# North Hartford Ascend
# Strengthening Families Protective Factors Framework
# Community of Practice
# Summary Report for the Fall 2024 Cohort

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NORTH HARTFORD ASCEND

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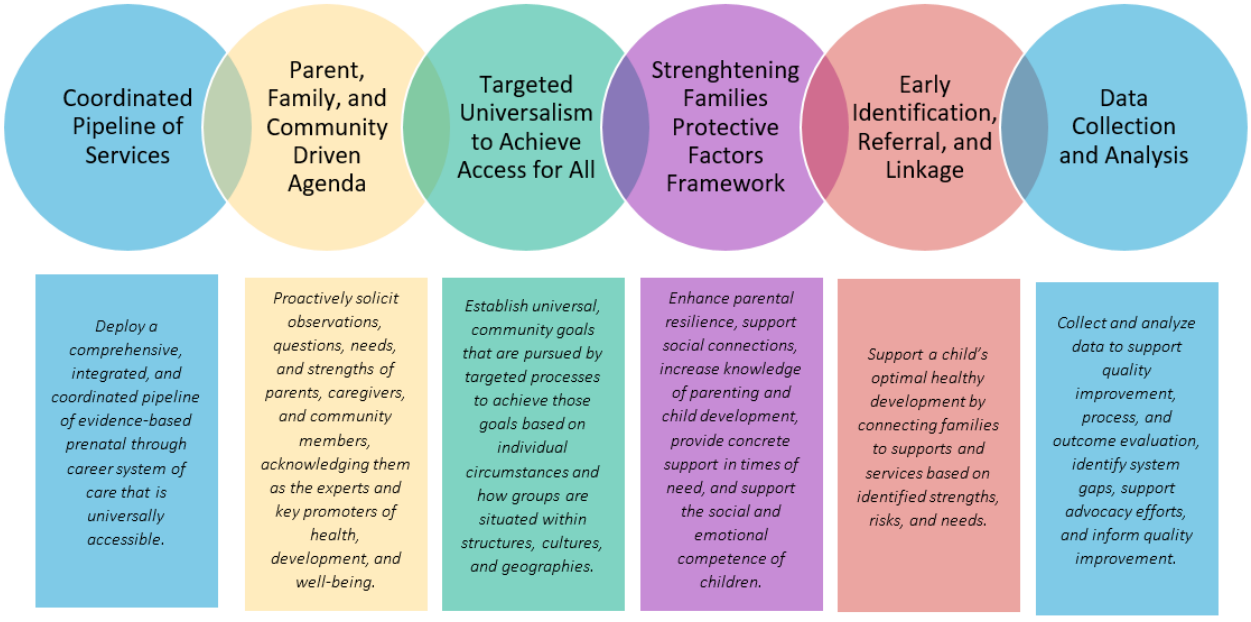
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## Introduction

In September of 2024, Childhood Prosperity Lab facilitated 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).



## 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.

## 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 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.

[1]Childhood 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.

*Table 1: Protective Factors*[2]

| | |
|---|---|
| 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;
- ***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

[2] Strengthening Families Protective Factors Framework (The Center for the Study of Social Policy, 2023)
[3]PDSAs 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).

- ***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 Fall 2024 Community of Practice



In September of 2024, The Lab launched its inaugural 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 fifteen participants registered for the Community of Practice, representing eleven different agencies/organizations affiliated with Ascend, including Connecticut Children's; Wheeler Clinic; Hartbeat Ensemble; Hartford Health Initiative; United Way of Northeastern and Central Connecticut; The Children's Museum; City of Hartford; San Juan Center; Intercommunity; Hartford Promise; 211 Child Development; and the Urban Ecology Wellness Center. Not only was the Community of Practice diverse in sector representation but also in leadership level. Some of the participants were managers in their organization, while others were joining as direct service providers and frontline staff.

