



Outcome and Cost-Savings Data for Selected Types of Family Support Services¹ - A Summary for Orange County Social Services -

Overview

Family resource centers are community-based, flexible, family-focused, and culturally sensitive facilities that provide programs and services based on the needs of families. Family resource centers, sometimes called family support centers, family centers, parent-child resource centers, family resource schools, or parent education centers, serve diverse populations and are located in a variety of community settings, including restored buildings, new buildings, school buildings, hospitals, housing projects, or churches. Family resource centers promote both the strengthening of families through formal and informal support, and the restoration of a strong sense of community.¹

Family Resource Centers are more than just a place but also represent a different philosophy and process than traditional approaches to providing services for families.² They are proactive, accessible and parent/community informed; they do not require that families falter to offer them help. (See [State and local examples](#).) Services provided by these “incubators for innovation”³ may include:

<ul style="list-style-type: none"> • Access to resources • Assistance with basic economic needs • Child development activities • Childcare • Community development activities • Drop-in centers • Home visiting • Housing • Job training 	<ul style="list-style-type: none"> • Literacy training • Mental health or family counseling • Parent leadership development • Parent support, including skills training • Respite and crisis care services • Services for children with special needs • Substance abuse prevention • Violence prevention
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Do Family Support Strategies Make a Difference?

In Table 1, we highlight some of the outcome data we have been able to find to date.⁴ Note that we have not included large-scale and effective home-visiting programs such as [Nurse Family Partnership](#) and [Family Connects®](#) (which is based on the [Durham Connects](#) model).

In reviewing the family resource center and other family support data, it is clear that many of these kinds of services have much to offer child welfare and broader community efforts that are interested in strengthening families so they do not need child welfare services or use them for a shorter period of time. ***While more studies are needed, it appears that some family resource centers have been able to reduce family poverty, parent isolation, deficits in parenting skills, child maltreatment re-occurrence, and use of out-of-home placements, as well as help children achieve permanency.***

Cost Savings

There have been relatively few cost-savings studies completed for these kinds of services. Examples are listed below:

- **Alabama Family Resource Network:** For every \$1 invested in Family Resource Centers, the State of Alabama received \$4.93 in immediate and long-term financial benefits.⁵ The Network’s parenting

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programs, including parenting education and support, fatherhood programs, and home visitation services, saw the largest fiscal impact, with a return of almost \$29 million after initial program delivery costs just over \$2.1 million.⁶

- **Vermont Parent Child Center Network:** By providing services to prevent Adverse Childhood Experiences, the 15 Centers save the State of Vermont \$210,000 (2010 dollars) per family that would otherwise would have been spent on addressing profound health effects, in addition to child abuse and neglect.⁷ Using 2015 data, they estimated that every year Vermont saves \$2,131,041 when each of Vermont’s 15 Parent Child Centers prevents these events from happening in their network: (a) One woman from entering a correctional facility; (b) One teen pregnancy resulting in birth; (c) One child from needing foster care placement; and (d) One mother and child from requiring public assistance.⁸

Conclusions

One of the major limitations for some of these programs is that they lack the capacity to track the **outcomes** of their services, and instead report primarily who was served and what they received. Many of the programs reporting outcomes data do not use a comparison group, a longitudinal approach, or a randomized control group design; so we are not sure if other families that were not served could also achieve the same results. Greater investments in rigorous evaluation studies are needed.

The success of many of the programs seems to be dependent upon how early they can reach families who might be experiencing a challenge. A wide range of funders are already supporting many of these projects – with technical assistance and in some cases financial investments. We need to enhance not only investments in the “outcomes measurement” tasks, but also in stabilizing those components of the model that we believe will drive more family resource centers towards success.

In summary, the small corpus of research indicates that these strategies fill a crucial but under-funded and under-evaluated niche in the services continuum. Title II of the federal Child Abuse and Prevention Treatment Act (CAPTA) is intended to fund these programs but congressional appropriations have been meager. So unless we want to depend on state or local county sources, greater and more stable sources of funding must be established because the use of local donations or grants from philanthropy is not sustainable. The programs hold much promise, but deserve to be funded in a more stable manner and evaluated rigorously.

