

BUILDING RESILIENT FAMILIES

Evaluation Report



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Period covered: January 1, 2017 – December 31, 2017

Submitted by:

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Prepared for:



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Department of Social Work

Background:

The Arizona Department of Child Safety's (DCS) Building Resilient Families (BRF) is a community-based intervention program for families whose children are assessed as safe following a Family Functioning Assessment by DCS, but need assistance and guidance to strengthen family protective factors and reduce the chance of future reports. BRF aims to allow children and families to receive necessary assistance to promote safe parenting and positive behavioral change. Cases are referred to contracted private agencies for the provision of services. A continuum of services provided by contracted provider agencies and community partnerships are available to families based on identified risk factors and family needs. The family's DCS case may close, but is not required to close, in order to receive BRF services. The majority of families receive services without continued DCS involvement. Building Resilient Families was developed in response to the need of families with school-aged children, for whom home visiting services were not readily available. Current visitation models in the community focus on very young children (0-5 years old).

Program Attributes:

- a) BRF provides short-term family supportive intervention services in cases where children are considered safe but where assistance is needed, in order to promote the Protective Factors and prevent subsequent reports of child abuse and neglect. Providers are to use evidence-based strategies or curricula based on the needs, concerns and/or stressors identified by DCS and the family. It is preferred that this service be provided in the family's home. The provider agencies deliver family support and assistance services, needs assessments, parent aide-type services, and parenting training/skills services, to include the following:
 - 1) Structured parenting education and child development;
 - 2) Crisis intervention services;
 - 3) Communication and negotiation skills;
 - 4) Domestic violence education;
 - 5) Problem solving skills and stress management;
 - 6) Nutrition and home management;
 - 7) Conflict resolution, anger management;
 - 8) Linkage to community resources;
 - 9) Job readiness education and training;
 - 10) Peer mentoring;
 - 11) Systems of support; and
 - 12) Coordination with Title XIX providers.

- b) For additional services that the family requires, the contractor assists families to engage in community services, as available, through collaborative partners within the community, to include but not be limited to:
 - 1) Housing search and relocation;
 - 2) Emergency services;
 - 3) Shelter services with parental consent;
 - 4) Supportive intervention/guidance counseling;
 - 5) Child care;
 - 6) Transportation;
 - 7) Respite services;
 - 8) Other services identified through the needs assessment.

Service Length and Case Closure:

The provider agency delivers services to a family for a maximum of one-hundred twenty (120) calendar days and a maximum of 55 total chargeable hours. The goal is to transition the family off of services by building resilience and healthy connections with family and community supports. The provider agency conducts at least one visit per month to the home. The other family contacts may be at other locations that are mutually agreeable to the family and provider agency.

BRF services include ongoing, comprehensive aftercare planning. From the initial contact to case closure, families are provided with direct services and are linked with community resources to bolster the network of family supports and connections. The provider closes the case upon completion of services. During the closure meeting, the provider discusses with the family the progress that they have made and achievement (or lack of) toward the original goals, noting risks and recommendations, and develops an aftercare plan with the family.

Provider Agencies:

Agencies contracted with DCS to deliver the BRF program during the period covered by this evaluation period (calendar year 2017) are listed below. During this time, the project was initially available to families in Maricopa County.

- Applied Behavioral Interventions
- Arizona's Children Association
- Chicanos Por La Causa
- Step Up Arizona
- Southwest Human Development
- Teen Outreach Pregnancy Services

There were two evaluation tools used by BRF providers and services, the data from which are analyzed in this evaluation. DCS allowed provider agencies to continue to use their preferred evidence-based instrument if they already had one in place, when BRF services began. Two agencies used the Adult Adolescent Parenting Inventory 2.1 (AAPI) and the remaining four providers used the Protective Factors Survey (PFS).

What is the Protective Factors Survey (PFS)?

The PFS is a pre-post evaluation tool for use with caregivers receiving child maltreatment prevention services. It is a self-administered survey that measures protective factors in five areas: family functioning/resiliency, social support, concrete support, nurturing and attachment, and knowledge of parenting/child development.

Protective Factors Covered in the PFS

Family Functioning/ Resiliency

- Having adaptive skills and strategies to persevere in times of crisis. Family's ability to openly share positive and negative experiences and mobilize to accept, solve, and manage problems.