### 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.

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 |
|---|---|---|
| 9/9/24 | Learning Session and Feedback Survey | Introduction & Resilience |
| 9/16/24 | Learning Session and Feedback Survey | Social Connections |
| 9/23/24 | Learning Session and Feedback Survey | Concrete Support in Times of Need |
| 9/30/24 | Learning Session and Feedback Survey | Knowledge of Parenting and Child Development |
| 10/7/24 | Learning Session and Feedback Survey | Social and Emotional Competence of Children & Wrap Up |
| 10/29/24 | Collaboration Session & Feedback Survey | Strength-Based Theory & Positive Childhood Experiences |
| 10/29/24 | Collaboration Session, PDSA Report Out, & Feedback Survey | Active & Reflective Listening Skills |
| 11/22/24 | Collaboration Session, PDSA Report Out, & Feedback Survey | Practicing Warm Handoffs |

## 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*

- 100% 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;
- 100% 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
- 92.8% 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:

- "I was already passingly familiar with how meaningful social connections could be in development for individuals, but I wasn't sure to what degree it was of importance. The repeated statistics about loneliness being as negative an effect on health as smoking 15 cigarettes a day was an interesting and concerning metric - it did make me consider reframing just how important social connections are to families, and I fully intend to implement that exact statistic in our volunteer orientation."
- "Understanding how a family's culture needs to be accounted for and respected during the process of providing support. Engaging the parent/caregiver in understanding their goals, expectations, and priorities for their child (and themselves) by active listening, acknowledgments, asking clarifying or open-ended questions."

### *Collaboration Sessions*

- 87.5% agreed or strongly agreed collaboration sessions helped them feel more confident about applying the Strengthening Families Protective Factors Framework to their work; and
- 100% 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:

- "Going over the strength-based wording."
- "Reviewing PDSA cycles."
- "Hearing other people's experiences with active listening."
- "Being able to share with one another and getting feedback."
- "Great session. Challenging, thought-provoking questions and conversations."

## Evidence and Impact of 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.

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.*

### *Learning Sessions*

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

- "Reminding my staff that parents are the experts."
- "It's been valuable to map out the strong ties to family for some of our programs, and I intend to identify more ways it's applicable to our afterschool programs."
- "Brainstorm with my care coordination team on how we can change our language and ask questions that integrate a more strength-based approach rather than a deficit approach."
- "In general, I plan to put more emphasis on the importance of social connections in our program - in fact, I almost asked if I could directly cite the research and presentation in our orientation later this year. I plan to add at least a few slides speaking about how important friendship is, and perhaps highlighting some accounts from previous years. I believe this emphasis can be important to put when offering volunteer engagement opportunities - building connections between volunteers is something we haven't fully explored!"

## *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. More than ten examples of practice change were documented in these sessions. Themes that emerged from the collaboration sessions as it relates to practice change include: restructuring team meetings with staff to focus more on how they are strengthening protective factors – inclusive of what is successful and what is challenging about applying concepts from the Framework; reconsidering the language used and approach to communicating with youth and families; approaching the planning and implementation of community events differently, and facilitating warm handoffs when families are searching for services. A few examples are highlighted below.

| Organization/Agency | Example of Practice Change |
|---|---|
| Wheeler Clinic | The participant encouraged their staff to prioritize one protective factor each week to monitor application and practice change. Observations and reflections were shared and debriefed at team meetings. |
| 211 Child Development | The participant invited different partners from the community to present their programs and services as a refresher for their staff so that they can ask questions and make connections. The participant also trained their staff on Sparkler, a concrete support available to all families in Connecticut with children ages prenatal through five. |
| Hartbeat Ensemble | The participant worked to customize youth "resource envelopes" abundant with community resources students might need or want access to, including the Ascend QR code and other flyers. |
| The Children's Museum | The participant facilitated a warm handoff by connecting a family at their educational programming event at the local library, and, followed up with the family via email to ensure they got connected. |
| United Way of Northeastern and Central Connecticut, Dolly Parton Imagination Library | The participant connected with a Librarian in the community to create a December newsletter for families. The newsletter specifically called attention to concrete supports in the community, like the Sparkler app, HartfordTalks, and other resources that the Librarian recommended. |

| | |
|---|---|
| United Way of Northeastern and Central Connecticut, United Way Readers Program | The participant added a slide to the United Way Readers volunteer orientation that specifically describes the impact ad importance of building social connections with children (i.e., the readers). Additionally, the participant collaborated with the program manager to explore how the program might measure social connections differently in the "attitude climate" survey students complete. The survey captures students' joy and perceived impact of reading with their volunteers through a baseline and end-of-program survey. In the future, the participant might add an in-person activity to the annual Read for the Record event. For instance, if the selected book emphasizes social and emotional learning, the team might incorporate a 'belly breathing' activity to help students strengthen their social-emotional skills. |

## Stay connected

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