.0%	0.0%	1.3%	31.6%	67.1%	<b>3.7</b>	<b>98.7%</b>

<b>Table 38</b>	<b>I can identify three factors that assist adolescents in building parental resilience (n=76)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	9.2%	15.8%	23.7%	44.7%	6.6%	<b>2.2</b>	<b>51.3%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	39.5%	60.5%	<b>3.6</b>	<b>100%</b>

<b>Table 39</b>	<b>I understand the impact of bias in building resilience skills (n=59)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	3.4%	13.6%	28.8%	39.0%	15.3%	<b>2.5</b>	<b>54.3%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	33.9%	66.1%	<b>3.7</b>	<b>100%</b>

<b>Table 40</b>	<b>I can identify at least 10 specific strategies I can use in promoting resilience (n=59)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	3.4%	25.4%	33.9%	32.2%	5.1%	<b>2.1</b>	<b>37.3%</b>
<b>After the training</b>	0.0%	0.0%	3.4%	40.7%	55.9%	<b>3.5</b>	<b>96.6%</b>

<b>Table 41</b>	<b>I understand that self-knowledge and self-care are not a luxury but are crucial if I am to do this work well (n=21)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	0.0%	4.8%	14.3%	42.9%	38.1%	<b>3.1</b>	<b>81.0%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	4.8%	95.2%	<b>4.0</b>	<b>100%</b>

<b>Table 42</b>	<b>I understand the six premises supporting the Families Thrive approach and have a plan to support implementing those premises in my work (n=21)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	0.0%	23.8%	23.8%	42.9%	9.5%	<b>2.4</b>	<b>52.4%</b>
<b>After the training</b>	0.0%	0.0%	4.8%	14.3%	81.0%	<b>3.8</b>	<b>95.3%</b>

### **Modules 4 and 5: Social Connections & Concrete Supports in Time of Need**

<b>Table 43</b>	<b>I have an understanding of what each age group needs from social connections. (n=79)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	0.0%	7.6%	31.6%	57.0%	3.8%	<b>2.6</b>	<b>60.8%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	30.4%	69.6%	<b>3.7</b>	<b>100%</b>

<b>Table 44</b>	<b>I have an understanding of the impact of trauma on developing social connections. (n=79)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	0.0%	6.3%	19.0%	48.1%	26.6%	<b>3.0</b>	<b>74.7%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	19.0%	81.0%	<b>3.8</b>	<b>100%</b>

<b>Table 45</b>	<b>I am aware of and involved in community efforts to assist all service systems in becoming more relationship based. (n=23)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.0%	4.3%	34.8%	52.2%	8.7%	<b>2.7</b>	<b>60.9%</b>
<b>After the training</b>	0.0%	0.0%	4.3%	47.8%	47.8%	<b>3.4</b>	<b>95.6%</b>

<b>Table 46</b>	<b>I have an understanding of the skills needed for self-advocacy. (n=79)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.0%	10.1%	13.9%	55.7%	20.3%	<b>2.9</b>	<b>76.0%</b>
<b>After the training</b>	0.0%	0.0%	1.3%	20.3%	78.5%	<b>3.8</b>	<b>98.8%</b>

<b>Table 47</b>	<b>I can explain transformational relationships and know the challenges of such relationships. (n=79)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	0.0%	13.9%	39.2%	39.2%	7.6%	<b>2.4</b>	<b>46.8%</b>
<b>After the training</b>	0.0%	0.0%	1.3%	34.2%	64.6%	<b>3.6</b>	<b>98.8%</b>

<b>Table 48</b>	<b>I can describe the attributes of an agency or organization which excels in building transformational relationships (n=63)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	6.3%	14.3%	28.6%	41.3%	9.5%	<b>2.3</b>	<b>50.8%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	33.3%	66.7%	<b>3.7</b>	<b>100%</b>

<b>Table 49</b>	<b>I understand the connection between racism, both explicit and implicit, and trauma. (n=63)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	<b>% "Quite a bit" or "Very knowledgeable"</b>
<b>Before the training</b>	1.6%	9.5%	20.6%	33.3%	34.9%	<b>2.9</b>	<b>68.2%</b>
<b>After the training</b>	0.0%	1.6%	0.0%	31.7%	66.7%	<b>3.6</b>	<b>98.4%</b>

<b>Table 50</b>	<b>I can articulate the reason parents need to support social connection for their child and can identify some ways I can help them do so. (n=63)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	1.6%	4.8%	15.9%	60.3%	17.5%	<b>2.9</b>	<b>77.8%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	19.0%	81.0%	<b>3.8</b>	<b>100%</b>

<b>Table 51</b>	<b>I understand how the Families Thrive premises support our work of assisting youth and families in supporting connections. (n=63)</b>						
	<b>0</b> None	<b>1</b> A little	<b>2</b> Some	<b>3</b> Quite a bit	<b>4</b> Very knowledgeable	<b>Average (0-4)</b>	% "Quite a bit" or "Very knowledgeable"
<b>Before the training</b>	9.5%	11.1%	20.6%	47.6%	11.1%	<b>2.4</b>	<b>58.7%</b>
<b>After the training</b>	0.0%	0.0%	0.0%	15.9%	84.1%	<b>3.8</b>	<b>100%</b>

## POST-TRAINING EVALUATION RESULTS (YEAR 2 ONLY)

In Year 2, a new training evaluation was used for the Families Thrive trainings. Table 52 shows the number of training evaluations that were collected for each module.

<b>Table 52</b>	<b>Number of Training Evaluations completed by Module</b>			
	<b>Module 1</b>	<b>Module 2</b>	<b>Module 3</b>	<b>Modules 4 &amp; 5</b>
	17	9	0	15

The training evaluation survey results illustrate that the Families Thrive Trainings were received very positively (Table 53).

<b>Table 53</b>	<b>Training evaluation survey items</b>					
	<b>Strongly disagree</b>	<b>Disagree</b>	<b>Neither agree nor disagree</b>	<b>Agree</b>	<b>Strongly agree</b>	<b>Average (1-5)</b>
<b>1. I am satisfied with today's training. (n=41)</b>	0.0%	0.0%	2.4%	48.8%	48.8%	<b>4.5</b>
<b>2. The information was presented in a way that was easy for me to understand. (n=41)</b>	0.0%	0.0%	2.4%	36.6%	61.0%	<b>4.6</b>
<b>3. I will be able to apply what I learned in my work. (n=41)</b>	0.0%	0.0%	2.4%	43.9%	53.7%	<b>4.5</b>
<b>4. I felt respected and valued as a participant. (n=41)</b>	0.0%	0.0%	2.4%	19.5%	78.0%	<b>4.7</b>
<b>5. The training was a good use of my time. (n=41)</b>	0.0%	0.0%	2.4%	43.9%	53.7%	<b>4.5</b>
<b>6. The trainer was knowledgeable on the subject matter. (n=41)</b>	0.0%	0.0%	2.4%	39.0%	58.8%	<b>4.6</b>
<b>7. I am involved in implementing the Families Thrive Guiding Premises and the Protective and Promotive Factors. (n=40)</b>	0.0%	0.0%	5.0%	45.0%	50.0%	<b>4.5</b>

Open-ended comments from the training evaluations are provided in Tables 54 and 55.

<b>Table 54</b>	<b>In the training today, what was most helpful?</b>
<b>Module 1</b> <ul style="list-style-type: none"> <li>• Awareness of issues caused by trauma. Reminders to implement strengths rather than weaknesses.</li> <li>• I felt that the discussion was really helpful - space was created for that.</li> <li>• Diagrams, video clips, and breaking into groups to discuss material</li> <li>• I felt excited that this training was exactly how we train our staff. It's encouraging to know that there are other people/organizations that understand how important this approach is.</li> <li>• People sharing their personal experiences.</li> <li>• The information was informative and well-presented. Enjoyed the small group discussions/activities to help really understand/learn better.</li> <li>• Learning about brain development and how it is affected and the idea of finding a strength for those I work with.</li> </ul>	

- The small groups and experiences from those that offered to share their stories.
- The discussion about trauma and how it affects the brain.
- Learning about the strengths-based approach.
- About the brain
- Videos
- Having the opportunity to engage via group discussions. Learning everyone's personal experiences was beneficial.

## **Module 2**

- Doing the full case - taking a step back and looking at bigger practice.
- I learned more about the 5 domains of social-emotional.
- Providing videos that shared helpful tips to help children manage their emotions and giving us real life scenarios that we can practice with our professions.
- The interactive, hands-on activities.
- Being able to work in small groups and brainstorm ideas and scenarios on our own.
- The exercises were clarifying!

## **Module 3**

No training evaluations completed

## **Modules 4 & 5**

- The relationships and connections with other participants.
- Always live activities.
- Breakout sessions/conversations.
- The stages of relationship building. This will be something that I will share with my families in the future.
- Hearing examples from other people.
- The exercises
- The breakdown of each protective factor and how to relate it to outside situations and resources.
- I think it was helpful information learning what are social connections and concrete supports and the importance of them. As well as how I can use those to help clients.
- The tying of the 6 premises with the 5 protective factors.
- The scenarios.
- Relationship activity - connectedness
- Handouts



Table 55	What is one thing you would have done to improve this training?
<p><b>Module 1</b></p> <ul style="list-style-type: none"> <li>• Keto-friendly snacks. :)</li> <li>• More group interaction.</li> <li>• Make it longer. Was great info. Sad had to skip some. Could use maybe 1 or 2 breaks for bathroom.</li> <li>• More conversations and hands on interaction.</li> <li>• Maybe a few more activities.</li> </ul> <p><b>Module 2</b> No comments provided</p> <p><b>Module 3</b> No training evaluations completed</p> <p><b>Modules 4 &amp; 5</b></p> <ul style="list-style-type: none"> <li>• More conversations/discussions with other participants.</li> <li>• Freely discussed all the topics.</li> <li>• Sometimes it was difficult to follow handouts and to find them.</li> <li>• Time management could be improved upon (if I had to make a critique). Overall, very good training.</li> <li>• More group participation vs. always breaking up in partners.</li> <li>• Having more engaging activities and role-playing.</li> <li>• More videos or hands-on activities. Not make the day so long.</li> <li>• I think it would have been useful to stress the link between promotive factors and premises earlier on in the training. Also, while the trainers were very knowledgeable on the matter, it was uncomfortable to have a group of (what appear to be) white women talk about racism to a group of primarily women of color.</li> <li>• A lot of info -maybe break the info up more and allow more short breaks.</li> </ul>	

## FOLLOW-UP SURVEY RESULTS

A follow-up survey was administered online in September 2019 and May 2020 with all past participants of Families Thrive. A total of 69 responses were collected out of a possible 157 invitations, making for a response rate of 43.9% (Table 56).

<b>Table 56</b>	<b>Response Rate</b>			
<b>Number of invitations sent</b>	<b>Bounced e-mails</b>	<b>Number of invitations received</b>	<b>Number of respondents</b>	<b>Response rate</b>
164	7	157	69	<b>43.9%</b>

### **Respondent Demographics**

Respondent demographics are detailed in Tables 57 through 614. The vast majority (84.1%) of respondents reported completing all five modules.

<b>Table 57</b>	<b>Where did you receive Families Thrive Training? (n=68)</b>			
<b>Douglas County (Omaha)</b>	<b>Lincoln County (North Platte)</b>	<b>Madison County (Norfolk)</b>	<b>Sarpy County (Bellevue and Papillion)</b>	<b>Lancaster County (Lincoln)</b>
42.7%	8.8%	19.1%	13.2%	16.2%

<b>Table 58</b>	<b>Which modules did you complete? (select all that apply) (n=69)</b>	
<b>Completed all five modules</b>	<b>Did not complete all five modules</b>	<b>Uncertain</b>
84.1%	10.1%	5.8%

<b>Table 59</b>	<b>Job position/title (n=69)</b>		
<b>Caseworker/ Direct support</b>	<b>Administrator/ Supervisor/ Executive Director</b>	<b>Mental health provider</b>	<b>Other</b>
60.9%	17.4%	10.1%	11.6%

Table 60	Number of years in current position (n=69)			
Less than 1 year		1-2 years	3-5 years	More than 5 years
16.2%		27.9%	26.5%	29.5%

<b>Table 61</b>	<b>Are you aware of any other staff trained in your organization on Families Thrive in the past year? (n=69)</b>		
	<b>Yes</b>	<b>No</b>	<b>Unknown</b>
	78.3%	18.8%	2.9%

### **Survey results**

In terms of “perceived” usefulness, there was quite a bit of similarity throughout all of the modules. All five modules were perceived as being very or extremely useful by a strong majority of participants (Table 62).