Table 1. Outcome and Cost-Savings Data for Various Kinds of Family Support Services

Program	Outcomes	Research Methods
CRISIS NURSERIES		
Cleveland Providence House	<p>Reduced Foster Care Placements: When parents engage in Providence House services and complete recommended Providence House services (case management, parent education, and aftercare), their children are less likely to be placed in foster care after they leave Providence House.</p> <p>Certain ethnic minority groups are more successful: African American and Bi-racial families are the most successful (in comparison with Caucasian families), with more engagement in Providence House services and less foster care involvement after their child’s stay.</p> <p>Multiple placements is not a risk factor: 26% of children at Providence House in this study had multiple placements. Families that used Providence House multiple times were found to be no more likely to become involved with the foster care system than families that only used Providence House once.⁹</p>	Longitudinal data analysis with no comparison group ¹⁰

Program	Outcomes	Research Methods
<p>Oregon Relief Nurseries</p>	<p>Child abuse reports: 48% of families coming into the Relief Nursery have a history with Child Protective Services. After one year at the Relief Nursery, fewer than 5% of all families served receive any reports of abuse or neglect.</p> <p>Child literacy and school readiness: The percentage of parents reading to their children at least three times per week increased from 32% before enrollment to 52% after six months of Relief Nursery support.</p> <p>Child placement prevention: Nearly all (98.5%) of the children enrolled in Relief Nurseries between 2008 and 2010 avoided foster care and continued living safely with their families. A 2011 Portland State University study found that Relief Nurseries reduce foster care placements.¹¹</p> <p>Emergency room use: Relief Nurseries link families to health care resources, as evidenced by decreased use of emergency room services for routine care.</p> <p>Family economic stability: By providing assistance connecting with job training, education, employment assistance and other community resources such as WIC, TANF and child care subsidies, family employment increased from 18% at intake to 32% after 24 months.</p> <p>Family risk factors associated with child abuse and neglect: Average number of mutable risk factors dropped from 9-7 in the 12 months after intake. (2011 study)</p> <p>Healthy child development: 90% of the children attending the Relief Nursery are at age-appropriate levels.¹²</p> <p>Permanency achievement: Relief Nurseries helped children exit the foster care system twice as quickly as those not receiving services.¹³</p> <p>Substance abuse reduction: 85% of parents with a history of substance abuse who participate in the Relief Nursery Alcohol and Drug Recovery Support Program are still clean and sober 17 months after treatment.¹⁴</p>	<p>Pre and post assessment, with no comparison group</p> <p>Comparison group study</p> <p>Longitudinal data analysis with no comparison group</p>
FAMILY RESOURCE NETWORKS		
<p>Alachua County (4 centers)</p>	<p>Substantiated reports of child maltreatment: In comparing FY 08/09 and FY 16/17, the Alachua County showed a 62% overall decrease in counts of verified child maltreatment. It should also be noted that in the five zip codes served by the Resource Centers, there was a 67% reduction, compared with a 59% reduction in areas not served by the three Alachua Resource Centers.¹⁵</p>	<p>Geographic comparison group</p>
<p>Allegheny County Family Support Centers (26 centers)</p>	<p>Rates of child abuse and neglect investigations: Neighborhoods with the 25 Family Support Centers included in the evaluation had significantly lower rates of child abuse and neglect investigations than similar neighborhoods without them (30.5 investigations per 1,000 children versus 41.5 per 1,000 children).¹⁶</p>	<p>Geographic comparison group</p>
<p>California Family Support Network Study (25 collaborative networks - not centers)</p>	<p>Using the Family Development Matrix (FDM)¹⁷ these networks significantly improved parent functioning in the following areas:</p> <p>Clothing: 10.6% percentage point increase</p> <p>Community resource knowledge: 33 percentage point increase from baseline assessment</p> <p>Emotional well-being: 10.4% percentage point increase</p> <p>Family budgeting: 13 percentage point increase from baseline assessment</p> <p>Risk of emotional or sexual abuse: 0.6% percentage decrease</p> <p>Support system: 12.5 percentage point increase¹⁸</p>	<p>Pre and post assessment, with no comparison group</p>