Social Emotional Support

- Perceived informal support (from family, friends, and neighbors) that helps provide for emotional needs.

Concrete Support

- Perceived access to tangible goods and services to help families cope with stress, particularly in times of crisis or intensified need.

Child Development/ Knowledge of Parenting

- Understanding and utilizing effective child management techniques and having age-appropriate expectations for children's abilities.

Nurturing and Attachment

- The emotional tie, along with a pattern of positive interaction, between the parent and child that develops over time.

What is the Adult Adolescent Parenting Inventory 2.1 (AAPI)?

The AAPI-2.1 is an inventory designed to assess the parenting and child rearing attitudes of adolescents and adult parent and pre-parent populations. Based on the known parenting and child rearing behaviors of abusive parents, responses to the inventory provide an index of risk for practicing behaviors known to be attributable to child abuse and neglect. The AAPI-2.1 is the revised and re-normed version of the original AAPI first developed in 1979.

Sub-Scales

Responses to the AAPI-2.1 provide an index of risk in five specific parenting and child rearing behaviors:

- **Construct A** - Expectations of Children
- **Construct B** - Parental Empathy towards Children's Needs
- **Construct C** - Use of Corporal Punishment
- **Construct D** - Parent-Child Family Roles
- **Construct E** - Children's Power and Independence

Construct A

Expectations of Children

Inappropriate Expectations

- Expectations exceed developmental capabilities of children.
- Lacks understanding of normal child growth and development.
- Self-concept as a parent is weak and easily threatened.
- Tends to be demanding and controlling.

Appropriate Expectations

- Understands growth and development.
- Children are allowed to exhibit normal developmental behaviors.
- Self-concept as a caregiver and provider is positive.
- Tends to be supportive of children.

Construct B

Parental Empathy towards Children's Needs

Low Level of Empathy

- Fears spoiling children.
- Children's normal development needs not understood or valued.
- Children must act right and be good.
- Lacks nurturing skills.
- May be unable to handle parenting stresses.

High Level of Empathy

- Understands and values children's needs.
- Children are allowed to display normal developmental behaviors.
- Nurtures children and encourages positive growth.
- Communicates with children.
- Recognizes feelings of children.

Construct C

Use of Corporal Punishment

Strong Belief in the Value of Corporal Punishment

- Hitting, spanking, slapping children is appropriate and required.
- Lacks knowledge of alternatives to corporal punishment.
- Lacks ability to use alternatives to corporal punishment.

- Strong disciplinarian, rigid.
- Tends to be controlling, authoritarian.

Values Alternatives to Corporal Punishment

- Understands alternatives to physical force.
- Utilizes alternatives to corporal punishment.
- Tends to be democratic in rule making.
- Rules for family, not just for children.
- Tends to have respect for children and their needs.
- Values mutual parent-child relationship.

Construct D

Parent-Child Family Roles

Reverses Family Roles

- Tends to use children to meet self-needs.
- Children perceived as objects for adult gratification.
- Tends to treat children as confidant and peer.
- Expects children to make life better by providing love, assurance, and comfort.
- Tends to exhibit low self-esteem, poor self-awareness, and poor social life.

Appropriate Family Roles

- Tends to have needs met appropriately.
- Finds comfort, support, companionship from peers.
- Children are allowed to express developmental needs.
- Takes ownership of behavior.
- Tends to feel worthwhile as a person, good awareness of self.

Construct E

Children's Power and Independence

Restricts Power and Independence in Children

- Tends to view children with power as threatening.
- Expects strict obedience to demands.
- Devalues negotiation and compromise as a means of solving problems.
- Tends to view independent thinking as disrespectful.

Values Power and Independence in Children

- Places high-value on children's ability to problem solve.
- Encourages children to express views but expects cooperation.
- Empowers children to make good choices.

Overview of evaluation:

This report evaluates the experience of the 533 households that entered into the Building Resilient Families program in 2017. The BRF experience of 359 of these households was measured using the Protective Factors Survey (PFS), while the experience of the other 174 households was measured using the Adult Adolescent Parenting Inventory (AAPI). Both the PFS and AAPI involve the use of pretest and posttest measures that allow for an evaluation of change during program participation. For all of the BRF-participating households evaluated here, a PFS or AAPI pretest was recorded. Of the 533 households, a PFS or AAPI posttest was recorded for 109. This relatively low rate of posttests is obviously not ideal, but may be explained at least in part with reference to families' engagement level and their motivation in services. Many families remain engaged with BRF services long enough to have their needs met and then disengage from the program, making it difficult to administer a posttest.