<b>Table 62</b>	<b>Please rate the usefulness of each module of Families Thrive in which you participated in terms of working with young adults and families.</b>					
	<b>Not useful</b>	<b>Slightly useful</b>	<b>Moderately useful</b>	<b>Very useful</b>	<b>Extremely useful</b>	<b>% “Very or extremely useful”</b>
<b>Module 1: Knowledge of Child and Youth Development (n=62)</b>	3.2%	1.6%	14.5%	46.8%	33.9%	<b>80.7%</b>
<b>Module 2: Social-Emotional Competence in Youth (n=56)</b>	1.8%	3.6%	10.7%	44.6%	39.3%	<b>83.9%</b>
<b>Module 3: Resilience (n=54)</b>	1.9%	5.6%	16.7%	37.0%	38.9%	<b>75.9%</b>
<b>Module 4: Social Connections (n=55)</b>	1.8%	3.6%	12.7%	41.8%	40.0%	<b>81.8%</b>
<b>Module 5: Concrete Supports (n=56)</b>	3.6%	3.6%	14.3%	46.4%	32.1%	<b>78.6%</b>

Families Thrive is based on six premises. Respondents were asked how often **they** incorporate these premises when working with young adults and families. The vast majority of respondents reported that they “often” or “always” incorporate each of the six premises in their work (Table 63).

<b>Table 63</b>	Families Thrive is comprised of six premises. At the individual level, how often do you feel that <u>you</u> incorporate these premises when working with young adults and families?					
	Never	Rarely	Sometimes	Often	Always	% “Often” or “Always”
<b>1. Premise 1:</b> People are best supported by practitioners who understand and recognize the importance of self-awareness and self-care in their own professional practice. (n=62)	1.6%	1.6%	4.8%	51.6%	40.3%	<b>91.9%</b>
<b>2. Premise 2:</b> People are best supported by practitioners who are aware of the impact of traumatic stress and understand the need to use trauma informed methods. (n=61)	1.6%	0.0%	9.8%	41.0%	47.5%	<b>88.5%</b>
<b>3. Premise 3:</b> People are best served by practitioners who focus on assets and strength-based approaches with an awareness of current research regarding neuroscience and child and adolescent development. (n=61)	1.6%	3.3%	9.8%	39.3%	45.9%	<b>85.3%</b>
<b>4. Premise 4:</b> People are best supported by practitioners who understand that attachments, connections, and relationships are a primary source of growth and learning. (n=61)	1.6%	0.0%	6.6%	36.1%	55.7%	<b>91.8%</b>
<b>5. Premise 5:</b> People are best supported by practitioners who understand the role of race, racism and bias, and the ways in which race, other identities, privilege, and power shape a person’s life, as well as the practitioner’s own life. (n=61)	1.6%	0.0%	11.5%	31.2%	55.7%	<b>86.9%</b>
<b>6. Premise 6:</b> People are best supported by practitioners who understand and provide culturally responsive services. (n=61)	1.6%	0.0%	11.5%	32.8%	54.1%	<b>86.9%</b>

Similar to the previous item, respondents were asked how often their **organization** incorporates the premises of Families Thrive. Respondents generally perceived their organization as incorporating the six premises at lower rates than they do personally (Table 64, compare to Table 63 above).

Table 64	Families Thrive is comprised of six premises. At the individual level, how often do you feel that <b><u>your organization</u></b> incorporates these premises when working with young adults and families?						
	Never	Rarely	Sometimes	Often	Always	Uncertain	% "Often" or "Always"
1. <b>Premise 1:</b> People are best supported by practitioners who understand and recognize the importance of self-awareness and self-care in their own professional practice. (n=62)	0.0%	1.6%	21.0%	29.0%	45.2%	3.2%	<b>74.2%</b>
2. <b>Premise 2:</b> People are best supported by practitioners who are aware of the impact of traumatic stress and understand the need to use trauma informed methods. (n=62)	0.0%	0.0%	12.9%	41.9%	41.9%	3.2%	<b>83.9%</b>
3. <b>Premise 3:</b> People are best served by practitioners who focus on assets and strength-based approaches with an awareness of current research regarding neuroscience and child and adolescent development. (n=62)	0.0%	0.0%	12.9%	37.1%	46.8%	3.2%	<b>83.9%</b>
4. <b>Premise 4:</b> People are best supported by practitioners who understand that attachments, connections, and relationships are a primary source of growth and learning. (n=61)	0.0%	1.6%	14.8%	36.1%	44.3%	3.3%	<b>80.3%</b>
5. <b>Premise 5:</b> People are best supported by practitioners who understand the role of race, racism and bias, and the ways in which race, other identities, privilege, and power shape a person's life, as well as the practitioner's own life. (n=61)	0.0%	0.0%	18.0%	36.1%	42.6%	3.3%	<b>78.7%</b>
6. <b>Premise 6:</b> People are best supported by practitioners who understand and provide culturally responsive services. (n=61)	0.0%	3.3%	14.8%	34.4%	44.3%	3.3%	<b>78.7%</b>

The vast majority of respondents perceived Families Thrive as positively impacting the systems level. Over half indicated the positive changes of “increased awareness of how providers fit into the overall system serving youth”, “meeting new service providers”, and “improved our collaboration” as a result of the training (Table 65).

<b>Table 65</b>	<b>At the systems level, in what ways did the Families Thrive training change your interactions with other organizations? (check all that apply) (n=61)</b>	
	<b>Increased awareness of how providers fit into the overall system serving youth</b>	55.7%
	<b>Met new service providers</b>	50.8%
	<b>Improved our collaboration</b>	50.8%
	<b>Gave us a common language</b>	42.6%
	<b>Found out about new resources that help me serve youth</b>	42.6%
	<b>Increased the number of service providers I connect with regularly</b>	14.8%
	<b>Other</b>	1.6%
	<b>No change</b>	13.1%

**Other response:** “better able to help clients”

Two-fifths (39.3%) of respondents reported that they would benefit from a Families Thrive refresher course (Table 66).

<b>Table 66</b>	<b>Would you benefit from a Families Thrive refresher course? (n=61)</b>		
	<b>Yes</b>	<b>No</b>	<b>Uncertain</b>
	39.3%	31.2%	29.5%
If yes, what specifically might be helpful to you? <ul style="list-style-type: none"> <li>• How to be helpful to parents</li> <li>• Because of Covid-19, our training has been postponed after the first training day</li> <li>• If there was a review of helping client's navigate systematic culture.</li> <li>• As research is new and updated, if there is changes it would be beneficial.</li> <li>• Assessing for and building protective factors, train board and admin</li> <li>• Want to be a trainer of trainers</li> <li>• Reviewing the modules and making sure I still use/benefit from them.</li> </ul>			

Open-ended comments are displayed below in Table 67.

Table 67	Comments you would like to make about your experience with Families Thrive training?
	<ul style="list-style-type: none"> <li>• Looking forward to more trainings</li> <li>• I like that it is a refresher course for some in the field that may forget to consider different cultures, race, ethnicity, background, history, current situation, family dynamics and more. When assisting families.</li> <li>• Once we are able to complete the remaining course material, I believe strongly information could be used more effectively in field work situations.</li> <li>• This material was not a new concept to those of us who are MH Therapists. While it is useful information it should be geared more towards case managers.</li> <li>• Don't advertise this to therapists/counselors. There was very little new learning and I would benefit more from trainings focused on therapeutic interventions to benefit kids with trauma, families impacted by racism, etc.</li> <li>• This training was inappropriate and a waste of time for master's level clinicians who use this information on a daily basis. It was presented unprofessionally by one trainer.</li> <li>• The trainers were great!!! They were very knowledgeable, interactive with the learners, and very encouraging to all of us that attended! It was a great learning experience for me.</li> <li>• Gaye shared her knowledge and experience in a very relatable way. The training was not new information however it was great to hear it being shared across organizations and sectors.</li> <li>• Good themes</li> <li>• I enjoyed the training and felt that it was very educational and enjoyable to be taught by such experienced and knowledgeable group of professionals!</li> <li>• Very good. Opened my mind to more and different ways of doing things. It is always beneficial to be reminded of things maybe already heard.</li> <li>• I thought this course was helpful and beneficial to my job and the families I serve. I recommend it to anyone working in the Human Service field.</li> <li>• Very informative and useful information in serving my participants.</li> </ul>

## FAMILIES THRIVE TRAINER SURVEY RESULTS

In June-July 2020, Nebraska Children and Families Foundation conducted a survey with individuals who had been trained to be Families Thrive Trainers. A total of 12 Families Thrive Trainers responded to the survey (Table 68).

<b>Table 68</b>	<b>Response rate</b>	
<b>Number of surveys completed</b>	<b>Number of invitations sent</b>	<b>Response rate</b>
12	32	37.5%

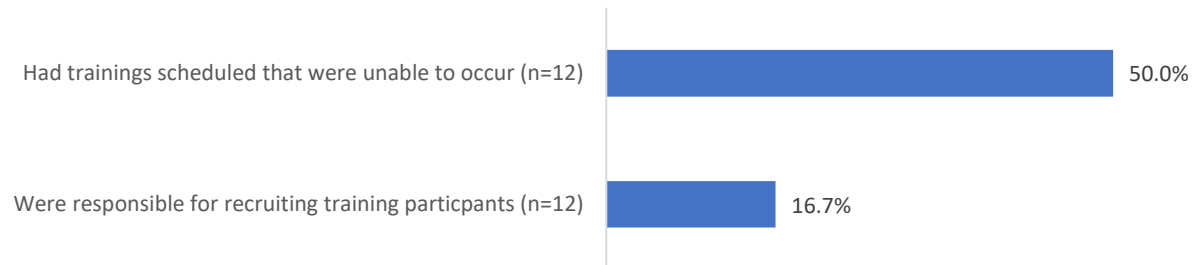
All but three of the respondents had conducted at least one Families Thrive Training (Table 69).

<b>Table 69</b>	<b>Trainer Activities</b>	
<b><i>Number of trainings held/involved in (n=12)</i></b>	<i>0</i>	3
	<i>1</i>	3
	<i>2</i>	3
	<i>3</i>	3
	<i>Average</i>	<i>1.5 trainings</i>
<b><i>Counties where training(s) occurred (n=18 trainings)</i></b>	<i>Douglas</i>	6
	<i>Lancaster</i>	2
	<i>Dodge</i>	2
	<i>Sarpy</i>	1
	<i>Lincoln</i>	1
	<i>Other (Madison, Hall, Gage)</i>	6



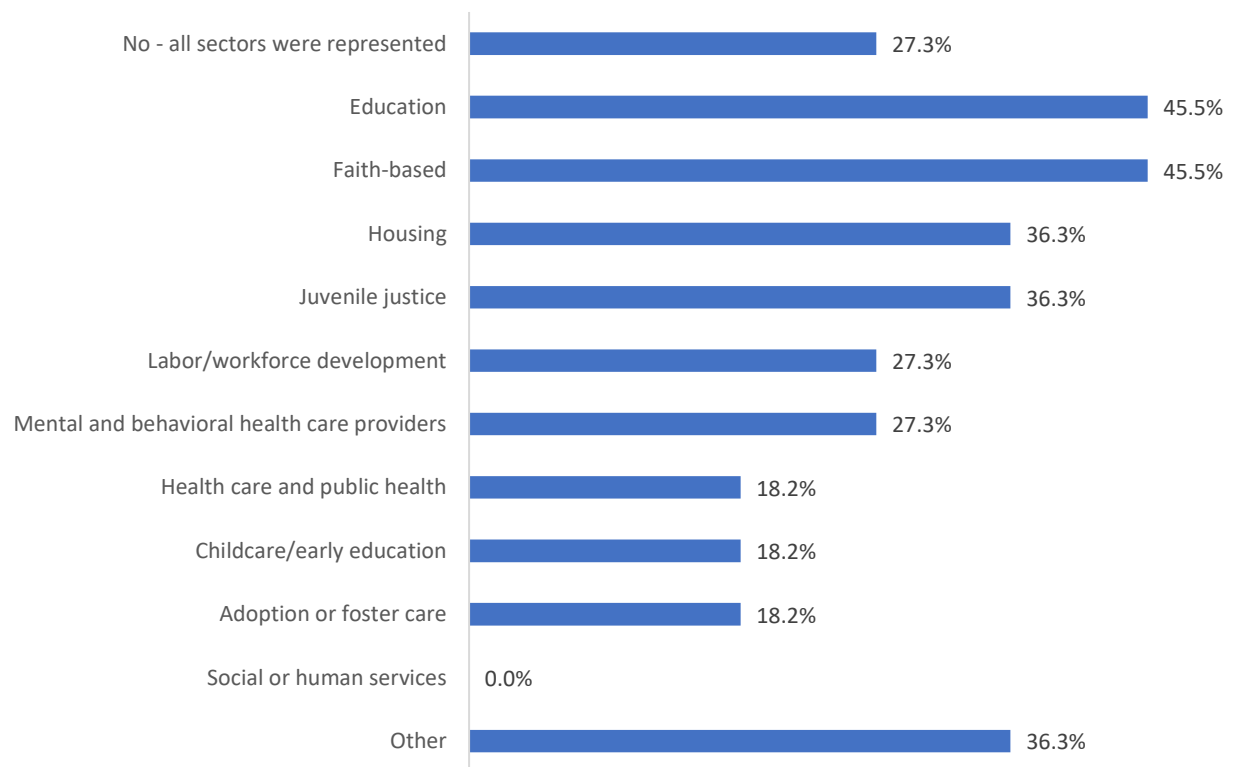
Half (6 out of 12) respondents indicated that they had trainings scheduled that were unable to occur. Just 2 out of 12 respondents reported that they were responsible for recruiting training participants (Figure 11). Among those who had trainings that were unable to occur, the primary reason for the training not occurring was COVID-19. Additionally, “scheduling” was given as a response for trainings being unable to occur.