Program	Outcomes	Research Methods
<p>Los Angeles Prevention Initiative Demonstration Project (PIDP) (8 networks)</p>	<p>Employment: From 2008-10, the SPA 6 ASK, Seek, Knock (ASK) Centers trained and placed nearly 300 local residents in the workforce.</p> <p>Permanency: In the Pomona and El Monte Family Reunification (FR) cases the PIDP FR children were more likely to leave foster care during the study period and more likely to experience positive “permanency exits” (reunification, adoption, legal guardianship), and Family Maintenance children were more likely to have closed cases compared with those in randomly selected comparison groups.</p> <p>The Faith-Based Family Visitation Centers in South County and Torrance also showed better results in helping children find permanency. The 79 children with open FR cases who had access to the visitation centers were more likely to leave foster care and more likely to exit through a positive “permanency exit” than were members of the randomly selected comparison group. Seventy-one percent of the PIDP sample left foster care during the study period versus 55% of the comparison group, and 69% of the PIDP children experienced “permanency exits” compared with 50% of the comparison group.</p> <p>Re-referrals for child maltreatment: In Compton between June 2008 and July 2010 Emergency Response families who accessed the ASK Centers in Compton were significantly less likely to be re-referred to DCFS; about 12% had re-referrals compared with 23% of the randomly-selected comparison group.</p> <p>In Lancaster families served by the PIDP network compared with a random sample of comparison families suggests that families receiving PIDP services were less likely to be re-referred to DCFS. Only 23% of families who had received PIDP services were re-referred to DCFS during the study period versus 31% of the comparison group.</p> <p>Social connections: Benefits cited by parents included greater involvement in their community, more desire to engage in community activities, and feeling less lonely or isolated.²⁵</p>	<p>Pre and post assessment, with no comparison group</p> <p>Randomly selected comparison groups</p> <p>Comparison group</p> <p>Randomly selected comparison groups</p> <p>Randomly selected comparison groups</p> <p>Pre and post assessment, with no comparison group</p>
<p>Maryland Family Network (25 family support centers and 12 child care resource centers)</p>	<p>Family self-sufficiency: Gains in family self-sufficiency were found, most notably around parent employment status. Almost twice as many parents (43%) were employed one year after participating in services from Maryland Family Resource Centers than at their initial enrollment in programs (27%).²⁶</p>	<p>Pre and post assessment, with no comparison group</p>
<p>Massachusetts Family Support Programs</p> <p>(22 FRCs through Dept. Children and Families</p> <p>88 Coordinated Family and Community Engagement Programs through Early Education and Care</p>	<p>Parent satisfaction: Satisfaction survey from FRCs funded through the Department of Children and Families show that families’ satisfaction with both FRC services and programming is very high. In addition, success stories from each FRC provide qualitative evidence of the programs’ positive impacts on families.²⁷</p>	<p>Post-test data with no comparison group</p>

