

North Hartford Ascend
Strengthening Families Protective Factors Framework
Community of Practice
Summary Report for the Spring 2025 Cohort

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Strengthening Families Protective Factors Framework

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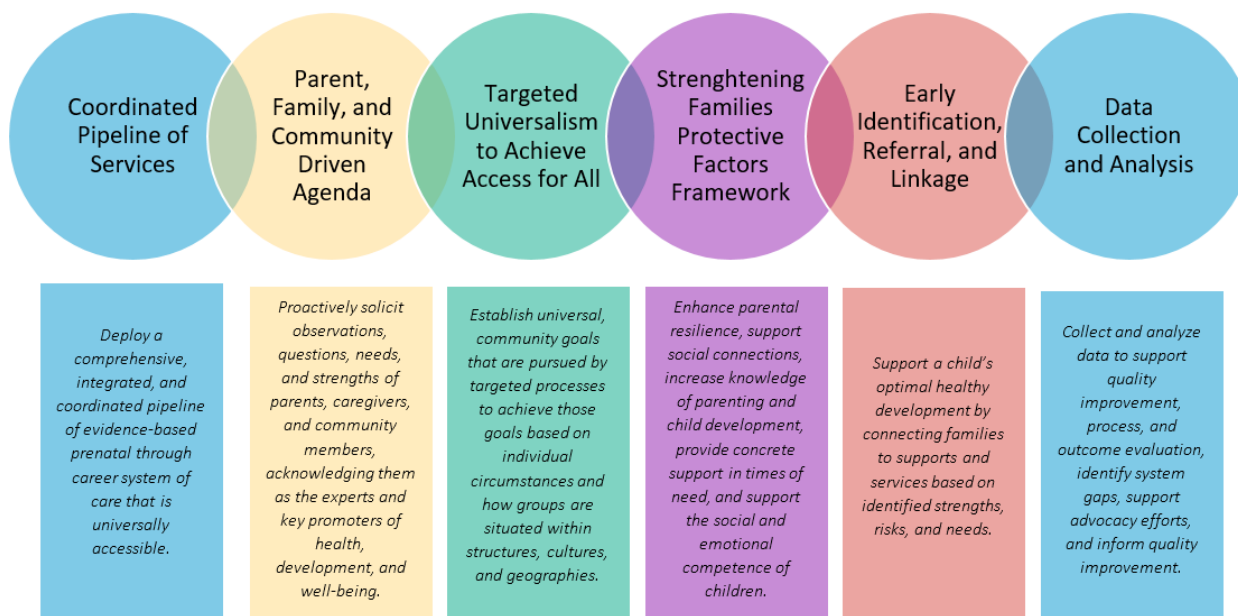
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Introduction

In February of 2025, Childhood Prosperity Lab launched a Strengthening Families Protective Factors Framework Community of Practice for North Hartford Ascend (Ascend). The Community of Practice (CoP) aimed to provide a collaborative and engaging platform for organizations and programs affiliated with North Hartford Ascend to learn about and explore core principles of the Strengthening Families Protective Factors Framework and how it can be leveraged to support the well-being of children and families living in the North Hartford Promise Zone. Through collaborative learning and mutual support, participants enhanced their understanding of the five protective factors that comprise the Framework, why they matter, and how to integrate protective factors more intentionally into their work to help children and families thrive. This effort highlights the commitment of both Childhood Prosperity Lab and North Hartford Ascend to help children and families thrive where they live, learn, work, play, and pray.

North Hartford Ascend

[North Hartford Ascend](#) is a prenatal-to-career initiative designed to ensure children and families living in the North Hartford Promise Zone, which includes Clary Arsenal, Northeast, and Upper Albany, have the support they need to reach their full potential. Facilitated by Connecticut Children's and its Office for Community Child Health, Ascend's affiliated organizations are working to create a comprehensive, integrated, and coordinated network of programs, services, and other resources that are universally available to children and families. Funded by a U.S. Department of Education Promise Neighborhoods Grant, Ascend promotes systems transformation by focusing on six core components, as outlined in Figure 1: Ascend Core Components (below).