**Figure 11. Coordination of Training**



The sectors of education, faith-based, housing, and juvenile justice were most commonly selected as the sectors as missing from the respondents’ trainings (Figure 12).

**Figure 12. Did you feel that any of the sectors below were missing from any of your trainings? (select all that apply) (n=11)**



**Other responses:** law enforcement, legal, elected officials, training was specific to group collaborative

Many respondents indicated that they would focus more on inequalities caused by racism in any future trainings they conduct (Table 70).

Table 70	Is there anything you will do differently as you train as a result of the insight you have gained from seeing communities deal with COVID-19 and/or the inequities caused by racism?
	<p><b><i>Focus on inequalities caused by racism</i></b></p> <ul style="list-style-type: none"> <li>• Inequities caused by racism are always important to talk about, even more so now.</li> <li>• I would want to teach more intentionally about white privilege (maybe doing an exercise/activity on it) and the inherent bias in our society.</li> <li>• I think a greater emphasis on conversations about the racial discrepancies in our communities.</li> <li>• I plan to share more data about the young families of color that we serve, and the extra barriers they may face.</li> <li>• Emphasize self-care, trauma &amp; resilience, and understanding of race and bias to better understand the experiences of clients and how to best support them. And that we need to find ways to offer components of Families Thrive in a zoom platform as the training may be more relevant than before.</li> <li>• I have soooo many more resources to offer for further learning. I hope I will pull a little harder to get people to talk about cultural and race, it's always the most avoided conversation</li> <li>• Since I haven't done a training yet I don't think I could say I would do anything differently, however, I think because of the recent crisis in our country, I will have a lot more self-awareness and empathy when delivering trainings that perhaps I wouldn't have otherwise had.</li> </ul> <p><b><i>Other comments</i></b></p> <ul style="list-style-type: none"> <li>• Be more intentional on the connections and focus on the importance of social connections &amp; premise #6</li> <li>• Yes, add them to the training</li> <li>• Unsure</li> </ul>

Commonly identified challenges faced by in delivering the Families Thrive materials included scheduling and time management, audience, and information over-load (Table 71).

Table 71	What were the challenges you faced in delivering the Youth and Families Thrive materials?
	<p><b><i>Scheduling and time management</i></b></p> <ul style="list-style-type: none"> <li>• staying on our time schedule</li> <li>• scheduling and timing</li> <li>• scheduling for max participation</li> <li>• The biggest challenge is knowing how long each section will take because each group is different and has different questions and areas that they want to focus on.</li> </ul> <p><b><i>Audience</i></b></p> <ul style="list-style-type: none"> <li>• Both were smaller groups so they did not get to learn from many others experiences and knowledge</li> </ul>

- Adapting it to the audience and keeping them engaged
- I haven't had any interest in a full training (all at one time) here in my area. People are busy and seem to want the information in smaller chunks.

***Information over-load***

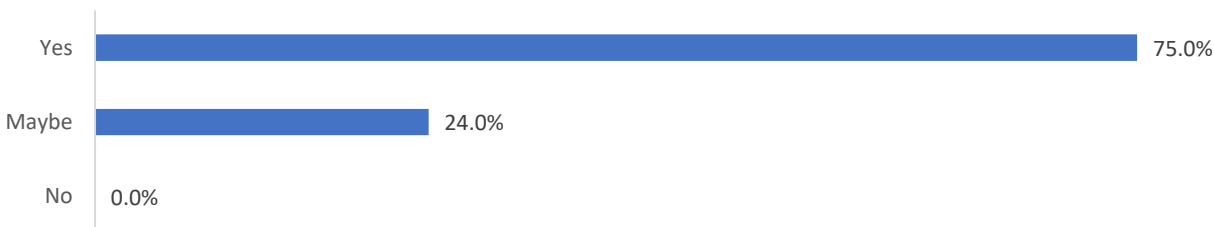
- THERE IS A LOT OF PAPERS and little opportunity to follow up on implementation
- Some modules were too dense and could have been broken up a bit for better retention.

Several respondents noted the positive impact on training participants and the synergy among participants as key takeaways or successes they experienced (Table 72).

Table 72	Describe some key takeaways or successes you experienced while delivering the training and/or after the training?
<b><i>Positive impact on training participants</i></b>	
<ul style="list-style-type: none"> <li>• People appreciate the training and seem to especially like the group discussions and activities.</li> <li>• At some point, people have had "the moment" of how this all connects to their job and how they can take this back</li> <li>• It is wonderful when someone with a more punitive view of dealing with young people finally get that a strengths-based perspective is healthier.</li> </ul>	
<b><i>Synergy among participants</i></b>	
<ul style="list-style-type: none"> <li>• Was able to learn a lot from the participants</li> <li>• I LOVE IT! There are people willing to join in the movement, they just need to be connected. And it's always easier to have conversations in a group of people whose work looks like yours.</li> </ul>	
<b><i>Insights into how to improve the training</i></b>	
<ul style="list-style-type: none"> <li>• It is well received when made applicable to trainees' fields of work.</li> <li>• Don't plan meetings/calls after the trainings. They wipe you out.</li> <li>• Room set up is key. Classroom style does not work so I will always use a horseshoe style room set up when possible.</li> </ul>	

Three-fourths of respondents indicated in the affirmative that they plan to conduct Families Thrive Trainings in the future when it becomes feasible to do so (Figure 13).

**Figure 13. Do you plan to conduct any Families Thrive Trainings in the future when it becomes feasible to do so? (n=12)**



Satisfaction was reported as high in terms of the support provided by NCFF and the practice calls (Table 73).

<b>Table 73</b>	<b>Satisfaction with...</b>					
	<b>Very dissatisfied</b>	<b>Dissatisfied</b>	<b>Neither satisfied nor dissatisfied</b>	<b>Satisfied</b>	<b>Very satisfied</b>	<b>% Satisfied or very satisfied</b>
<b>1. The support provided by Nebraska Children and Families Foundation (n=12)</b>	0.0%	0.0%	0.0%	58.3%	41.7%	<b>100%</b>
<b>2. The Youth and Families Thrive Community of Practice calls (n=12)</b>	0.0%	0.0%	8.3%	41.7%	50.0%	<b>91.7%</b>
<b>3. Other support provided (n=11)</b>	0.0%	0.0%	27.3%	36.4%	36.4%	<b>72.7%</b>

Just over half of the respondents reported that they participated in the Learning Community opportunities. Those who had participated provided positive comments as to the benefit of the Learning Community (Table 74).

<b>Table 74</b>	<b>Have you participated in the Learning Community opportunities? (n=12)</b>	
	<b>Yes</b>	<b>No</b>
	58.3%	41.7%
<b>If yes, how have they benefited you?</b> <ul style="list-style-type: none"> <li>• The discussion among trainers is very valuable.</li> <li>• It's nice to feel connected with trainers near and far and help each other see around the corner a bit</li> <li>• Having a connection with other people speaking the same language with the same goals to share Family's Thrive</li> <li>• I enjoy the opportunity to connect with everyone and pick their brains when we are stumbling on something.</li> <li>• Staying up to date on material</li> </ul>		

Two respondents indicated that they would have liked to have clear expectations and guidelines from NCFF (Table 75).

<b>Table 75</b>	<b>What is one thing Nebraska Children and Families Foundation could do to better support you?</b>
<b>Expectations and guidelines</b> <ul style="list-style-type: none"> <li>• Establish clear expectations and answers about requirements.</li> <li>• clear guidelines and expectations</li> </ul>	

***Other comments***

- I have felt very supported. My lack of trainings is mainly due to my location and my medical condition and lack of time.
- I am not sure
- I think they are doing a great job.
- Impressed by their collaboration and passion for everyone to be successful.

Additional comments are provided below.

<b>Table 76</b>	<b>Additional comments:</b>
<ul style="list-style-type: none"><li>• Even though I haven't completed trainings for others, the training for myself and being able to share it with my colleagues and staff has been invaluable!</li><li>• thanks for making this available and for being a point of coordination!</li></ul>	

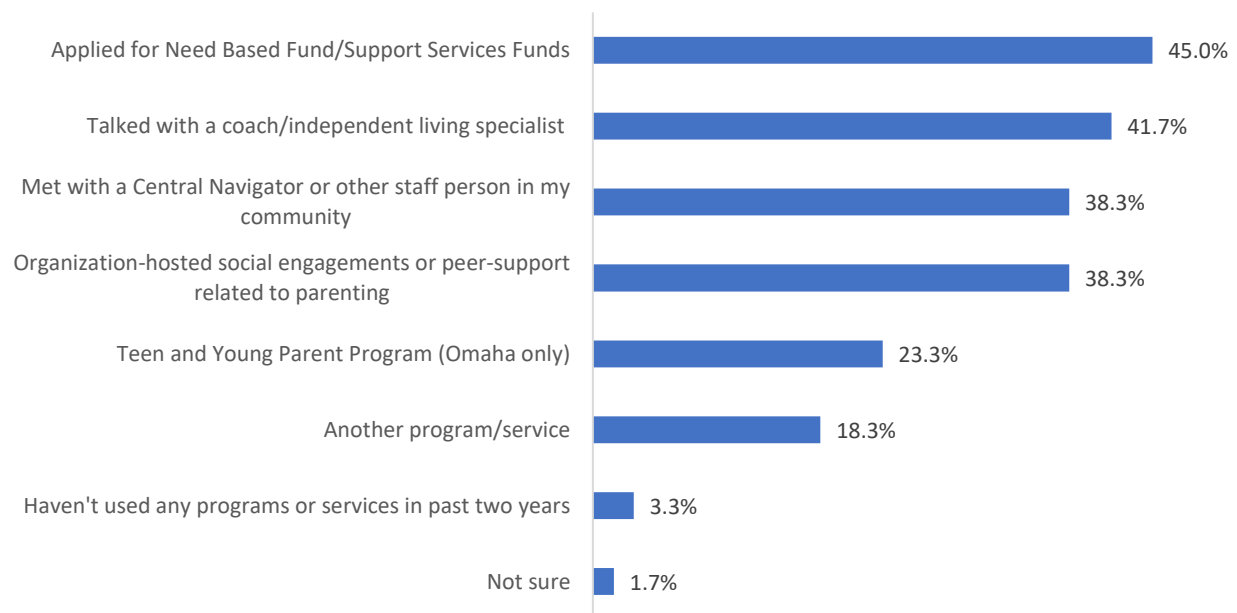
## SURVEY FOR YOUNG ADULT PARENTS RESULTS

In June 2020, Nebraska Children (NC) conducted a survey with expecting and/or parenting young adults about their experiences with receiving services or participating in programs for them and/or their child. Surveys were sent out by local communities that participated in the Pregnancy Assisted Fund (PAF) grant.

A total of **60 young adult parents responded to the survey**. Due to the nature of how the survey was sent a response rate is unable to be calculated.

Respondents reported various involvement in programming for them and their child in the past two years, with the most common being need based/support services fund, coaching, Central Navigator, and social engagements (Figure 14). Most (70%) of young adult parents reported accessing more than one service

**Figure 14. What types of programming have you and your child used in past two years? (n=60)**



**Other responses:** B2I, early childhood, Lutheran Family Services, HUB, NCFE home parenting meetings, Sixpence (3), Offutt AFB New Parent Support, PALS, TIPS for parents of children leaving the NICU, workforce, Head Start

The vast majority (89.5%) of respondents reported that they were satisfied or very satisfied with the services they received for themselves or their child. Satisfaction was slightly lower (84.2%) for the process of receiving those services (Table 77).