Program	Outcomes	Research Methods
7 Family Centers through Children's Trust)		
New York State Family Resource Center Network (18 agencies)	<p>Overall improvements in parenting aspects that protect against child abuse and neglect after engaging in services, including:</p> <p>Accessing concrete support services</p> <p>Family functioning increased</p> <p>Nurturing and attachment increased</p> <p>Social supports increased²⁸</p>	Post-test data with no comparison group
Orange County Network (15 centers)	<p>Parent knowledge of parenting: Families participating in Parenting Education had a 10% improvement to the question "There are many times when I don't know what to do as a parent", a 16% improvement to "In my family, we talk about problems", and a 17% improvement to "My family pulls together when things are stressful."</p> <p>Parent knowledge of how to keep the children in my care safe from abuse: Families participating in the Personal Empowerment Program (PEP) were asked "I feel able to keep myself and the children in my care safe from abuse." While only 72% responded yes on the pre-test; 97% responded yes on the post-test.</p> <p>Knowledge and use of community resources to be safe or stable: Of those that received support from a family support specialist, only 24% were assessed as "Safe" or "Stable" in the domain "Community Resources and Knowledge." Upon the second assessment, 92% were rated as "Safe" or "Stable"</p> <p>Increase in friends among youth: Youth participating in Out-of-School Time programs and activities have a 11% improvement in the question "I have friends in this youth program" and a 17% improvement for this item: "there is at least one adult at this program that I feel comfortable talking to."²⁹</p>	Pre and post assessment, with no comparison group
San Francisco Family Resource Centers (25 centers)	<p>These Centers show beginning evidence of effectiveness for child abuse prevention and for working with families who are screened out of the child welfare system through differential response (sometimes called "alternative response" in other states).</p> <p>Children involved in the child welfare system: 15% drop in the last 15 years.</p> <p>Child re-entry into the system: Decreased by more than half - from 23% to 11% in the last 15 years.</p>	Longitudinal data analysis with no comparison group
Seattle Family Support Network. (14 centers)	<p>2017 data on the percentage of individuals and families improving in these areas:</p> <p>Access to needed information and services: 97</p> <p>Connection to community: 99%</p> <p>Overall physical and behavioral health: 95%</p> <p>Skills related to education, life skills, employment or technology: 95%³⁰</p>	Post assessment, with no comparison group
Vermont Parent Child Center Network (15 centers)	<p>Child placement: Strengthening Families provides intensive family services to families who have open family support cases with the Family Services Division of the Department for Children and Families. These families have been assessed at "high" or "very high" risk of maltreating their children in the future. Seventy percent (70%) of all DCF open cases have a child under the age of 3. Historically (without Strengthening Families), 30% of children with open family support cases come into state custody. With Strengthening Families, only 7% of children with open cases have come into custody, and the children are safe.³¹</p>	Longitudinal data analysis with no comparison group