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Childhood Prosperity Lab

Research shows that 90% of children's health is driven by the complex interplay between social, behavioral, environmental, and genetic/epigenetic factors (McGinnis et al., 2002). Established in 2015, Connecticut Children's [Childhood Prosperity Lab](#) (the Lab) is one of seventeen community-oriented programs in the [Office for Community Child Health](#) supporting the development and impact of strong child- and family-serving systems and sectors. The Lab focuses on advancing [social innovations](#)¹ by:

- 1) **Co-designing with Families and Communities:** families and communities are engaged in the design, implementation, and evaluation of social innovations they are intended to access, utilize, and benefit from.
- 2) **Advancing Systems Thinking and Change:** changemakers use systems thinking to understand how their innovation fits within the network of supports and services available to children and families, understand how their innovation might generate change, and then work across organizational and sectoral boundaries to lead change.
- 3) **Strengthening Protective Factors:** social innovations strengthen protective factors, including parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need, and social-emotional competence of children.

The Lab offers a range of services in support of each of these core components to support changemakers and advance social innovations, including Mastermind Sessions, technical assistance, and training. Team members of the Lab were certified by the [Children's Trust Fund Alliance](#) to provide training on the Strengthening Families Protective Factors Framework.



of children's health is affected by a combination of social, environmental, behavioral, and genetic factors.

The Strengthening Families Protective Factors Framework

The Strengthening Families Protective Factors Framework (SFPFF) is “a research-informed approach to increase family strengths, enhance child development and reduce the likelihood of child abuse and neglect” (Center for the Study of Social Policy, 2023). In 2003, The [Center for the Study of Social Policy](#) (CSSP) developed the Framework as a resource for programs helping children, families, and communities to build protective factors in their everyday lives. According to the Children's Trust Fund Alliance logic model, if systems, agencies, and individuals are supported to strengthen child-, youth- and family protective factors, then families will be

¹Childhood Prosperity Lab defines social innovations as creative strategies that support the health, development, and well-being of children, families, and communities. Social innovations: 1) are implemented where children and families live, learn, work, play, and pray to support accessibility; utilization, and impact; 2) build upon the existing strengths and assets of families and communities; 3) are developed in partnership with families and communities to ensure they align with their lived experiences, goals, preferences, and needs; and 4) are integrated into existing organizational- and community-level infrastructure, relationships, and systems.

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strengthened; child development will be optimized; and the likelihood of childhood abuse and neglect will be reduced. While many protective factors strengthen families, the five protective factors that comprise the Framework are outlined in Table 1: Protective Factors.

Table 1: Protective Factors²

Parental Resilience	Managing stress and functioning well when faced with challenges, adversity and trauma.
Social Connections	Positive relationships that provide emotional, informational, instrumental and spiritual support.
Knowledge of Parenting and Child Development	Understanding child development and parenting strategies that support physical, cognitive, language, social and emotional development.
Concrete Support in Times of Need	Access to concrete support and services that address a family's needs and help minimize stress caused by challenges.
Social and Emotional Competence of Children	Family and child interactions that help children develop the ability to communicate clearly, recognize and regulate their emotions and establish and maintain relationships.

Strengthening Families Protective Factors Framework Community of Practice Approach

The Lab defines a Community of Practice as a facilitated approach to disseminating promising, evidence-informed, and/or evidence-based social innovations to new settings, contexts, and/or communities. Key activities that underpin the Lab's approach to Communities of Practice include:

- **Learning Sessions:** curriculum-based, interactive workshops that provide a foundational understanding of the Strengthening Families Protective Factors Framework and each protective factor while allowing participants to practice emerging skills in a peer-to-peer setting;

² Strengthening Families Protective Factors Framework (The Center for the Study of Social Policy, 2023)

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- **Collaboration Sessions:** application-based workshops that support participants' practice change and active skill-building via peer-to-peer learning and semi-structured discussions, including the implementation of Plan-Do-Study-Act cycles (PDSA's)³; and
- **Data Collection and Analysis:** a data collection and analysis strategy that measures knowledge change, practice change, and participant value and satisfaction with all activities.