<b>Table 77</b>	<b>Satisfaction with programs/services</b>					
	<b>Very dissatisfied</b>	<b>Dissatisfied</b>	<b>Neither satisfied nor dissatisfied</b>	<b>Satisfied</b>	<b>Very satisfied</b>	<b>% Satisfied or very satisfied</b>
<b>1. Satisfaction with services received for self and/or child (n=57)</b>	1.8%	1.8%	7.0%	47.4%	42.1%	<b>89.5%</b>
<b>2. Satisfaction with the process (completing forms, working with staff, etc.) for receiving services for self and/or child (n=57)</b>	1.8%	3.5%	10.5%	40.4%	43.9%	<b>84.2%</b>

Likewise, most (89.1%) respondents reported that the services they received “mostly” or “completely” helped them meet their own needs or goals, and 84.9% reported that the services helped them “mostly” or “completely” meet the goals they had for their child(ren) (Table 78).

<b>Table 78</b>	<b>Meeting needs and goals</b>				
	<b>Not at all</b>	<b>Somewhat</b>	<b>Mostly</b>	<b>Completely</b>	<b>% Mostly or completely</b>
<b>1. Overall, did these services help you meet your own needs or goals? (n=55)</b>	3.6%	7.3%	30.9%	58.2%	<b>89.1%</b>
<b>2. Overall, did these services help you meet the needs or goals you had for your child(ren)? (n=53)</b>	5.7%	9.4%	32.1%	52.8%	<b>84.9%</b>

Suggestions for how to better meet their own and their children’s needs are grouped into three broad categories below: more services, education, and more activities (Table 79).

<b>Table 79</b>	<b>What suggestions do you have, if any, for how your and/or your children’s needs could be better met?</b>
<b>More services</b> <ul style="list-style-type: none"> <li>Care more for the kids in the foster care system</li> <li>I suggest more online services, as well as offline services.</li> <li>Coach in schooling through technology. Also, other options then a public school</li> <li>I would like to add more child-care services.</li> <li>Better resources for expecting mothers, most resources are for after the baby is born.</li> <li>I think more help should be given to families in need</li> <li>Helping families find affordable housing.</li> </ul>	

- I have a premature child, I am obviously extra concerned about his development and reaching milestones. I was super bummed they wouldn't see him the office to assess his skills because of covid19. I feel like they could have done temp checks and used precautions such as having staff and parents wear masks and disinfecting. I had to settle for a phone call, and they can't SEE his skills this way. They didn't even do telehealth.
- community doctor help
- Be more involved outside of the meetings and conversations. Check on them, actually show attentiveness more than just the times you get paid.
- Community-based services for medical and dental care.
- Early reading experiences for my child
- I'd like to get more support for baby care.
- Need Based Fund or Support Services Funds
- I need job
- Some people need more of a push so more of a one on one mentor situation.
- Would have loved to do more face to face
- Screening children for speech and language delays.
- More options
- True male mentors and payments to parents. sometimes we need just a bridge even if we supposedly make over the low-income level
- I think Omaha's youth program has helped the court a lot, but it would be nice to adjust the timing appropriately

#### ***Education***

- I would like to get more knowledge on daily baby care.
- How do boys care for their babies?
- I need more knowledge to help me with parenting.
- Teach new former ward parents about how state laws work if the child goes into state care themselves. I had to go through this with my son and things are different from when I was in state care. If I had a better understanding of how those case was going to get processed maybe things would have been different.
- Hopefully giving me more parenting knowledge.
- What can I do to prevent my baby from getting sick during daily care?
- The baby is always prone to diarrhea, I would like to give more knowledge about this.
- Parenting training- specifically forms of discipline age appropriate. Also forming support groups and connection opportunities with other parents.
- hope I can take care of it better

#### ***More activities***

- Provide activities and experiences that give children opportunities to learn social-emotional skills.
- Early education training
- More activities
- get some food help

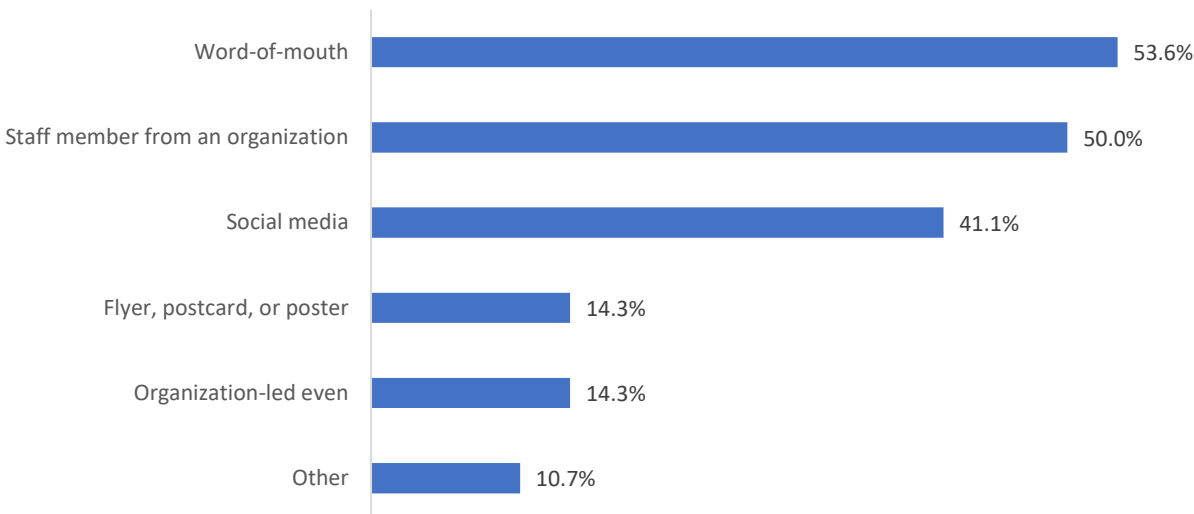
#### ***No suggestions***

- Everyone is pretty helpful, I haven't had any issues
- None. These programs, especially the teen and young parent program, have allowed me to parent in the healthiest way possible and have taught me to check myself when I'm not being healthy in front of my daughter.
- N/A. I think the programs I have used or came across have done their best to help with what they can and provide me with other programs to help me further or with other needs I may have had than they may not be able to help with.
- Seven others indicated "no other suggestions"



Word-of-mouth, staff member, and social media were the most commonly reported ways in which respondents reported hearing about the services they received (Figure 15).

**Figure 15. How did you hear about the services you received and/or the program you participated in (n=56)**



**Other responses:** counselor, Google search, hospital, B2I worker, probation, Project Everlast

The vast majority (93.3%) of respondents agreed or strongly agreed that it is important to ask others for help. Most, but not all, respondents reported that people have been understanding about their needs as a young adult parent, and that they feel comfortable seeking out services (Table 80).

<b>Table 80    Perceptions and comfort level with asking for help</b>						
	<b>Strongly disagree</b>	<b>Disagree</b>	<b>Neither agree nor disagree</b>	<b>Agree</b>	<b>Strongly agree</b>	<b>% Agree or strongly agree</b>
<b>1. It is important to ask others for help. (n=60)</b>	0.0%	0.0%	6.7%	46.7%	46.7%	<b>93.3%</b>
<b>2. People have been understanding about my needs both as a young adult and a parent. (n=60)</b>	1.7%	3.3%	11.7%	40.0%	43.3%	<b>83.3%</b>
<b>3. I feel comfortable seeking out services and supports for myself and my child. (n=60)</b>	0.0%	0.0%	15.0%	31.7%	53.3%	<b>85.0%</b>

Respondent demographics are reported in Table 81.

<b>Table 81</b>	<b>Demographics</b>	
<b>Gender (n=60)</b>	<i>Woman</i>	81.7%
	<i>Man</i>	18.3%
	<i>Another gender/ prefer not to say</i>	0.0%
<b>Race/ethnicity (n=60)</b>	<i>White</i>	48.3%
	<i>Black or African-American</i>	15.0%
	<i>Hispanic</i>	11.7%
	<i>American Indian or Alaskan Native</i>	3.3%
	<i>Asian</i>	1.7%
	<i>Native Hawaiian or Pacific Islander</i>	1.7%
	<i>Bi-racial/Multiracial</i>	11.7%
	<i>Another race/ethnicity</i>	6.7%
<b>Age (n=60)</b>	<i>14 or under</i>	0.0%
	<i>15-17</i>	6.8%
	<i>18-19</i>	18.6%
	<i>20-24</i>	40.7%
	<i>25 or older</i>	33.9%
<b>County (n=60)</b>	<i>Douglas County (Omaha)</i>	33.3%
	<i>Lancaster County (Lincoln)</i>	13.3%
	<i>Sarpy County (Papillion and Bellevue)</i>	18.3%
	<i>Lincoln County (North Platte)</i>	8.3%
	<i>Madison County (Norfolk)</i>	8.3%
	<i>Other</i>	18.3%

**Other counties include:** Brown, Colfax, Dodge, Hall, Nance, Pierce, Seward, Wayne,

## PROCESS INTERVIEW RESULTS

### PROCESS EVALUATION PURPOSE

As part of the process evaluation of the NEPG-PAF grant, project and training staff, and coalition leaders and central navigators participated in group interviews to assess the progress made on the grant activities and objectives, and to provide feedback on the challenges and successes.

### METHODOLOGY AND PARTICIPANTS

The first interviews were conducted in the spring of 2019; the second interviews were conducted in November of 2019; and the final interviews were conducted in June of 2020. The group interviews for the process evaluation were conducted in Years 1 and 2 by Dr. Joyce Schmeeckle of Schmeeckle Research, the external evaluator for the project. Interview questions developed in conjunction with staff are located in Appendix A. The questions were similar to the interview questions from year 1, but revised based on responses from the first interviews with additional information on the sustainability of the project. In the final interviews, questions were revised to be more reflective the overall impact of the grant on communities and young people.

Group interviews with Norfolk Community, North Platte Community and City of Douglas County/Douglas County (year 1 cohorts) coordinators and navigators were conducted with each community. Sarpy County and Lancaster County, year 2 cohorts, were also interviewed in year 2 (but not in year 1). In addition, NC grant staff participated in a group interview. A list of the interview participants is located in Table 82 below.

Interview transcripts were analyzed using a qualitative analysis process using the general question areas and themes identified during the first interviews conducted in year 1 with the addition of sustainability. While some comparisons and contrasts were noted, the small number of communities funded by the grant and interviewed did not lend itself to detailed or generalization of differences between communities based on characteristics such as urban and rural. Confidentiality of community responses was also considered when determining whether identification of the community should be revealed with responses and quotes.

Since July 2019, new staff in the communities includes the following: Norfolk Family Coalition in Madison County has a new coordinator with a new central navigator that left her position in June of 2020; Families 1<sup>st</sup> Partnership in Lincoln County has hired their first central navigator; and Douglas County has a new coordinator.

**Table 82. Interview Participants**

<b>Interview Group</b>	<b>Interviewed</b>	<b>Interview Participants</b>
NCCF Grant Staff	Years 1 and 2	<ul style="list-style-type: none"> <li>• Sara Riffel, Assoc. Vice President, Grant Lead</li> <li>• Claire Hoff, Program Evaluation</li> <li>• Catherine Brown, Research and Evaluation</li> <li>• Jenny Skala, Senior Vice President (Phone)</li> <li>• Mary Pinker, Community Impact Project Director (Phone) (did not participate in June 2020)</li> <li>• Crystal Aldmeyer, Asst. Vice President</li> <li>• Alyson Goedken, Asst. Vice President</li> </ul>
Cohort 1: Douglas County Community Coordinators and Navigators	Years 1 and 2	<ul style="list-style-type: none"> <li>• Deborah Dancer, Coordinator</li> <li>• Nikia Gunn-Abdulai', Central Navigator, Nebraska Early Childhood</li> <li>• Brittney Livingston, Central Navigator, NCCF Project Everlast</li> </ul>
Cohort 1: North Platte Community (Lincoln County) Coordinator and Navigator	Years 1 and 2	<ul style="list-style-type: none"> <li>• Caroline Sabin, Coordinator</li> <li>• Brittany Masters, Central Navigator</li> </ul>
Cohort 1: Norfolk Community (Madison County) Coordinator and Navigator	Years 1 and 2	<ul style="list-style-type: none"> <li>• Heidi Hausmann, Coordinator</li> <li>• Heather Hansen, Central Navigator (did not participate in June 2020 - resigned)</li> </ul>
Cohort 2: Sarpy County Community Coordinator and Navigator	Year 2	<ul style="list-style-type: none"> <li>• Mario Hatcher, Coordinator</li> <li>• Elci Warnell, Central Navigator</li> <li>• Carmen Bradley, Central Navigator (did not participate in June 2020)</li> </ul>
Cohort 2: Lancaster County Community Coordinator and Navigator	Year 2	<ul style="list-style-type: none"> <li>• Rachel Surmick, Coordinator</li> <li>• Lindsay Drake, Central Navigator</li> </ul>

## SUMMARY OF RESULTS

A general progression on the development of the project over the two years of the grant with communities becoming more experienced enrolling and addressing the needs of the expectant and parenting young people in the communities over time. Coaching was expanded in some communities to new organizations and through schools. Concrete supports allowed was somewhat narrowed by the end of year 1 and then somewhat expanded to meet needs after COVID-19. Collaborations were enhanced as a result of the dual-generation approach of the grant. Families Thrive training was held in all communities but interrupted by COVID-19. Expanded awareness of the young parents resulted in sustained focus of the population with coalitions, as well as NC and DHHS. Sustaining the project is possible through funds provided to communities from NC, if communities choose to do so, as will Families Thrive training through community trainers.