Program	Outcomes	Research Methods
MULTI-PURPOSE FAMILY SUPPORT CENTERS (Including school-based centers or supports)		
Communities in Schools³²	<p>National data across multiple schools reveals these outcomes:</p> <p>Attendance: 78% of the students met or made progress toward their attendance goals.</p> <p>Behavior: 90% of the students met or made progress towards their behavior goals.</p> <p>Educational achievement: 88% of the students met or made progress toward their academic improvement goals. 94% of the students were promoted to the next grade and 84% of high school seniors graduate on time. 93% of the seniors graduated or received a GED.³³</p>	Pre and post assessment, with no comparison group
Family Support Services of North Florida, Inc.	Child placements: Placements have decreased by 41% -- from 1,750 children (2006) to 724 children (2017). ³⁴	Pre and post assessment, with no comparison group
Hagerstown	Social Connections: Over the course of services, parent ratings of their social connections increased from moderate to high levels for those parents in the Strengthening Ties and Empowering Parents (STEPS) program. ³⁵	Pre and post assessment, with no comparison group
Magnolia Community Initiative in Los Angeles	<p>Families reading: With multiple initiatives underway, from FY2014-15 to 2017-18 the proportion of families reading daily increased from 63% to 73%.³⁶</p> <p>Parent concrete and emotional support: Parents are reporting that they can get childcare for the hours they need it (44.1%), and someone can watch their child if they need to run an errand (53.9%).³⁷</p> <p>Family resilience: My family pulls together when things are stressful (63.8%)</p>	<p>Longitudinal assessment, with no comparison group</p> <p>Community survey with no comparison group</p>
San Jose Somos Mayfair Resource Center	School readiness: Trained in the internationally practiced Promotor Model , Promotores impart lessons and support families to adopt practices that foster successful students and healthy families. Since the initiatives' launch, Somos-served children have experienced a 43% gain in school readiness and a 50% gain in 3rd grade reading proficiency -- key indicators for educational success. ³⁸	Pre and post assessment, with no comparison group
Sunset Park in Brooklyn	Child placements: In the 2017 program year, out of a total of 1,012 children served in the maltreatment prevention program, no child entered foster care. In 2016, out of 1,189 children served, only 1 child entered foster care. ³⁹	No comparison group
POPULATION-LEVEL STRATEGIES		
Triple-P in South Carolina	<p>Behavioral and emotional problems: In communities where Triple P is widely available, children have fewer behavioral and emotional problems.⁴⁰</p> <p>Child abuse rates: Decreased in a South Carolina study.⁴¹</p> <p>Child placements: Decreased in a South Carolina study.⁴²</p> <p>Child problem behavior: Triple P reduces problem behavior in children and improves parents' wellbeing and parenting skills.⁴³</p> <p>Hospitalizations from child abuse injuries: Decreased in a South Carolina study.⁴⁴</p>	Geographic comparison group