North Hartford Ascend Spring 2025 Community of Practice

In February of 2025, The Lab launched its second Strengthening Families Protective Factors Framework Community of Practice with partners of North Hartford Ascend. North Hartford Ascend is a place-based initiative that provides access to the children and families living in the North Hartford Promise Zone to the services and supports they need to reach their full potential from prenatal-to-career.

A total of twelve participants registered for the Community of Practice, representing four different agencies/organizations affiliated with Ascend, including Connecticut Children's Injury Prevention Center & Center for Care Coordination, United Way of Northeastern and Central Connecticut, The City of Hartford, and Catholic Charities. Most of the participants were direct service providers and frontline staff of their organization.



Implementation Approach

The Lab's training model consists of seven learning sessions (an introduction, five separate courses on each protective factor, and a wrap-up) as well as three 90-minute, monthly collaboration sessions. Collaboration sessions are a unique activity of the Lab's Community of Practice on the framework.

In addition to knowledge change, The Lab believes that practice change leads to stronger and more intentional implementation of the theories and skills introduced to participants in the learning sessions. Collaboration sessions are peer-to-peer, semi-structured discussions designed to cultivate skill/practice change, and serve as a space to discuss the adaptation of strategies tested. In between each collaboration session, participants are provided a PDSA cycle template to plan and monitor their practice change.

³PDSAs are defined as a four-stage model for improvement. The tool provides structure for testing a change by developing a to test the change (Plan), carrying out the test (Do), observing and learning from the outcomes (Study), and determining what modifications should be made to the test whether that is abandoning, adapting, or adoption the change (Act).

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PDSA's are defined as a four-stage model for improvement. The tool provides a structure for testing a change by developing a plan to test the change (Plan), carrying out the test (Do), observing and learning from the outcomes (Study), and determining what modifications should be made to the test whether that is abandoning, adapting, or adoption the change (Act). In collaboration sessions two and three, participants were expected to report on their PDSA's.

Table 2: Community of Practice Structure and Timeline

Date	Activity	Theme
2/6/25	Learning Session and Feedback Survey	Introduction
2/13/25	Learning Session and Feedback Survey	Resilience
2/20/25	Learning Session and Feedback Survey	Social Connections
2/27/25	Learning Session and Feedback Survey	Concrete Support in Times of Need Guest Speaker: Norma Pizzaro , <i>The Village for Children and Families</i>
3/6/25	Learning Session and Feedback Survey	Social and Emotional Competence of Children Guest Speaker: Erika Rivera , <i>Assistant Director of Support Services at Hartford Public Schools</i>
3/13/25	Learning Session and Feedback Survey	Knowledge of Parenting and Child Development Guest Speakers: Kirsten Carlone and Prisely Martinez , <i>211 Child Development</i>
3/20/25	Learning Session and Feedback Survey	Wrap-up
4/3/25	Collaboration Session & Feedback Survey	Strength-Based Theory & Positive Childhood Experiences
5/8/25	Collaboration Session, PDSA Report Out, & Feedback Survey	Active & Reflective Listening Skills
6/5/25	Collaboration Session, PDSA Report Out, & Feedback Survey	Strengthening Families Jeopardy

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Value and Satisfaction

Community of Practice participants were asked to complete a feedback survey after each learning session and each collaboration session to document perceptions of value and satisfaction while supporting continuous quality monitoring and improvement. Participants were prompted to complete the value and satisfaction survey at the end of each activity, and then again in a follow-up email that was distributed the day after each activity.