## INTERVIEW RESULTS – JUNE 2020

### NUMBER OF YOUNG PERSONS REACHED

Young persons were considered PAF participants if they were between the ages of 14 and 26, and had completed a participation information form in any of the 5 communities. The goal of the grant was to enroll 600 young persons during the two-year period. By the end of the grant, 950 young people had been enrolled in the program, impacting 1,100 children. As NC staff noted, they were, “not prepared with the difficulty in identifying young people that are parenting and expecting; . . . there is a need but actually a challenge to identify them in rural communities, but not in Omaha.”

Lancaster County also surpassed and exceed the 80 referrals in the first quarter as young people were already applying through the HUB. Efforts were not focused on outreach but, “More than anything how can we serve the number of folks coming with the resources we have,” stated a Lancaster County interviewee. There is an overwhelming need but the community also provides a lot of support: “We want parents to feel supported and get their needs met.”

Sarpy County had a slow start to the one-year grant. With a goal of 60, there were only three participants in the program prior to March, but 30 were added since then, primarily through collaboration with Douglas County. Lincoln County and Madison County have experienced fairly high levels of participation, with some young people served in both years. For Norfolk, March was surprisingly a little quiet but has since gone back to normal by June.

### IMPACT OF THE COVID-19 PANDEMIC

The NEPG-PAF grant funded project had to adapt dramatically as a result of COVID-19 and subsequent directed health measures. Communities’ comments reflected change to the project such as increased needs of young people, and especially changes to communicating and coaching.

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### IMPACT TO YOUTH

The impact of the COVID-19 pandemic to young people was extensive. Many became unemployed and basic needs increased substantially which included food, rent, utilities, baby supplies, etc. One community commented they spent time “trying to find support for young parents that didn’t have a lot of support anyway.” And as perceived by another community coordinator, “. . . but parents are in need of support more than ever and because of no daycare and couldn’t go out in the community.”

“A lot of young people experienced isolation, anxiety, depression. We tried to do social things but going from face to face to meeting them through a computer screen is very different,” noted one community. However, this community also did bring on a therapist to work with young people. Coaches were utilized heavily to address mental health concerns and to ensure children were safe.

A positive impact noted by Douglas County was the attendance at the fatherhood program activities. According to the central navigator, “I think the youth were more comfortable in their home setting and were able to express themselves better.”

In Sarpy County, where recruitment was difficult, there was an increased interest in the funding. Past recruitment efforts had been difficult finding young parents in need of the support from the program. Young expecting and parenting teens had expressed needs for transportation and technology. Following COVID-19, NEPG-PAF use of funds was expanded for laptops for school use. Because of . . . “COVID-19 we have had the opportunity to welcome more agencies into our collaborative into our meetings and through that we have been able to reach more young parents”, noted a central navigator.

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#### FINANCIAL STRESS

Youth who had lost their jobs (many young people are employed in restaurants) suddenly had basic needs for the baby items like diapers and formula, which were in short supply. However, “rent was the biggest thing – everybody was in panic: ‘I don’t have a job anymore, how am I going to take care of my bills,” quoted one interview participant. Utilities companies delayed shut offs and late payments, but with that policy now being reversed (and evictions as well), young parents will have trouble making their utility bills current. “. . . feel we are going to see an uptick in the needs again,” predicted a central navigator. During the COVID-19 crisis, more funds were available to assist the young families. In some communities it was double the normal amount (e.g., \$1,500 available through Project Everlast in Douglas County versus a normal \$750 per young person). Lancaster County changed policy to increase flexibility with the funds to increase concrete supports and “better meet community needs”, and increase family protective factors. “We had the same amount of flex funds go out in the past 6 months that we had the previous year”, stated the central navigator.

Some young parents are going back to work but not for the same number of hours so taking care of bills is still a challenge.

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#### GOING VIRTUAL – APPLICATIONS AND COACHING

All communities shifted to serving young parents through technology platforms such as online applications, and coaching over the computer or phone through video conferencing (i.e., Zoom). At the beginning, they were making sure everyone was able to connect, had devices, and internet connection, which worked out for all with available technology. While most

communities felt the virtual coaching, and supporting, has worked well in most cases, it is unknown whether services to children is working virtually or not, such as WIC and Home Visitation programs.

Some communities had to convert paper forms, or computer forms to forms that would work with cell phones, as many young people have phones but not computers. However at least one community was still taking applications by phone, or 'whatever works best for the participant'. Some forms were expanded to include more helpful information such as referral source. And in one rural community, having young people sign-up on line put them in a queue and made it easier for staff to keep track of them, "and it tracks their own dedication to pursuing this and following through. They have to fill things out and get documentation. In some ways it's being more responsible," believed one interviewee.

In Douglas County, coaches are used to being in the community 100% of their time so being at home and determining how to meet young people needs has been a challenge. "Their entire job was thrown upside down, like all of their work is 100% different," reflected a central navigator. Coaches had to find creative ways to work with youth when everything was shut down (i.e., DMV, looking for an apartment, applying for jobs). "It was a struggle, people still need licenses, jobs." Coaches communicated using texts and video aps, and some agencies continued to do home visits.

Some coaches were concerned about losing connection with the young people through virtual contact only but this has not happened. They have continued to keep the engagement going. Some home visiting is still taking place as medical staff are involved, such as Visiting Nurses program. In one rural community, coaches may still be cautiously going into homes – or using telehealth.

Another community noted that coaching is all virtual in order to maintain safety and social distancing, but they are still delivering the services families need. However, ". . . it has its challenges. Part of the value is home-based services in the family's home so you can see issues that need to be addressed. That is the primary challenge. While we have transitioned to virtual connection, there is still inherent challenges with being virtual. Benefits are more flexible but still there are challenges."

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#### COMMUNITY EVENTS HOSTED VIRTUALLY

Community baby showers and other planned community events were challenged to offer the events virtually. In one community, educational presentations were conducted virtually and baby items were distributed in a safe way. The advantage of virtual is that it removes the barriers of transportation and child care issues. The downside is that it is difficult to recruit new participants to virtual events.

Before COVID-19, Douglas County had plans to outreach and engage fathers through a partnership with a father's group at Nebraska Children's Home Society with a half-day conference but "COVID-19 squashed the plans".

However, Sarpy County had a baby shower planned for April that turned into a virtual event in June with parent training and items distributed to parents after the training. The online training was also recorded for those that could not participate the day of the training.

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#### LONG-TERM IMPACTS

Stated one Nebraska Children (NC) staff person, "... hope we don't just completely go back to the way before as switching to virtual has worked well for some people so hope moving forward there is some flexibility and thinking differently in how we serve young people in the past and meeting them where they are at."

NDHHS may also be changing to delivering more services electronically to eligible young people in foster care. And while some communities will transition back to their "normal" process and using previous forms, many will continue with the new forms and process of completing everything online.

Several positive outcomes were noted: 1) referring out to other agencies actually was better because staff were more available. "Everyone was there working together and everyone stood up and said we need to work together and all on the same team. I think service providers really stood up and are even better connected now," commented a community member.

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#### FAMILIES THRIVE TRAINING AND IMPACT

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##### FAMILIES THRIVE TRAINING ON HOLD

All communities completed Families Thrive training, and one community was in the middle of an additional training in the community but will complete it as soon as people are able to gather again. Planned trainings were also put on hold until further notice.

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#### COMMUNITIES TRAINING

Despite the fact that training has not occurred since March, with the discussion of potential plans to provide Families Thrive training virtually perhaps in the future, communities had completed at least some, if not all, of the training that had been planned. Douglas County had a canceled training; Madison County was in the middle of training with plans to complete in the fall; Sarpy County training was completed; Lincoln County was completed; and Lancaster County had completed a training in the fall.



While Douglas County is planning for a future training, each of their partners also have training plans. Madison County hopes to complete the training in process this fall that had 20 participants and completed only day 1 of the training. Lincoln County had only three people complete the fall training with many date changes by the trainers. Trainer effectiveness was in question in North Platte and future interest by the community is in question. Sarpy County and Lancaster County did not indicate future interest in Families Thrive training. Some communities were uncertain who were their local trainers, and others commented that trainers have not reached out to collaborations except at the beginning.

Motivational Interviewing training is being considered by two of the communities. As stated by one community, “This is what providers want; different tools are what they need. Families Thrive is more subject matter versus Motivational Interviewing about approach. . . different tools in the toolbox.”

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#### FAMILIES THRIVE TRAINING IMPACT AWARENESS AND SERVICES

While the intent of Families Thrive, training is to increase community providers awareness and ability of community providers to better support young people in the community, it is really unknown by communities whether this has happened. As Nebraska Children staff stated, “This is the intent of the training and we have used evaluation information to adjust training to achieve this outcome”, communities are not necessarily certain if the impact to the system has occurred. As one community commented, “. . . still feel like we need new trainings to help.”

“Having those trainers out there and bring that experience to other discussion, trainings and workshops, is what we have done during quarantine,” stated a Douglas County interviewee. However, Douglas County believes that Families Thrive has provided a common language of self-care: being able to express yourself, understand what you are feeling, what is in your environment, and how it affects how you engage with your families. In addition, a Family Thrives trainer facilitated a virtual open discussion with approximately 100 community service providers in a racial discussion using the Families Thrive Competencies.

“[The community] knew they needed to have a discussion with young people to talk about current events in Omaha with protesting and police brutality, with what they were seeing, and they were asking for something so we put a young adult one together. And then asked by service providers to host one for them because they were also trying to work through how it was affecting their work with young people.”

The provider discussion was further described by a Douglas County interviewee, “Facilitation was nice to really bring about how some people misread racial stress (i.e., white people fatigue), and why people of color gather together; racial stress and tension, and continual micro aggression -continually dealing with it is exhausting.” The hope is that the discussion was “good for service delivery and provider’s own biases.”

## SUCSESSES AND ACCOMPLISHMENTS

Successes noted by NC staff and PAF communities included the following:

- Working virtually had advantages
- Mobilization of young people through the grant that led to young Families Thrive Summit in October
  - Young people advising on the grant turned into the Steering Committee for the Summit
  - Summit conversation led to NDHHS creating a peer-to-peer support position
  - Discussion held about fatherhood support that lead to a whole fatherhood initiative for a fatherhood summit
- Maybe something like: Some young people received concrete supports and their needs were met while others, however, required more intensive support. Would like to increase education and training for young parents to improve outcomes. Working with Sixpence in the schools brought light to the needs of the expecting and parenting young people
- Community baby shower was successful – participation by 32 parents and at least 50 kids
- Having extra resources to help young parents to go to school and take care of their kids. “Having their needs met through concrete supports was huge.”

Communities were asked what they believed to be their biggest accomplishment from the grant funded project. Following are quotes from each community:

- **Douglas County:** The Maternity Leave pilot is planned to be sustained as an important project for young moms.”
- **Madison County:** “I would say the biggest accomplishment of the grant was that it brought attention to the number of young parents in our community that are in need of support. Prior to the grant, I do not think it was known how much was needed for these young parents, but as a result I foresee that these youth that are parenting and/or expecting will continue to be supported through education, advocacy, and concrete needs.”
- **Lincoln County:** “I would say that the major benefit of the PAF grant is that it has drawn more partners interested in working together.”
- **Sarpy County:** “I believe our biggest accomplishment would be beginning to bridge the gap between Sarpy and Douglas. I think it will help the agencies better understand what resources are in Sarpy County for their clients and it will help identify what services are most needed for this demographic. Monetarily, the baby shower was a big accomplishment. We will have the final total tomorrow but I believe we were able to help almost 50 children with an average of \$100 of needed items.”