Program	Outcomes	Research Methods
	<p>Parent stress and discipline: Parents using Triple P say they are less stressed, less depressed, and don't use harsh discipline.⁴⁵ Parents of children with Autism Spectrum Disorders using Stepping Stones Triple P report they are more satisfied as parents, their children's behavior has improved and their relationship with their partner is better.⁴⁶</p>	

References

- ¹ See <https://www.childwelfare.gov/topics/preventing/prevention-programs/familyresource/>
- ² For more information about the types of family support services see: <https://www.nationalfamilysupportnetwork.org/family-support>
- ³ The four most common family resource center services from the 2015-2016 OMNI study funded by the Robert Wood Johnson Foundation are: Parenting Support, Access to Resources, Child development Activities, and Parent Leadership Development (Personal Communication, Andrew Russo, July 30, 2019). Also see: Judi Sherman & Associates. (2017). *Vehicles for Change, Vol. II, The Evolving Field*. Sacramento: California Department of Social Services, Office of Child Abuse Prevention. Retrieved from http://shcowell.org/wp-content/uploads/2017/11/Vehicles_for_Change_II.pdf
- ⁴ The Packard Foundation has contracted with Paul Harder and Associates to conduct secondary data collection across California on FRCs - gathering the data that counties, First 5's and Networks have already collected about FRCs and analyzing them together to tell a compelling story (Personal Communication, Andrew Russo, July 30, 2019).
- ⁵ These data are from a Social Return on Investment Study conducted by Community Services Analysis for the Alabama Network of Family Resource Centers. See http://www.acjf.org/uploadedFiles/File/SROI_-_Legal_Aid_and_ANFRC.pdf
- ⁶ National Family Support Network. (2019). *State network snapshots - 2019*. Washington, D.C.: Author, p. 4.
- ⁷ The Vermont network savings include \$33,000 in childhood health care costs, \$11,000 in adult medical costs, \$144,000 in productivity losses, \$8,000 in child welfare costs, \$7,000 in criminal justice costs, and \$8,000 in special education costs (The National Family Support Network, 2018).
- ⁸ Vermont Parent Child Center Network. (2016). *Parent Child Centers are the answer*. Retrieved from <https://legislature.vermont.gov/assets/Documents/2016/WorkGroups/House%20Appropriations/Previous%20State%20Budgets/FY2016%20State%20Budget/Public%20Hearings/Advocates%202-24-2015/W~Danielle%20Lindley~FY2016%20Budget%20-%20Parent%20Child%20Center%20Network%20-%20Advocate%20Hearing~2-24-2015.pdf>
- ⁹ Crampton, D. & Yoon, S. (2016). Crisis nursery services and foster care prevention: An exploratory study, *Children and Youth Services Review*, 61, 311-316, doi.org/10.1016/j.childyouth.2016.01.001. Also see <https://www.provhouse.org/outcomes/research>
- ¹⁰ The study includes a sample of 322 children from the administrative data from a crisis nursery in Ohio. Generalized estimating equations analysis was conducted to assess the relationship between crisis nursery services (case management and parenting education) and subsequent foster care placement.
- ¹¹ Green, B. L. & Rogers, A. (2011). *Evaluation of the Oregon Relief Nurseries July 1, 2008 - June 30, 2010*. Portland: Center for Improvement of Child and Family Services, Portland State University. <http://www.familyplacere relief.org/wp-content/uploads/2012/09/Final-2008-2010-OARN-report.pdf>. Also see Sutherland, K. (2016). *Relief Nursery™ Preventing Child Abuse and Neglect*. Retrieved from https://legislature.idaho.gov/wp-content/uploads/sessioninfo/2016/interim/160930_fcsc_03_ReliefNurseInfo.pdf
- ¹² Sutherland (2016).
- ¹³ Green, B. L. & Rogers, A. (2011); Sutherland (2016).
- ¹⁴ Sutherland (2016).
- ¹⁵ The four Alachua County Resource Centers (3 in Alachua County, 1 in Chiefland in Levy County) received over 33,000 visitors and assisted with more than 44,000 service requests during calendar year 2017; this is an increase of approximately 1000 visitors from the previous year. The outcome data being referenced is from the 3 Alachua County RC's. Approximately 10 new partnerships were established in 2017, allowing additional on-site services and outreach ranging from parenting classes and provision of additional concrete supports to on-site counseling services for children (Personal Communication, Pebbles Edelman, September 21, 2018).
- ¹⁶ Allegheny County Department of Human Services and Chapin Hall Center for Children. (2016). *An evaluation of the family support center network*. Pittsburgh: Author. Wulczyn, F. & Lery, B. (2018). *The impact of family support centers on the rates of investigations*. Chicago: Chapin Hall Center for Children. (PowerPoint presentation)
- ¹⁷ The Family Development Matrix (FDM) is a comprehensive and strengths-based assessment and practice tool that enhances the community's commitment to supporting at risk families while tracking family and service outcomes. The FDM is a prevention and early intervention assessment and case management tool used in partnership with referral agencies to engage families to achieve change. The FDM facilitates family participation in case management providing reliable information from which to plan family goals