Learning Sessions

- 95.7% agreed or strongly agreed they were satisfied with the quality of the sessions;
- 100% agreed or strongly agreed the facilitators effectively communicated session content and guided discussion;
- 97.82% agreed or strongly agreed they understand the importance and role of using strength-based approaches in North Hartford Ascend;
- 100% agreed or strongly agreed they understand the importance of culture in strengthening families' protective factors; and
- 95.7% agree or strongly agree they can make small yet significant changes to strengthen families' protective factors in their role.

When asked about the most helpful ideas, concepts, or theories from the session series, participants reported:

- "It was helpful to have the community partners join and present what resources they offer."
- "I liked having the opportunity to collaboratively find ways to support families. Working with other service providers answer how we would support families if our organization doesn't have the capacity to deliver what is needed."
- "Breakout sessions to network with two new programs and exchanging information. It was very useful for me."
- "Watching the videos and clips and having strong conversations! I really enjoy these trainings."

Collaboration Sessions

- 90.9% agreed or strongly agreed collaboration sessions helped them feel more confident about applying the Strengthening Families Protective Factors Framework to their work; and
- 90.9% agreed or strongly agreed they learned something helpful from another participant or the facilitators of the session.

When asked about the most helpful components of the sessions, participants reported:

- "I think the activity where we reframed statements and responded to scenarios was the most helpful. Most of the groups had different thoughts and approaches, that was good to see."
- "The Jeopardy game was a great way to challenge our knowledge of the material."

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- “The session was interactive and the jeopardy game was well played. I loved meeting with a participant one on one and get their perspective on the PSDA.”
- “The breakout rooms and brainstorming with other service providers.”

Evidence and Impact of Knowledge & Practice Change

Knowledge Change

To understand whether the Community of Practice impacted knowledge change, the Lab administered a baseline and end-of-project survey. The measures of the survey remained consistent to monitor changes in knowledge change. The survey assessed the following:

- The degree to which participants understand the importance of protective factors as it relates to child-, youth- and family health and well-being outcomes;
- The degree to which participants understand strength-based theory;
- Self-perceived knowledge and skillset to apply the Strengthening Families Protective Factors Framework;
- Tools and strategies that participants are leveraging to strengthen child-, youth- and family health and well-being outcomes;
- The degree to which participants can correctly identify protective factors, as measured by an exercise that prompts them to match a fictitious scenario of a “protective factor in action” to one of the five protective factors that comprise the framework (see Appendix A).

Five participants completed the baseline and end-of-project survey. While additional participants completed the survey at the closure of the project, that data has been omitted from Appendix B-D for the purposes of analyzing comparison data. Based on the data, all five participants reported a notable increase in their self-perceived knowledge and skillset to apply the Strengthening Families Framework; the importance of protective factors; and the importance of recognizing family strengths.

Practice Change

Community of practice participants were prompted to explore, integrate, and understand the impact of *small but significant* practice changes throughout the project. At the end of each learning session, participants were prompted to identify one *small but significant* change practice change they intended to focus on the following week. At the start of the next learning session, participants were prompted to provide an update indicating if they incorporated the *small but significant* practice change and if so, what they observed upon its implementation.

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As described previously, PDSA cycles were a core activity of collaboration session 2 and 3. PDSA cycles served as a more formal mechanism for participants to commit to, document, and understand the impact of *small but significant changes* (see Appendix E).

Learning Sessions

When asked about what they might do differently as a result of participating in the learning sessions, participants reported:

- “I will approach situations differently by looking for the positives instead of the negatives even if they are sticking out a lot more.”
- “Be mindful of family cultures.”
- “I will practice active listening and try not to jump in too quickly to solve parent’s issues.”
- “Ask even more questions. Get even more curious.”