- **Lancaster County:** I would say the biggest accomplishment of the grant is we were able to help parents with resources, so they could parent and not stress or worry about staying housed, getting housed, getting essential supplies for their children. They could enjoy the time with their children.

## SYSTEM CHANGE

Specific observed changes with “system”, community providers, and within the collaboratives were as follows:

- NC is working with DHHS to help integrate the work into a community-based model
- NC is hearing a change, a shift, with people to include parenting, “young people AND their children”, with even DHHS thinking more about young people that are also parenting.
- Early Childhood Collaboration and communities not only see early childhood but how they fit into other programs. And older youth seen as parents as well.
- More involvement by other early childhood organizations in the collaborative. Send referrals and also provide coaching.
- More connectivity with providers. And providers continuing to use Zoom meetings as a convenient and easy way for coaches to communicate.
- Working closely with providers in an adjacent county that also serves this population from the county.
- Partnering with local zoo and children’s museum to increase support for parents and the developmental needs of the children.

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## PROJECT PARTNERS

From NC standpoint, the dashboards reflect the partners at the community level and what is missing from most communities are partners from housing and juvenile justice. It may have been possible for NC to take the lead and help with connecting the housing sector as partners in community. Some communities did connect with Sixpence, but it wasn’t happening in all communities.

In Madison County, “COVID-19 really brought the community together during times of emergency needs it really comes out. Lots of good things happening and just continue to build that collaborative effort.” They have been creative in how they stay connected during COVID-19, and plan to keep those connections and methods.

Similarly, in Douglas County, it also happened that with the COVID-19 response there “was an immediate knee jerk reaction to bring providers together and bring other partners on board”. As a result, many community agencies are now wanting to become a member of the

collaborative. Flex funds and navigation model allowed Douglas County to work with United Way and bring them on as a partner.

Lancaster County has continued to work well together as agencies and “have remained strong and were able to connect and get the young people what they needed”, noted a Lancaster County interviewee. Landlords would be nice to have on board, but they also can connect with them through the Homeless Coalition. However, “Bottom line, there isn’t enough affordable housing. This is not a partnership issues, but a housing stock issue,” stated one of the interviewees.

In Lincoln County, “partners are very strong”, but would like more interaction with WIC, but they are showing interest for in the future. Childcare providers have also increased referrals as many of the employees actually qualify for NEPG-PAF. North Platte would like more involvement from the hospital and doctors, as doctors are hesitant to refer expecting young people until after the baby is born. Schools and juvenile justice are receptive when they call them, and also attend the System of Care meetings together.

Sarpy County partners with Douglas County Community Response, with Sarpy and Douglas Counties attending each other’s collaborative meetings. “That way we can share opportunities on either side to participate in,” stated a Sarpy County central navigator. Other new partners for Sarpy County are: Child Saving Institute; Early Childhood Collaborative; Heartland Worker Center; NCAP; and Project Everlast. Several of the organizations are considering satellite offices in Sarpy County. Senator Crawford’s staff have also attending CR meetings in Sarpy County to help keep them informed of legislation related to unemployment and COVID-19. However, as the central navigator pointed out, “It is hard to say who they are missing [as partners] until they come to us.”

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#### NEW PROGRAMS OR POLICIES

New program practices or policies noted by NC staff and communities as a result of the grant:

##### Nebraska Children:

- Central Plains (PALS) has embraced Youth and Families Thrive training as a best practice
- NC reviewed own policies and changed language to young people and their children
- NC from a data collection perspective integrated the common referral and participant information form and now able to disaggregate young adults that are expecting and parenting, and not just reliant on information from the transitional services survey, which was influenced by the grant to a degree in terms of urgency for the new information
- NC adopted a practice of combining dollars across CYI and CWB with contracts to communities
- DHHS working on changing written policy to consider young people that are parenting
- DHHS created the Youth and Family Voice Choice position

#### Douglas County

- Developed an innovative Maternity Leave pilot program
- Food delivery pilot program through a different grant will be sustained that came from a need
- Lincoln County Developing an online application
- Service provider resource ap for young people and the community

#### Lancaster County

- Not any policy changes, but conversation changes. Having more conversations with young people about how to budget and pay bills.

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#### SHIFT IN PERCEPTION OF YOUNG PARENTS

Two of the five communities believe there has been a shift in perception about expecting and parenting young people in the community as a result of the grant. As one community stated, “Two years ago we didn’t ask youth if they were parents or expecting. Now all of our forms ask and we make it part of the conversation at orientation. A mind shift that is here to stay.”

The other community noted that since working the school, they found there was a need and prior to this program there was nothing specific to parenting and expecting youth: “Knowing the supports in place, and it is going to be difficult, but together the community is here to support them has been really, really beneficial. And even though NEPG as a program may not continue, we have brought to light and will continue to support those parents in some way and going to sustain that support.”

The three communities that did not sense a shift in perception about serving this population cited reasons that included not enough time with the grant; a lack of tolerance for poor people, (“I don’t have an education and got out there and got a job” attitude), lack of desire to get involved, and a continuous perception that “young people can’t have babies”, but hope the community can see that young people are young and bright and capable of parenting.

#### DUAL-GENERATION IMPACT (PARENTS AND CHILDREN)

NC staff absolutely believed the project has been effective in helping both the young person and their children (i.e., dual generation) towards a better life situation: “We would have gotten here at some point, but the grant allowed us to be intentional. Young people do have access to more supports and services,” stated a NC project staff person. “Two and a half years ago it was siloed.” Now, young persons are accessing Circle of Security® Parenting training, and two years ago, NC staff would not have been part of the Early Childhood Collaboration. Now the group is cross-cutting and talking about impacting older youth that are parents and strategies. “. . . believe there has been a positive shift because of the grant.”

Douglas County, the biggest dual generation impact change is happening as a result of the pilot Maternity Leave program that provides matching funds to moms so they are able to stay home with their infant child and push bonding and attachment with the child. But as a central navigator stated, “We don’t really do much with the children. We push that out to other community providers.” Circle of Security® Parent training was also provided for the young persons, as well as providing an opportunity for young people to connect, which turned into a support group with parents to talk through the stress of being a single parent.

Lincoln County perceived the first year of the grant funds to be pretty flexible and how the funds could be used on either the parent or child, so the first year was dual generation focused. But the second-year funds felt like it could only be geared towards the child. Like car repairs, etc. Staff commented, “When you get something turned down, deposits, car repairs, etc., then you get a little tentative to use the funds.” Because they were uncertain what they could spend the funds on so they helped the young person to move funds to pay for another bill, and cover the other bills, like rent, so they use their money for what they needed.

Madison County worked closely with Sixpence (that works in the high school), in addition to NEPG-PAF which supports the work directly with children and meeting parents where they are. “The concrete supports make sure they don’t have to worry about whether they have enough food or milk or diapers which enables them to just focus on the relationship between mother and child,” commented the Norfolk coordinator.

Although Sarpy County just had a short time with limited participation, it still believed the potential was there for the project to have a dual generation impact. “COVID-19 certainly showed that we could help with that dual generation and see that we didn’t repeat in the foster care system,” stated the central navigator.

Although Lancaster County also only had one year of the grant funds, “a lot of our parents have young kids and babies, hopefully, with it only being a year they will take it on and carry it on – but also knowing it is also fight or flight this is the only thing I’m focused on and hopefully they will budget,” remarked a Lancaster County interviewee. But for Lancaster County, even though the funding was short term they will continue to support, direct or connect them with other services.

For other service providers in the community, the shift to a dual-generation approach (both parents and children) was evidence in other comments throughout the interviews but further examples of service providers adopting a dual generation approach mentioned were as follows:

- For NC, it is continuing to evolve the integration of CYI and CR; and changing the philosophy of the organization in terms of best practices and how to approach future staff in the community.
- Central Plains (PALS coaching) is shifting to include children and thinking about young adults as parents. Agency and coaches are also now considering the needs of the child

as well as the needs of the young people. Coaches need to know where to go to get the resources for children.

- North Platte, as a collaborative, is intending to move toward a family-centered treatment approach and treating the entire family as a whole and not just the parent or child, as soon as funding can be secured to implement the approach at least with coaches.
- In Lancaster County, they hear often, “you can’t help the kids if you can’t help the parents”, so recognize that if parents are struggling with behavioral health, or financial needs and you address the needs, it helps children too. Other agencies in the community also have the goal of looking at the whole family because it benefits both parents and the children. But this is not necessarily a new concept for all organizations.

## BARRIERS AND CHALLENGES

In addition to COVID-19 and the barriers and challenges noted previously, a major issue for NC staff was the time needed for the project with other competing priorities. For Sarpy County, building awareness of the project within the Lift Up Sarpy Community Collaborative was a challenge. A better marketing plan prior to COVID-19 and reaching out to childcare facilities might have been helpful with recruiting, which was a struggle for Sarpy County. Sarpy County did not overcome the recruitment challenges. They had identified the biggest barrier to finding and helping young parents was young people living with their parents and receiving the help and support needed from their parents, “as food and shelter are taking care of”.

Douglas County mentioned in addition to COVID-19, the racial tensions experienced in the community was also a challenge. For North Platte, confusion was caused by the fact that the ages for who can get help differed between the PAF grant and CYI. Also, North Platte noted that keeping in contact with youth because their phone numbers change and they don’t check e-mail is a challenge. However, the central navigator created a Facebook page that has worked well to engage the young population.

## LESSONS LEARNED

For NC project staff, with the encouragement from the grant around CQI, it provided an opportunity to use the “dashboards” (that contain community specific number of young people served and their demographics), to engage in conversations with communities during the check in calls. This provided an opportunity to discuss how to engage fathers, showing that there was still room to grow. Staff, “hope overall it was helpful”. There was a lot of positive feedback about the dashboards but NC “would have used them in a different way or encouraged communities to approach it differently”. If there had been more time to think up front about performance measures, NC may have realized “it is our work” earlier.

NC staff also commented on taking on new grant projects and adding to the long list of what is staff are already managing can be challenging, although it appeared the grant aligned with the work already being done with Community Response. It was, “hoped in the future that NC really considers the capacity needed.” There was a huge learning curve from NC on how you manage funding you seek, or what you need in order to be successful.

Douglas County commented, “When something is going to end you become very reflective and what are we going to do now – what worked?” Community is paying attention to access and reach as a result of COVID-19. Coaching will not work without home visitation, and it will continue as a “general response to support family and child well-being”. They will continue to have the perspective that all of the work is for the whole family. And they will continue to use the 10 Assessments for referrals so “they don’t miss something”. Childcare will need to be continued and to be supported.

For Lincoln County, and as a result of COVID-19, there was so much adapting and changing. Many are state wards.

For Madison County, learning to “just stay connected with the agencies that work most closely with those parents”, and also letting them advocate for young people and trusting they know best how to meet the needs of the young people. Awareness that interaction from the central navigator may be difficult which out knowing the full situation. It was noted that there are “good coaches in the community”.

Sarpy County realized after COVID-19 that they had the wrong focus of how to recruit. “At first, our focus was getting schools on board and advertising on our own and we were focusing on the wrong agencies like CASA and probation.” Once they began to focus on Douglas County agencies, like Project Everlast and Heartland and said if you have a Sarpy County person please let us know, it would have been a better place to recruit because it produced more young people.

With COVID-19 altering the course of the project in Lancaster County as well, the budget was realigned to move more funding to the supportive services fund and out of the awareness dollars. This started in late May. “When everything shut down with bars and restaurants, [there was] a disproportionate effect on young people. A few from word of mouth from young people with folks that have lost jobs etc. but mostly serving through HUB or LPS or referral sources,” stated the central navigator.

There were certain program adaptations that were made over the course of the project as reflected in comments by both Nebraska Children staff and communities, as noted below.

- What it means to support young people through concrete supports. Advocating for what was best for young people took time but an agreed upon list in partnership with public health was completed in November 2019.
- Continuation of social influencers will need new ways on how to maintain interest in the program.



- The broader the network, the more referrals.
- New community cohorts brought thoughts about new and interesting strategies.
- Besides the online application, how central navigator refers out for coaching has changed to first involve DHHS.
- Reaching out to Douglas County agencies and seeing how to partner and attending Douglas County meetings where central navigators have learned about available services in both counties.
- North Platte central navigation works first with DHHS as a resource for coaching before referring to PALS or COMPASS.
- North Platte developed an “ap” that contains a list of resources available in the community but is dependent upon service providers don’t put in their profile and/or keeping the information up to date.