BRF-participating households by evaluation instrument and pre/posttest completion

	Instrument					
	AAPI		PFS		Total	
	N	%	N	%	N	%
Pretest only	132	76%	292	81%	424	80%
Pretest and posttest	42	24%	67	19%	109	20%
Total	174	100%	359	100%	533	100%

In addition to AAPI and PFS pretest and posttest data, this report describes demographic information about participating households from the AAPI, PFS, and the Department of Child Safety's Family Data Collection Form (FDCF), as well as data from the DCS Children's Information Library and Data Source (CHILDS) system on DCS Hotline reports and child removals database.

Results:

The following pages outline the results of the evaluation, as expressed in terms of:

- Demographic information on BRF participants by whether the participant completed an AAPI or PFS pretest, or both a pretest and posttest.
- Information on re-reports and removals during and following services, by whether the participant completed an AAPI or PFS pretest, or both a pretest and posttest
- Protective Factors Survey (PFS) changes from pretest to posttest, for both individual items and for subscales
- Adult Adolescent Parenting Inventory (AAPI) changes from pretest to posttest
- Change from intake to discharge with regard to presenting issues, as measured by the DCS Family Data Collection Form

BRF Participant Demographics

	<i>All</i>	<i>Pretest and posttest</i>	<i>Pretest only</i>
Number of Participants	533	109	424
Gender			
Female	88%	92%	87%
Male	12%	8%	13%
Age	34.0	34.8	33.9
Average # of Children under 18	2.0	2.1	2.0
Average child age (as of referral)*	7.9	8.2	7.9
Average # of Adults in household	1.5	1.5	1.5

**Child date of birth is not available for AAPI clients; these figures represent PFS clients only (300 of 533 clients, or 56 percent of the total).*

Language

English	87%	82%	89%
Spanish	12%	18%	10%
Other	1%	0%	1%

Ethnicity

African American	11%	10%	12%
African national/Caribbean	0%	0%	0%
Asian	1%	1%	0%
Hispanic or Latino	46%	43%	47%
Middle Eastern	1%	0%	1%
Multi-racial	2%	4%	1%
Native American or Alaska Native	3%	1%	3%
Native Hawaiian/Pacific Islander	1%	1%	1%
White (Non-Hispanic, European American)	36%	40%	35%

Marital status

Divorced	14%	14%	14%
Married	24%	29%	23%
Partnered	13%	12%	13%
Separated	8%	6%	9%
Single	39%	37%	40%
Widowed	2%	2%	2%

BRF Participant Demographics, continued

	<i>All</i>	<i>Pretest and posttest</i>	<i>Pretest only</i>
Family income**			
\$0-\$10,000	28%	30%	28%
\$0-\$15,000	15%	9%	17%
\$10,001-\$20,000	6%	5%	6%
\$15,001-\$25,000	12%	11%	13%
\$20,001-\$30,000	3%	2%	4%
\$25,001-\$40,000	10%	11%	9%
\$30,001-\$40,000	3%	7%	2%
\$40,001-\$60,000	4%	5%	4%
\$40,001-\$50,000	6%	5%	7%
Over \$50,000	3%	10%	2%
Over \$60,000	8%	4%	8%

***Income categories for PFS and AAPI are different, so there is overlap between categories here*

Average family income (in thousands of dollars/year)	22.9	24.9	22.8
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Education

2-Year College Degree	5%	6%	5%
4-Year College Degree	6%	5%	6%
Elementary or Junior High	9%	9%	8%
High School Diploma/GED	26%	33%	24%
Master's Degree	1%	1%	1%
PhD or other Advanced Degree	1%	0%	1%
Some College	24%	19%	26%
Some High School	24%	25%	24%
Trade or Vocational Training	5%	3%	6%

Re-report during services (n)	37	4	33
(%)	7%	4%	8%

Re-report within year (n)	64	13	51
(%)	12%	12%	12%

Removal during services (n)	7	0	7
(%)	1%	0%	2%

Removal within year (n)	16	3	13
(%)	3%	3%	3%

The tables on the previous pages report demographic characteristics for the 533 participating BRF households, broken down by whether the client completed an AAPI or PFS pretest and posttest, or a pretest only.