Collaboration Sessions

At collaboration sessions 2 and 3, participants were asked to share examples of how they integrated the concepts, theories, and skills from the Framework into their practice. Approximately twelve examples of practice change were documented in these sessions. Themes that emerged from the collaboration sessions as it relates to practice change include reimagining team dynamics and community-based partnerships to strengthen social connections and intentionally and meaningfully connecting families to services to strengthen concrete support in times of need. A few examples are highlighted on the next page.

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Organization/Agency	Example of Practice Change
Connecticut Children's and UConn Health's Pediatric, Youth and Family HIV Program (HYHIL)	The participant facilitated a virtual Youth & Young Adult Recovery group, creating a space for participants to connect with one another and learn about healthy tools and strategies for coping with stress, strengthening the protective factors of social connection, concrete support in times of need, and social and emotional competence.
211 Child Development	The participant intentionally planned to take more time to connect with a parent on a call to develop a positive relationship and to let the parent know that they are supported by the 211 team to strengthen social connection. In doing so, the participant shared that in "reflecting on the conversations I've had, I feel really good about the work I have done. It is so rewarding to hear a parent say 'thank you for being there for me'. I feel that I have created bonds with families, as opposed to just getting through the task I was assigned."
Connecticut Children's Center for Care Coordination	The participant intentionally planned to identify and elevate examples of parental resilience in their calls with families. In their PDSA, the participant noted that the parents were appreciative of them and acknowledged their <i>own</i> strengths, demonstrating parental resilience in real time. Additionally, the parents expressed that they felt heard during the interaction, demonstrating "active listening" – a key skill that participants learned about in the training.
United Way of Northeastern and Central Connecticut	Serving as a concrete support in times of need, the participant hosted a series of conversations with young adults to understand, from their perspective, the strengths, challenges, and opportunities of the workforce in Connecticut.
Connecticut Children's Injury Prevention Center	The participant intentionally planned to expand their existing network of partnerships with other community agencies who are leading injury prevention work across the Neighborhood Revitalization Zones (NRZ's) to strengthen the coordination of concrete support in times of need.

Stay connected

- **Email:** childhoodprosperitylab@connecticutchildrens.org
- **Facebook:** Connecticut Children's Community Child Health
- **LinkedIn:** Connecticut Children's Office for Community Child Health
- [Advancing Kids Blog](#)

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Appendix

Appendix A: The section of the baseline survey that measures knowledge of the individual protective factors using fictitious yet relevant scenarios.

Mr. Phillips notices that his son, Kamari, is using sign language to communicate that he wants more food. Mr. Phillips excitedly writes down this milestone to share at their next well-child visit.

Select or enter value

Taylor is a recent youth graduate of Weaver High School and is searching for employment. Taylor reaches out to Capital Workforce Partners to learn more about opportunities in the area, and accesses the Ascend Community Resource Map to search of bus routes.

Select or enter value

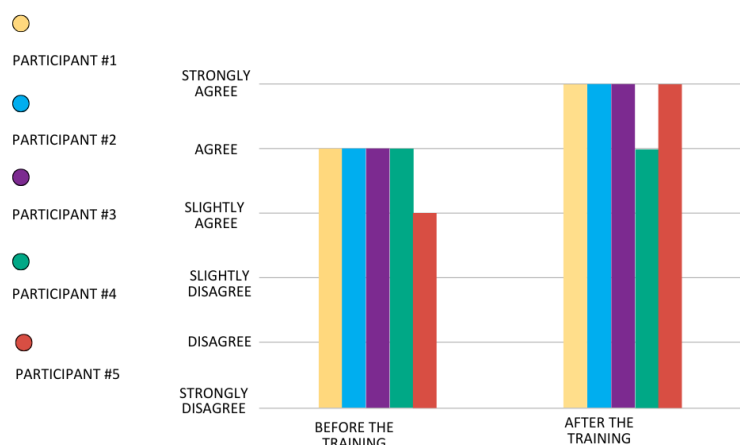
Parental Resilience
Social Connections
Knowledge of Parenting and Child Development
Concrete Support in Times of Need
Social and Emotional Competence of Children

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Appendix B: Responses from five participants who completed the baseline and end-of-project survey measuring their self-perception of the importance of protective factors.