## SUSTAINABILITY

A number of aspects of the project are planned to be sustained beyond the life of the grant. In most communities, the expecting and parenting young person will continue to be a focus in the community, or at least integrated into the process of serving young people. “We have drilled into their (i.e., coaches and service providers) work enough that it’s not just working the young person, but working with the whole family so I think the concept will stay and all of our services has a piece that also supports the family unit.”

From the NC perspective, each community will build into their Community Well-Being (CWB) collaborative plan and budget, continued support for young people as parents, which will provide central navigation and access to supportive services that include concrete supports. Stated by a NC staff person, “To see that fully integrated is pretty exciting.” NC is all going to continue to grow the data collection process. “The project has given us a way to think about how to integrate and visualize data to make sure we can provide a service back to them or empower them to use their own data.” Also, in relationship to evaluation and data collection, NC implemented the use of QuickBase database, including the ability for communities to pull their own data. This will be used to continue to collect some data around system change.

Other aspects of the program in the community that are intended to be sustained:

1. Working on how to sustain the Maternity Leave pilot in Douglas County.
2. Continue to support Families Thrive training through other grant opportunities and diversify how it is funded.
3. Encouraging communities to hire social influencers.
4. Continue to focus on young people as parents, and use Community Response and Behavioral Health dollars to support. Also, can refer them to other community partners for coaching and case management.
5. Offering educational classes online.
6. Commitment by community to sustain the Sixpence position in the high school.
7. Hope to host another community baby shower.

## SUGGESTIONS AND OTHER COMMENTS

### Suggestions:

- Have a support person from NC to assist and attend training to assist inexperienced trainers.
- Provide a training specifically for coaches to increase effectiveness.
- Provide a bank of questions to get started with a family that triggers a need for resources.

Two communities expressed gratitude for the opportunity to participate in the grant and how it helped moms and kids, and a few dads.

## MATERNITY LEAVE PILOT PROGRAM

Project Everlast in Douglas County identified an emerging trend of young mothers needing assistance during pregnancy and subsequent maternity leave. Often, requests are to help with the cost of rent or utilities during this time through the Support Services Funds. The purpose of the pilot was to evaluate the effectiveness of providing a matching fund for ten young mothers who needed assistance during this critical time in both the mother's and her baby's lives. Some mothers have gone back to work after just two or three weeks after the birth of their baby rather than being able to spend the full 6 to 8 weeks being able to create a bond with their baby. Project Everlast anticipates this program will be preventative in terms of homelessness as well as providing the very important chance for mother-baby bonding.

### **Program Description:**

The program matches a young expecting mother's money to help them stay financially stable through their maternity leave. The financial support, as well as coaching support, is to help maintain stable housing, build attachment with child, reliable transportation, and overall sense of feeling supported during the 6 to 8 weeks of maternity leave before returning to full employment.

### **Financial Support:**

- Young mother receives \$2,000 based on documentation of bills provided with verified cash match of \$1,000 by young person

### **Eligibility Requirements:**

- Between the ages of 14-25
- Expecting
- Ability to have access to the match funds
- Bills in young person's name to pay (rent, utilities, car note, car insurance, phone bill, internet bill)
- Sustainability plan (i.e., going back to work, ADC, disability or social security, daycare prospects)
- State ward or opportunity youth
- Haven't been awarded maximum amount of money from this program previously

### **Program Participation Requirements:**

- Must follow prenatal and neonatal plan prescribed by doctor
- Follow the program steps; and young person follows individualized plan created with central access navigator
- If the mom is a new mother, they must take a prenatal class
- If the mom has had children already, they must take a newborn class

**Participants:**

Since the fall of 2019, four young mothers out of nine applicants participated in the program. Two were enrolled in the program in the fall (October and November) with the other two beginning the program in February and March 2020. Due to COVID-19, it was difficult for young people to be able to save, since many lost their jobs, and therefore there was a large decline in applicants for the program. The four participants ranged in age from 21 to 25, with three identifying as Black and one as White. Two of the participants were former wards of the state and two were opportunity youth.

**Application and Pre-assessment Process:**

Young person fills out the support service fund to get all demographic information and on the back of the support service fund asked the following questions:

1. What are your plans for maternity leave/how long are you going to stay home?
2. What are your bills during maternity leave?
3. What support system do you have?
4. Do you have baby items – is anyone helping you get these?
5. Is the child's father involved?
6. Are you currently working with a coach?
7. Are you able to save money?

**Post assessment:**

The post-assessment, conducted 60 days after entering the program, is used to determine how the program influenced the young people, and also to screen for post-partum issues. Questions are as follows:

1. When did you leave work?
2. When did you go back to work?
3. How long would you have been able to stay home without this maternity leave program?
4. Are you going back to the same job?
5. How did your coach support you?
6. How often did you interact with your coach?
7. Were you able to maintain safe and stable housing?
8. Were you able to pay your bills?
9. Are you able to pay your bills moving forward?
10. What supports are you currently receiving? (ADC, WIC)
11. What is your childcare plan?
12. What do you enjoy doing most with baby?
13. How do you know when your baby is sad?
14. How do you know when your baby is happy?
15. Did you breastfeed or bottle feed? Why?
16. What is your biggest hope for your child?
17. What does being a successful parent look like to you?
18. What is your dream for yourself?
19. Thoughts about this program?

**Post-assessment Results:**

Employment. Without the maternity leave program, moms indicated what was available to them for maternity leave with their employer was either none, 4, 6 or 8 weeks without pay. Only one of the four mothers in the program returned to their same job after 2 months. One did not return to work because of COVID-19, another was seeking a different job that wasn't overnight, and it is unknown why the third mother who did not return to work did not do so. All four were able to maintain safe and stable housing; and were also able to pay their bills. Of the three that were asked about ability to pay for bills going forward, two said "yes" and one responded "somewhat". All four had a plan with childcare with three going to daycare and one mom having grandma provide childcare.

All four moms were receiving additional supports, including WIC, SNAP, ADC, and/or Title 20, with variations among the mothers. Two moms were breastfeeding, one was doing both, and one was bottle-feeding the baby.

All four indicated receiving ongoing interaction with their coach. How often they interacted with their coach ranged from "often" to a few times a month to a few days every few weeks or every 2-3 weeks. Participants commented that the coach supported them by giving great advice, by checking on them every couple of weeks, "referred to outstanding organizations that benefit me and my family for the future", and helped with baby shower stuff and with bills.

The moms' dreams for themselves included:

- Be in a better spot financially for my daughter
- My dream for myself is to eventually go to college for psychology while being able to take care of my daughter.
- To be able to own a business and to buy a house for my family and to travel
- To be successful and be a good mother

Following are participants thoughts about the program:

- Wonderful, helped a lot, I don't know what I would've done without this program. Not only are you helping the mothers but the child as well so they don't have to see or feel the financial stress. I'm very confident this program will go a long way.
- My thoughts about the program is that I am very grateful for this program. Because it helps in so many ways. It does not set you up to for failure, but helps you stay on your feet, so you do not get depressed, because you have no help in a time of need. The employees are very nice and encouraging. I appreciated my coach checking up on me and my baby when she didn't have to take time out of her day and do so. She was patient with me trying to get all my receipts and information in by just reminding me. Overall, this program is a great program and I am very thankful for it.
- This program is great to help anyone get back to the right place/path with everyday life.
- It's helpful in all ways budgeting, housing, etc.

**Table 83. Responses concerning parenting from participants:**

	<b>Mom 1</b>	<b>Mom 2</b>	<b>Mom 3</b>	<b>Mom 4</b>
<b>What does being a successful parent look like to you?</b>	Hard question because it means a lot	Being a successful parent looks like too me making all the right choices for your child. Maintaining a safe and loving home for her and being by my daughters side no matter what.	Financially stable, education with some degree, great credit score, happy life.	Making sure my child is loved and has everything he needs to be successful in life.
<b>What is your biggest hope for your child?</b>	Grow up healthy and happy	My biggest hope for my daughter is for her to grow up and accomplish and achieve everything she wants in life. I want her to maintain healthy and always smiling.	Grow up to be healthy and successful	That he grows up to be a good person and becomes successful in life.
<b>What do you enjoy doing most with baby?</b>	Playing, cuddling	I enjoy having skin to skin contact with my daughter and just being with her every day.	Bonding time talks	Enjoy spending time with him and taking care of him.
<b>How do you know when your baby is sad?</b>	She cries or pouts	I know when my daughter is sad when she is a bit whiny than she usually is.	Fuss with kicks	When he's hungry or has a wet or poopy diaper or if he can't poop.
<b>How do you know when your baby is happy?</b>	She tries to talk back. She smiles or moves her arms and legs.	I know when my baby is happy because she smiles a lot and talks a little in her baby language.	Smiles and kisses	When he's content.

## SOCIAL MEDIA INFLUENCERS

Social Media Influencers utilized their own social media accounts to provide resources, awareness, and down to earth relatable advice to other expecting and parenting young people around the state of Nebraska. The purpose of this initiative is to positively transform parenting behaviors and outcomes for expectant and parenting young people whose lives are affected by involvement in foster care or juvenile justice, homelessness, running away from home, and/or sexual exploitation. Objectives for the program include increasing public knowledge about resources to support expecting and parenting young people and identify new strategies to serve special populations.

From March 2019 through June 2020, three influencers created a total of 204 social posts. On average, 229 impressions were made per post. On average 19% of the accounts who have viewed the posts were not following the influencer's account prior to seeing the post. This percentage has been as high as 85% for some posts (Table 84).

Table 84	Social influencer metrics	
1. Number of influencers		3
2. Total number of posts (March 2019 – June 2020)		204
3. Average number of likes per post		15
4. Average number of comments per post		1
5. Average number reached per post		144
6. Average number of impressions per post		229
7. Average percentage of accounts reached who weren't followers		19%

Below are some examples of the posts promoted by the social influencers.

**A Real Mom:**  
Emotional, yet the rock.  
Tired, but keeps going.  
Worried, but full of hope.  
Impatient, yet patient.  
Overwhelmed, but never quits.  
Amazing, even though doubted.  
Wonderful, even in the chaos.  
Life Changer, every single day.  
- Rachel Martin



**You may not control  
all of the events that  
happen to you, but  
you can decide not to  
be reduced by them.**

-MAYA ANGELOU

## APPENDIX: INTERVIEW QUESTIONS

### COMMUNITY COALITION COORDINATOR AND CENTRAL NAVIGATOR QUESTIONS (North Platte, Norfolk, Douglas County)

#### **Community Assessments and Planning:**

1. Has the coalition/community conducted any new community-level assessments in the past 6 months? If so, please describe the process, who was involved, the outcome, and how it will be used as part of the grant.
2. Describe how PAF has supported the alignment of CR and CYI. How would you describe the integration of the three funding sources?

#### **Youth Recruitment Progress:**

3. Please provide a general description of the PAF-eligible participants being served by the grant?
4. Tell me about how enrollment of youth in the program is going. Do you have more or less youth than you can currently serve?
5. Do you have a **plan or process to enroll new** PAF-eligible participants? If so, please describe.
6. What progress was made towards enrolling new PAF-eligible participants? Any segment of this population you are missing and plan to try to reach?
7. What types of programming and services are you referring PAF-eligible participants and their children?

#### **Implementation of Activities**

8. How is PAF enhancing your work with young people in the community and filling a “gap”?
9. What grant strategies have been implemented since receiving the funding? Have you made any adjustments to your plan based on challenges or things that have gone well?
10. Have you identified or changed anything based on “lessons learned” that altered the course of the project?
11. How would you describe the evaluation data collection process? Any concerns or challenges?

#### **Families Thrive Training and other Trainings**

12. Did you conduct the Families Thrive Community Partners Training Assessment again in year 2? If so, who completed and, how is, or will it be used?
13. Did you complete a training plan for this year? Or for a post-grant timeframe? If so, how was it developed? And how will it be used?
14. Describe the training that has occurred in the community since July 2019. What other trainings are planned for year 2?
15. Who is conducting the trainings (i.e., Families Thrive) and are the trainers from your community?
16. What other trainings beyond Families Thrive are being offered in the community?
17. What barriers or challenges are you facing with training? What has been successful?
18. Are you currently involved in the recruitment of participants for the Family Thrive training or other trainings? Please explain.
19. Are there certain sectors not participating in the trainings? If so, do you know the reason why?
20. From your perspective, how have, or will, the trainings increase the awareness and the ability of community providers to provide help to those youth in the community that need help? Please describe.