- using existing their strengths, application of best practice interventions and a family empowerment plan. See Endres, J. (2016). *Family Assessment Effectiveness of California Family Resource Centers Using Family Development Matrix Outcomes*. Weed, CA: Matrix Outcomes Model, LLC. Retrieved from <http://matrixoutcomesmodel.com/MatrixFiles/2016%20Evaluation%20Paper.pdf>
- ¹⁸ Endres, J. (2016). p. 11.
- ¹⁹ Using the Colorado Family Support Assessment to track family progress across multiple domains (e.g., financial, food, employment, housing, and transportation), families across the state demonstrated statistically significant increases in economic self-reliance as well as on other domains that contribute to self-reliance. In the September 2017 annual evaluation report, more than 3,300 families completed the Colorado Family Support Assessment 2.0 (CFSA 2.0). Of these families, 62% remained engaged receiving at least one CFSA 2.0 follow-up assessment. Growth models, a type of advanced analysis, revealed families who screened positive in one or more areas of need on the required screening tool were lower in Economic Self-Sufficiency at baseline but demonstrated greater growth in Economic Self-Sufficiency over the year than families who did not screen with an unmet need. See <http://www.cofamilycenters.org/wp-content/uploads/2018/09/Eval-Report-Fact-Sheet-FINAL.pdf>
- ²⁰ The National Family Support Network. (2019). Page 10.
- ²¹ The National Family Support Network. (2019). Pages 13-14.
- ²² The National Family Support Network. (2018). *The value of family support and strengthening programs*. Washington, DC: Author.
- ²³ The 2018 Kentucky FRC Impact Report Spotlight, which contains specific programs and local data, can be found here: <https://chfs.ky.gov/agencies/dfrcvs/dfrysc/Documents/FRYSC%20Impact%20Report%20Spotlight%202018.pdf>
- ²⁴ McCroskey, J., Franke, T., Christie, T., Pecora, P. J., Lorthridge, J., Fleischer, D., & Rosenthal, E. (2010). *Prevention Initiative Demonstration Project (PIDP): Year two evaluation summary report*. Los Angeles: LA County Department of Children and Family Services and Seattle: Casey Family Programs. Retrieved from <http://www.casey.org/Resources/Publications/PIDP/year2.htm>
- ²⁵ McCroskey, Franke et al., (2010). Note while sample sizes were small in some of the comparison group studies, statistically significant results were found in key outcome areas.
- ²⁶ The National Family Support Network (2018).
- ²⁷ Henry, A. D., Gettens, J., Pratt, C., & McGlinchy, L (2017, March). Massachusetts Family Resource Center Program Evaluation Report: Calendar Year 2016. Shrewsbury MA: Center for Health Policy and Research, University of Massachusetts Medical School. Retrieved from <https://www.masslegalservices.org/system/files/library/fy2016-family-resource-center-annual-report.pdf> Also see [The National Family Support Network. \(2019\). Page 22.](#)
- ²⁸ The National Family Support Network (2019). Pages 30-31.
- ²⁹ Families and Communities Together. (2017). *2016-2017 Annual Report*. Tustin, CA: Author.
- ³⁰ The National Family Support Network (2019). Pages 26-27.
- ³¹ Vermont Parent Child Center Network (2016).
- ³² Through a school-based coordinator, CIS brings community resources into schools to empower success for all students by removing barriers for vulnerable students at risk of dropping out, keeping children in schools and on the path to graduation; and leveraging evidence, relationships and local resources to drive results. See <https://www.communitiesinschools.org/our-model/>
- ³³ Communities In Schools. (2018). *Community Matters: Focus on chronic absenteeism.*. Arlington, VA: Author. Retrieved from <https://www.communitiesinschools.org/our-data/publications/publication/community-matters-report-2018>
- ³⁴ Personal Communication, Larry West, September 21, 2018.
- ³⁵ *FY2018 STEPS data final*. (Personal communication, Keith Fanjoy, September 25, 2018.)
- ³⁶ Magnolia Community Initiative. (2018). *MCI 'Innovations Group' Participant reading routines – Early Care and Education*. (histogtam). Personal Communication, Sam Joo, October 2, 2018.
- ³⁷ Magnolia Community Initiative. (2017). *Magnolia Community Initiative – 2017: MCI Community survey results*. Personal Communication, Sam Joo, October 2, 2018.
- ³⁸ Judi Sherman & Associates. (2017), p. 18.
- ³⁹ Sunset Park provides a 300 family-capacity child maltreatment prevention program, which serves both indicated cases referred directly from the child welfare authority as well as voluntary cases that emerge from our community. (Personal Communication, Elizabeth Turner, September 21, 2018).
- ⁴⁰ Sanders, M.R., Ralph, A., Sofronoff, K., Gardiner, P., Thompson, R., Dwyer, S., & Bidwell, K. (2008). Every Family: A population approach to reducing behavioral and emotional problems in children making the transition to school. *Journal of Primary Prevention*, 29, 197-222.
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- ⁴² Prinz et al. (2009).
- ⁴³ Nowak, C. & Heinrichs, N. (2008). A comprehensive meta-analysis of Triple P - Positive Parenting Program using hierarchical linear modeling: Effectiveness and moderating variables. *Clinical Child and Family Psychology Review*, 11, 114-144.

⁴⁴ Prinz et al. (2009).

⁴⁵ Sanders, M.R., Ralph, A., Sofronoff, K., Gardiner, P., Thompson, R., Dwyer, S., & Bidwell, K. (2008). Every Family: A population approach to reducing behavioral and emotional problems in children making the transition to school. *Journal of Primary Prevention*, 29, 197-222.

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