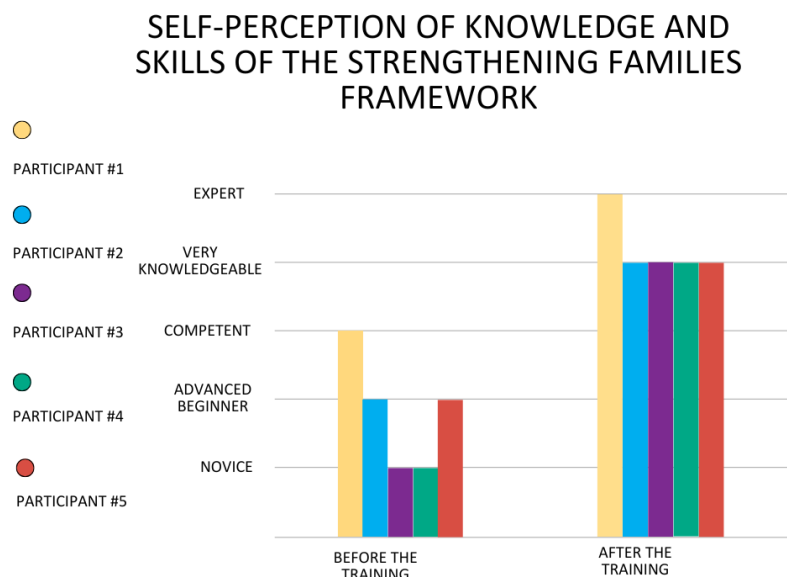
SELF-PERCEPTION OF THE IMPORTANCE OF PROTECTIVE FACTORS



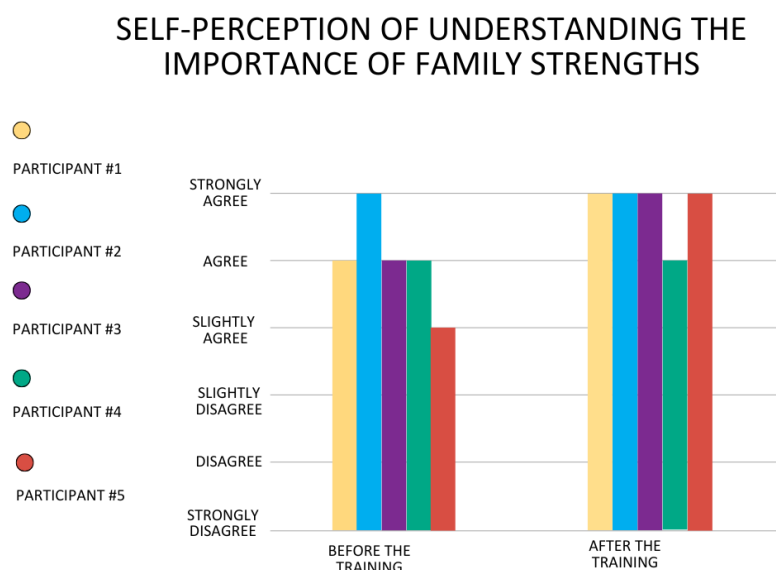
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Appendix C: Responses from five participants who completed the baseline and end-of-project survey measuring their self-perceived knowledge and skills applying the Framework.



Appendix D: Responses from five participants who completed the baseline and end-of-project survey measuring their self-perceived understanding of the importance of recognizing family strengths.



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Appendix E: The PDSA template that participants used to document and track practice change.

PDSA #1



Beginning Date for Test: April 7th
Completion Date for Test: May 5th

PLAN Who, what, when, where	DO Record data and observations. What are the implications?	STUDY What happened?	ACT Will you abandon, adapt, or adopt the strategy? What did you learn?