The great majority of participating clients (88 percent) are female. The average age of the BRF participant was 34.0 years. The average BRF household contained 2.0 children under the age of 18. The average age of children in BRF households upon the date of referral to the program was 7.9 years. It should be noted that data on children's ages is not available from clients completing the AAPI; therefore, the data reported here represents only those clients who completed the PFS, or 300 of the 533 clients (56 percent).

The average BRF household contained 1.5 adults. English is the primary language spoken in 87 percent of BRF households, followed by Spanish (12 percent of households), and "Other" languages (1 percent). Forty-six percent of BRF clients are Hispanic or Latino, 36 percent are White, and 11 percent are African-American.

Thirty-nine percent of BRF clients are single, 24 percent are married, 14 percent are divorced, and 13 percent are living with a partner.

Because the categories used to report income on the AAPI and PFS instruments are different, there is overlap between income categories in the table. The most commonly reported income category for BRF households is "\$0-\$10,000" (28 percent of households), followed by "\$0-\$15,000" (15 percent). By using a midpoint of each income category, an overall average family income may be estimated. Using this technique, the average family income for BRF clients is estimated to be \$22,900.

In terms of education level, 26 percent of BRF clients report having a high school degree or equivalent, while 24 percent have had some college education, and another 24 percent have had some high school education. Overall, a total of 63 percent of BRF participants have at least a high school degree.

Data from the DCS Children's Information Library and Data Source (CHILDS) system was used to evaluate re-reports and child removals among BRF households. Overall, 101 BRF households, or 19 percent of total BRF households, experienced a re-report, either while BRF services were being administered or within one year after the closure of BRF services. Of these re-reports, 37 (or 37 percent) occurred during the administration of BRF services, while 64 (or 63 percent) occurred within one year after the closure of BRF services.

Overall, 23 BRF households, or 4 percent of total BRF households, experienced a child removal, either while BRF services were being administered or within one year after the closure of BRF services. Of these removals, 7 (or 30 percent) occurred during the administration of BRF services, while 16 (or 70 percent) occurred within one year after the closure of BRF services.

Protective Factors Survey pretest/posttest changes (individual survey items)

	Pretest	Posttest	Change
1. In my family, we talk about problems.	5.25	5.44	0.19
2. When we argue, my family listens to "both sides of the story"	5.18	5.42	0.24
3. In my family, we take time to listen to each other.	5.06	5.27	0.21
4. My family pulls together when things are stressful.	5.46	5.58	0.12
5. My family is able to solve our problems.	5.18	5.52	0.34
6. I have others who will listen when I need to talk about my problems.	5.76	5.93	0.17
7. When I am lonely, there are several people I can talk to.	5.60	5.91	0.31
8. I would have no idea where to turn if my family needed food or housing. (R)	4.80	5.45	0.65*
9. I wouldn't know where to go for help if I had trouble making ends meet. (R)	4.88	5.40	0.52
10. If there is a crisis, I have others I can talk to.	5.51	6.03	0.52*
11. If I needed help finding a job, I wouldn't know where to go for help. (R)	5.08	5.10	0.02
12. There are many times when I don't know what to do as a parent. (R)	3.86	4.47	0.61*
13. I know how to help my child learn.	5.34	5.74	0.40
14. My child misbehaves just to upset me. (R)	4.64	5.23	0.59*
15. I praise my child when he/she behaves well.	6.09	5.91	-0.18
16. When I discipline my child, I lose control. (R)	5.95	6.18	0.23
17. I am happy being with my child.	6.51	6.65	0.14
18. My child and I are very close to each other.	6.20	6.24	0.04
19. I am able to soothe my child when he/she is upset.	5.76	6.03	0.27
20. I spend time with my child doing what he/she likes to do.	5.68	5.80	0.12

Items with positive change

19 of 20

*Statistically significant changes ($p < .05$)

4 of 20

Number of participants

67

Response categories for questions 1-5, 15-20:

1=Never, 2=Very Rarely, 3=Rarely, 4>About Half the Time, 5=Frequently, 6=Very Frequently, 7=Always

Response categories for questions 6-14:

1=Strongly Disagree, 2=Mostly Disagree, 3=Slightly Disagree, 4=Neutral, 5=Slightly Agree, 6=Mostly Agree, 7=Strongly Agree

(R): Questions 8, 9, 11, 12, 14, and 16 have been reverse-coded for comparison purposes

Protective Factors Survey pretest/posttest changes (subscales)

Subscale	Pretest	Posttest	Change
Family Functioning / Resiliency (items 1 through 5)	5.23	5.45	0.22
Social Support (items 6, 7, and 10)	5.62	5.96	0.34*
Concrete Support (items 8, 9, and 11)	4.92	5.32	0.40
Nurturing and Attachment (items 17 through 20)	6.03	6.18	0.15*
Child Development / Knowledge of Parenting (items 12 through 16)	5.18	5.51	0.33*

Subscales with positive change

5 of 5

*Statistically significant changes ($p < .05$)

3 of 5

Number of participants

67

In all, 67 participating BRF households completed the pretest and posttest for the Protective Factors Survey. The PFS features twenty items; the table on the previous page shows the change from pretest to posttest for each item for all participants. The pretest and posttest scores reported in the table are the averages of all individual scores.

Cells highlighted in green are indicative of change in the desired direction from pretest to posttest, while those highlighted in red show change in the opposite direction of what is desired. Pretest-to-posttest changes marked with an asterisk (*) are statistically significant at the $p < .05$ level.

Overall, nineteen of the twenty items show improvement from pretest to posttest, and four of these improvements are statistically significant. Only one item (“I praise my child when he/she behaves well”) changed in an undesirable direction, moving from slightly above “Very frequently” (6.09) to slightly below “Very frequently” (5.91). This change was not statistically significant.

Protective Factors Survey subscales represent groupings of PFS items by topic. All five of the subscales saw change in the desired direction from pretest to posttest, and three of these changes were statistically significant.

Adult Adolescent Parenting Inventory pretest/posttest changes

Raw scores

Parenting Construct	Pretest	Posttest	Change
A: Inappropriate Parental Expectations	22.67	24.67	2.00*
B: Parental Lack of an Empathetic Awareness of Children's Needs	41.19	46.19	5.00*
C: Strong Belief in the Use and Value of Corporal Punishment	41.43	47.60	6.17*
D: Parent-Child Role Reversal	27.64	29.83	2.19*
E: Oppressing Children's Power and Independence	19.71	21.76	2.05*

Number of constructs with positive change 5 of 5

*Statistically significant changes ($p < .05$) 5 of 5

Sten scores

Parenting Construct	Pretest	Posttest	Change
A: Inappropriate Parental Expectations	5.38	5.95	0.57
B: Parental Lack of an Empathetic Awareness of Children's Needs	5.38	7.02	1.64*
C: Strong Belief in the Use and Value of Corporal Punishment	5.35	6.38	1.03*
D: Parent-Child Role Reversal	6.15	6.98	0.83*
E: Oppressing Children's Power and Independence	5.88	6.98	1.10*

Number of constructs with positive change 5 of 5

*Statistically significant changes ($p < .05$) 4 of 5

Number of participants 42

The Adult Adolescent Parenting Inventory results are assessed with regard to five subscales, or constructs, related to specific parenting and child rearing behaviors.

When viewed in terms of raw AAPI scores for all participants, all five of the constructs show statistically significant change in the desired direction. Standard Ten, or Sten, scores represent a rescaling of the raw scores in which 5.5 is set as the median of the raw scores and the stens are normally distributed with a standard deviation of 2. In terms of AAPI Sten scores, there was positive change on all five constructs, with four of those changes being statistically significant.