#### **System Change**

21. At the system level, do you feel a sufficient number of community providers and coaches across all sectors will be trained to impact outcomes for youth and their children in the community? Please explain.
22. Have you experienced or observed any changes in the “system” since the beginning of the grant? Please explain.
23. How would you rate, on a scale from 1-10, the value your coalition or community places on servicing this youth population of expectant and parenting youth? Please explain.
24. Who would be included in the system in your community? Who are the key stakeholders for the project? Would this be reflected in the partners list submitted initially to project staff? Would this list be appropriate for a community system-wide stakeholder survey?



25. Has there been any expansion of partners to the project, or key partners missing from the project? If so, what has been the impact to the project.
26. Are there any new program practices or policies as a result of the grant that you are aware of?
27. Please share a system or provider success story.

**Impact on Youth**

28. Comment on the effectiveness of the support service funds to help youth towards a better life/situation.
29. Beyond support services funding, what else from the program has led to better outcomes for youth?
30. Of those youth that you supported last year; approximately how many are still receiving coaching? Approximately how many have returned for additional assistance?
31. How would you recommend obtaining feedback from the youth that were served in the program on how the grant has had an impact on their lives, e.g., online survey, paper survey, focus groups, interviews? And do you believe they would be willing to participate?
32. Please share a youth success story.

**General Barriers and Facilitators, and Lessons Learned, etc.:**

33. Identify what have been the overall barriers or challenges you faced this past 6 months with the program? How have they been addressed?
34. Any unanticipated successes with the program?
35. Has the program grown the past 6 months? If so, in what areas, and what type, of growth have you seen in the program?
36. Is there anything that has changed this second (and final) year that may affect implementation of the grant activities?
37. What do you need from NCFE, if anything, to assist you in the implementation of the grant?

**Sustainability Planning**

38. What progress, if any, has been made with community-level sustainability plans? (i.e., Bring up Nebraska workplans are/may being considered their sustainability plan)
39. How would you rate, on a scale from 1-10, the value your coalition or community places on sustaining the program past the grant to serve expectant and parenting youth? Please explain.
40. Has there been any additional funds secured to date to serve expectant and parenting youth past the life of the grant? If so, please describe.

**Other**

41. Is there anything else you would like add that might be helpful?

## **COMMUNITY COALITION COORDINATOR AND CENTRAL NAVIGATOR QUESTIONS (Lancaster County, Sarpy County)**

**Community Assessments and Planning:**

1. Has a coalition/community conducted any new community-level assessments? If so, please describe the process, who was involved, the outcome, and how it will be used as part of the grant.
2. Describe how PAF has supported the alignment of CR and CYI. How would you describe the integration of the three funding sources?

**Youth Recruitment Progress:**

3. Please provide a general description of the PAF-eligible participants youth being served by the grant?
4. Tell me about how enrollment of youth in the program is going. Do you have more or less youth than you can currently serve?
5. Do you have a **plan or process to enroll new** PAF-eligible participants? If so, please describe.
6. What progress was made towards enrolling new PAF-eligible participants? Any segment of this population you are missing and plan to try to reach?
7. What types of programming and services are you referring PAF-eligible participants and their children?

**Implementation of Activities**

8. How is PAF enhancing your work with young people in the community and filling a "gap"?

9. **OPTIONAL** What grant strategies have been implemented since receiving the funding? Have you made any adjustments to your plan based on challenges or things that have gone well?
10. **OPTIONAL** Have you identified or changed anything based on “lessons learned” that altered the course of the project?
11. How would you describe the evaluation data collection process? Any concerns or challenges?

#### **Families Thrive Training and other Trainings**

12. Did you conduct the Families Thrive Community Partners Training Assessment? If so, who completed and, how is, or will it be used?
13. Did you complete a training plan for this year? Or for a post-grant timeframe? If so, how was it developed? And how will it be used?
14. Describe the training that has occurred in the community since July 2019. What other trainings are planned for year 2?
15. Who is conducting the trainings (i.e., Families Thrive) and are the trainers from your community?
16. What other trainings beyond Families Thrive are being offered in the community?
17. What barriers or challenges are you facing with training? What has been successful?
18. Are you currently involved in the recruitment of participants for the Family Thrive training or other trainings? Please explain.
19. Are there certain sectors not participating in the trainings? If so, do you know the reason why?
20. From your perspective, how have, or will, the trainings increase the awareness and the ability of community providers to provide help to those youth in the community that need help? Please describe.

#### **System Change**

21. At the system level, do you feel a sufficient number of community providers and coaches across all sectors will be trained to impact outcomes for youth and their children in the community? Please explain.
22. Have you experienced or observed any changes in the “system” since the beginning of the grant? Please explain.
23. How would you rate, on a scale from 1-10, the value your coalition or community places on servicing this youth population of expectant and parenting youth? Please explain.
24. Who would be included in the system in your community? Who are the key stakeholders for the project? Would this be reflected in the partners list submitted initially to project staff? Would this list be appropriate for a community system-wide stakeholder survey?
25. Has there been any expansion of partners to the project, or key partners missing from the project? If so, what has been the impact to the project.
26. Are there any new program practices or policies as a result of the grant that you are aware of?
27. Please share a system or provider success story.

#### **Impact on Youth**

28. Comment on the effectiveness of the support service funds to help youth towards a better life/situation.
29. Beyond support services funding, what else from the program has led to better outcomes for youth?
30. Of those youth that you supported last year; approximately how many are still receiving coaching? Approximately how many have returned for additional assistance?
31. How would you recommend obtaining feedback from the youth that were served in the program on how the grant has had an impact on their lives, e.g., online survey, paper survey, focus groups, interviews? And do you believe they would be willing to participate?
32. Please share a youth success story.

#### **General Barriers and Facilitators, and Lessons Learned, etc.:**

33. Identify what have been the overall barriers or challenges you faced this past 6 months with the program? How have they been addressed?
34. Any unanticipated successes with the program?
35. What do you need from NCFF, if anything, to assist you in the implementation of the grant?

#### **Sustainability Planning**

36. What progress, if any, has been made with community-level sustainability plans?
37. How would you rate, on a scale from 1-10, the value your coalition or community places on sustaining the program past the grant to serve expectant and parenting youth? Please explain.

38. Has there been any additional funds secured to date to serve expectant and parenting youth past the life of the grant? If so, please describe.

**Other**

39. Is there anything else you would like add that might be helpful?

## PROJECT LEADERSHIP STAFF INTERVIEW QUESTIONS (NCCF)

### Community Assessments and Planning:

1. Have communities conducted any new community-level assessments in the past 6 months (or used previous assessments for year 1)? If so, how will they be used as part of the grant.
2. Describe how PAF has supported the alignment of CR and CYI. How would you describe the integration of the three funding sources?

### Youth Recruitment Progress:

3. Please provide a general description of the PAF-eligible participants i.e., youth being served by the grant?
4. Tell me about how enrollment of youth in the program is going. Are communities/the project at capacity?
5. Do communities have a **plan or process to enroll new** PAF-eligible participants? If so, please describe.
6. What progress has been made towards enrolling new PAF-eligible participants? Any segment of this population missing with plans to reach?
7. What types of programming and services are communities referring PAF-eligible participants and their children?

### Implementation of Activities

8. How is PAF enhancing the work with young people in the community and filling a “gap”?
9. What grant strategies have been implemented since receiving the funding? Any adjustments to the plan based on challenges or things that have gone well?
10. Have you identified or changed anything based on “lessons learned” that altered the course of the project?
11. How would you describe the evaluation data collection process? Any concerns or challenges?

### Families Thrive Training and other Trainings

12. Did communities conduct the Families Thrive Community Partners Training Assessment again in year 2 (first time for year 1 cohorts)? If so, who completed and, how is, or will it be used?
13. Did you complete a training plan for this year? Or for a post-grant timeframe? If so, how was it developed? And how will it be used?
14. Describe the training that has occurred in the community since July 2019. What other trainings are planned for year 2?
15. Who is conducting the trainings (i.e., Families Thrive) and are the trainers from communities?
16. What other trainings beyond Families Thrive are being offered in the community?
17. What barriers or challenges are communities facing with training? What has been successful?
18. Are communities currently involved in the recruitment of participants for the Family Thrive training or other trainings? Please explain.
19. Are there certain sectors not participating in the trainings? If so, do you know the reason why?
20. From your perspective, how have, or will, the trainings increase the awareness and the ability of community providers to provide help to those youth in the community that need help? Please describe.

### System Change

21. At the system level, do you feel a sufficient number of community providers and coaches across all sectors will be trained to impact outcomes for youth and their children in the community? Please explain.
22. Have you experienced or observed any changes in the “system” since the beginning of the grant? Please explain.
23. How would you rate, on a scale from 1-10, the value communities place on servicing this youth population of expectant and parenting youth? Please explain.

24. Would key stakeholders for the project be reflected in the partners list submitted initially to project staff? Would this list be appropriate for a community system-wide stakeholder survey?
25. Has there been any expansion of partners to the project, or key partners missing from the project? If so, what has been the impact to the project.
26. Are there any new program practices or policies as a result of the grant that you are aware of?
27. Please share a system or provider success story.

#### **Impact on Youth**

28. Comment on the effectiveness of the support service funds to help youth towards a better life/situation.
29. Beyond support services funding, what else from the program has led to better outcomes for youth?
30. Of those youth that you supported last year; approximately how many are still receiving coaching? Approximately how many have returned for additional assistance?
31. How would you recommend obtaining feedback from the youth that were served in the program on how the grant has had an impact on their lives, e.g., online survey, paper survey, focus groups, interviews? And do you believe they would be willing to participate?
32. Please share a youth success story.

#### **General Barriers and Facilitators, and Lessons Learned, etc.:**

33. Identify what have been the overall barriers or challenges you faced this past 6 months with the program? How have they been addressed?
34. Any unanticipated successes with the program?
35. Has the program grown the past 6 months? If so, in what areas, and what type, of growth have you seen in the program?
36. Is there anything that has changed this second (and final) year that may affect implementation of the grant activities?
37. What do you need from DHHS or the project officer, if anything, to assist you in the implementation of the grant?

#### **Sustainability Planning**

38. What progress, if any, has been made with community-level sustainability plans?
39. How would you rate, on a scale from 1-10, the value communities place on sustaining the program past the grant to serve expectant and parenting youth? Please explain.
40. Has there been any additional funds secured to date to serve expectant and parenting youth past the life of the grant? If so, please describe.

#### **Other**

41. Is there anything else you would like add that might be helpful?

### **June 2020: Community Coalition Coordinator and Central Navigator; and Staff Final Interview Questions**

1. Describe the training that has occurred in the community since November of 2019. What other trainings occurred in year 2? What trainings will continue in the future (when in person trainings are again offered)?
2. From your perspective, how have, or will, the trainings increase the awareness and the ability of community providers to provide help to those youth in the community that need help? Please describe.
3. Have you experienced or observed any changes in the “system” since the beginning of the grant? Please explain.
4. Has there been any expansion of partners to the project, or key partners missing from the project? If so, what has been the impact to the project.
5. Are there any new program practices or policies as a result of the grant that you are aware of?
6. Comment on whether the project has worked to help youth towards a better life/situation for both themselves and their children. Was it effective as a dual generation approach?
7. (Include Performance Measures Documentation). To what extent were you able to achieve the number of young people served? Participation and recruitment challenges? (Probe Sarpy County)

8. Did you identify areas for improvement based on “lessons learned” that altered the course of the project?
9. Identify what have been the overall barriers or challenges you faced this past 6 months with the program? How have they been addressed?
10. Any unanticipated successes with the program?
11. Discuss what aspects of the project, if any, will be sustained through the collaborative and the community. Will this population continue to be a focus of the planned work of the coalition?
12. Has the perception of expecting or parenting young people in the community shifted as a result of the focus of the project on this population? If so, how would you describe that shift?
13. How and why were adaptations to NEPG implementation developed, and how did they advance the goals of the project?
14. As a result of the project, what adaptations within the coalitions or within the provider system have you experienced or observed? Do you anticipate these adaptations or changes to be a permanent shift how young people are being served or needs addressed? Please share your observations.
15. Comment on whether you believe a dual generation approach has been adopted by service organizations.
16. What changes have occurred working with expecting and parenting young people as a result of COVID-19? Do you envision these changes to be long-term?
17. Were you generally satisfied with the enrollment numbers? Please explain. STAFF ONLY
18. In the past year, what adjustments were made to strategies? STAFF ONLY