BRF Presenting Issues

Presenting issue	Intake score	Discharge score	Change	N
(Emotional) Stress- Adult	2.79	1.60	-1.19 *	62
(Emotional) Stress- Child	2.81	1.71	-1.10 *	76
Basic Goods	3.02	1.38	-1.64 *	115
Education / Skills / Training	2.95	1.72	-1.23 *	69
Family Stress	2.90	1.60	-1.30 *	106
Financial Assistance	3.03	1.56	-1.47 *	107
Housing	3.15	2.03	-1.12 *	73
Immediate Shelter / Respite	2.75	1.00	-1.75 *	4
Information / Referral / Help	3.18	1.54	-1.64 *	216
Legal Assistance	3.02	1.53	-1.49 *	60
Medical Care	3.18	1.52	-1.66 *	46
Parenting	2.69	1.55	-1.14 *	185
Transportation	3.07	1.79	-1.28 *	30

Scale:

0 = “The family possesses sufficient resources to resolve all issues”

to

4 = “The family desires assistance in resolving most issues”

Negative change indicates progress from intake to discharge

*Statistically significant change ($p < .05$)

The DCS Family Data Collection Form includes a section that measures the severity of presenting issues upon referral to the BRF program. There are thirteen potential presenting issues that may be assessed on a scale of severity ranging from zero (“The family possesses sufficient resources to resolve all issues”) to 4 (“The family desires assistance in resolving most issues”).

Of the thirteen potential presenting issues identified upon referral to the BRF program, all thirteen saw a statistically significant change in the desired direction from intake to discharge.

Conclusion:

The Building Resilient Families program seems to be producing desired positive outcomes among participating households in most cases. Evaluation of changes in program participants from pretest to posttest, as measured by the Adult Adolescent Parenting Inventory and Protective Factors Survey instruments reveals that these changes are overwhelmingly in the desired direction, and frequently statistically significant. Similarly, the severity of presenting issues, as measured by the Presenting Issues Scale component of the Family Data Collection Form, is found to decline from intake to discharge in the great majority of cases, often in a statistically significant way. All of these measures point to the success of the Building Resilient Families program in its intended goal of serving families with school-aged children.

Limitations:

This report evaluates the success of the Building Resilient Families program among families who entered the program during 2017. However, there are a number of limitations that should be taken into consideration with regard to this report. These include:

- The Building Resilient Families program has evolved over time, and some of the changes implemented in the program were only just taking effect for the first time in 2017. For instance, in January 2017, BRF eligibility changes were made to expand eligibility to families with a prior dependency, some sexual abuse cases where the children are now safe, and people in the DCS Young Adult program.
- The relatively small number of households that completed the AAPI and PFS instruments makes it difficult to generalize about the success of BRF across the entire program.
- The Presenting Issues Scale used with the Family Data Collection Form was not fully defined until July 2018, after the evaluation period.
- The 2017 evaluation period fell within the time period that the DCS backlog was being cleared, which means that it was probable that families were less likely to participate in the BRF program because their referrals to BRF may have been delayed.
- In general, self-reported pretest measures, particularly those concerning parenting skills and knowledge, may be inaccurate, as parents often overestimate in these areas in part due to an initial defensiveness toward DCS. Self-reported posttest measures tend to be more accurate. Consequently, the full extent of pretest-to-posttest improvement in such areas may be underestimated.

Recommendations:

Future evaluations of the effectiveness of the Building Resilient Families program may benefit from the implementation of the following recommendations:

- We believe that it would be helpful for all participating providers to use the same evaluation instrument, either the Protective Factors Survey or the Adult Adolescent Parenting Inventory. Use of a single instrument among all BRF families would enable better assessment of the effectiveness of BRF as compared across a wider range of participants. We understand that as of 2019, all BRF providers are required to use the PFS, so we are pleased to see that DCS has already taken this action.
- It is probable that the Building Resilient Families program will continue to evolve and change over time. DCS personnel should continue to closely track the implementation of changes to the BRF program, including recording dates that changes take place, in order to facilitate the selection of study periods for future evaluations.
- As the BRF program itself changes, and as evaluation procedures likely change at the same time, it would be beneficial to frequently connect with provider agencies in order to refresh their familiarity with evaluation data collection procedures. This will ensure that all providers are on the “same page” with regard to data collection, and avoid inconsistency across providers.
- Efforts should be made to evaluate a larger number of BRF participating households, with particular emphasis placed on conducting posttests with participating households before they leave the program. Having a larger number of participants to evaluate will allow for a clearer picture of the effects of BRF participation to be drawn, and will increase the potential for reaching conclusions that may be found to be statistically significant.