NCFAS-G Scale & Definitions

North Carolina Family Assessment Scale for General Services

National Family Preservation Network

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A. Environment

	Not Applicable	Clear Strength	Mild Strength	Baseline/ Adequate	Mild Challenge	Moderate Challenge	Serious Challenge	Unknown
1. Housing Stability								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
2. Safety in the Community								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
3. Environmental Risks								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
4. Habitability of Housing								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
5. Learning Environment								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
6. Overall Environment								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk

B. Parental Capabilities Note: This section refers to biological parent(s), if present, or current caregiver(s).

	Not Applicable	Clear Strength	Mild Strength	Baseline/ Adequate	Mild Challenge	Moderate Challenge	Serious Challenge	Unknown
1. Supervision of Child(ren)								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
2. Disciplinary Practices								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
3. Provision of Developmental	/Enrichme	ent Opporti	inities					
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
4. Use of Drugs/Alcohol Inter	feres with	Parenting						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
5. Promotes and Safeguards C	hild(ren)'s	Education	n and Deve	lopment				
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
6. Parent(s)'s/Caregiver(s)'s L	iteracy							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
7. Parental Resilience								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
8. Overall Parental Capabilitie	s							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk

C. Family Interactions Note: This section refers to family members living in the same or different households.

	Not Applicable	Clear Strength	Mild Strength	Baseline/ Adequate	Mild Challenge	Moderate Challenge	Serious Challenge	Unknown
1. Bonding with Child(ren)								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
2. Communication with Child	l(ren)							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
3. Expectations of Child(ren)								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
4. Mutual Support Within the	e Family							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
5. Relationship Between Pare	nts/Caregiv	vers						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
6. Family Routines/Rituals								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
7. Family Recreation and Pla	y Activities							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
8. Overall Family Interactions								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk

Comments:

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D. Family Safety

Note: This section refers to family members living in the same or different households.

	Not Applicable	Clear Strength	Mild Strength	Baseline/ Adequate	Mild Challenge	Moderate Challenge	Serious Challenge	Unknown
1. Absence/Presence of Dor	mestic Violenc	e Between	Parents/Ca	regivers				
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
2. Absence/Presence of Oth	ner Family Co	onflict						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
3. Absence/Presence of Phy	vsical Abuse of	Child(ren)						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
4. Absence/Presence of Em	otional Abus	e of Child(ren)					
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
5. Absence/Presence of Sex	ual Abuse of (Child(ren)						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
6. Absence/Presence of Neg	glect of Child((ren)						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
7. Absence/Presence of Acc	cess to Weapo	ons						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
8. Overall Family Safety								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk

Comments:

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E. Child Well-Being (Age 0-12)

Note: This section pertains to all the children in the family ages 0-12. If more than one child, children may have different issues. Rate the family, thus if any child has, for example, a behavioral issue, the family as a whole experiences that challenge. In this way, all children in the family contribute to the assessment ratings.

	Not Applicable	Clear Strength	Mild Strength	Baseline/ Adequate	Mild Challenge	Moderate Challenge	Serious Challenge	Unknowr
1. Child(ren)'s Behavior								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
2. School Performance								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
3. Child(ren)'s Relationship	with Parent(s)/Caregive	er(s)					
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
4. Child(ren)'s Relationship	with Sibling	g(s) and Pe	ers					
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
5. Cooperation/Motivation to	o Maintain t	he Family						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
6. Child(ren)'s Alcohol/Dru	g Use/Abuse	}						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
7. Social and Emotional Cor	npetence of	Child(ren))					
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
8. Overall Child Well-Being								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk

Comments:

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F. Youth Well-Being (Age 13-21)

Note: This section pertains to all youths in the family. If more than one youth, they may have different issues. Rate the family; thus, if any youth has, for example, a behavioral issue, the family as a whole experiences that challenge. In this way, all youths in the family contribute to the assessment ratings.

	Not Applicable	Clear Strength	Mild Strength	Baseline/ Adequate	Mild Challenge	Moderate Challenge	Serious Challenge	Unknown
1. Youths' Behavior								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
2. School/Employment Perfor	rmance							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
3. Youths' Relationship with I	Parent(s)/C	aregiver(s)						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
4. Youths' Relationship with	Sibling(s) a	and Peers						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
5. Cooperation/Motivation to	Maintain t	he Family a	and Transi	tion Toward	ls Independ	ence		
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
6. Youths' Alcohol/Drug Use/	Abuse							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
7. Social and Emotional Com	petence of	Youths						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
8. Overall Youth Well-Being								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk

G. Social/Community Life

	Not Applicable	Clear Strength	Mild Strength	Baseline/ Adequate	Mild Challenge	Moderate Challenge	Serious Challenge	Unknown
1. Social Relationships								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
2. Relationships with Child Ca	re, Schools	s, and Extr	acurricula	r Services				
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
3. Connection to Neighborho	od, Cultura	al/Ethnic (Community	7				
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
4. Connection to Spiritual/Re	ligious Co	mmunity						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
5. Parent(s)'s/Caregiver(s)'s I	nitiative ar	nd Accepta	nce of Avai	lable Help/S	upport			
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
6. Overall Social/Community	Life							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk

H. Self-Sufficiency

	Not Applicable	Clear Strength	Mild Strength	Baseline/ Adequate	Mild Challenge	Moderate Challenge	Serious Challenge	Unknown
1. Caregiver Employment								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
2. Family Income								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
3. Financial Management								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
4. Food and Nutrition								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
5. Transportation								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
6. Overall Self-Sufficiency								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk

I. Family Health

	Not Applicable	Clear Strength	Mild Strength	Baseline/ Adequate	Mild Challenge	Moderate Challenge	Serious Challenge	Unknown
1. Parent(s)'s/Caregiver(s)'s I	Physical He	alth						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
2. Parent(s)'s/Caregiver(s)'s I	Disability							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
3. Parent(s)'s/Caregiver(s)'s	Mental Hea	lth						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
4. Child(ren)'s Physical Healt	h							
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
5. Child(ren)'s Disability								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
6. Child(ren)'s Mental Health								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
7. Family Access to Health/M	ental Healt	h Care						
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	uk
8. Overall Family Health								
Intake	n/a	+2	+1	0	-1	-2	-3	uk
Interim	n/a	+2	+1	0	-1	-2	-3	uk
Closure	n/a	+2	+1	0	-1	-2	-3	

Definitions for the NCFAS-G

A. Environment

1. Housing Stability							
Clear Strength	StrengthRefers to family occupying the same, adequate residence for more than three years. If less than three years, move is prompted by a job change or move to better housing, etc. Rent/mortgage is paid on time. There are no issues meeting financial obligations of rent or mortgage.						
Baseline/Adequate	Refers to family experiencing, or previously experiencing, minor issues with remaining in the same residence, but family is relatively capable of meeting financial obligations, present housing is not threatened, and family members are not inhibited in pursuing or meeting other obligations due to these minor issues.						
Serious Challenge	Refers to family being threatened with eviction. Unable to meet rent or mortgage obligations on time, or at all. Or, family does not have housing, is living with different relatives or friends, or living in a homeless shelter or shelter for victims of domestic violence. Family is not satisfied with living situation.						
2. Safety in the Commun	ity						
Clear Strength	Refers to a safe and secure neighborhood for the children. Parents can allow children to play outside without fear. Neighbors look out for each other (neighborhood watch).						
Baseline/Adequate	Refers to minor disturbances in the neighborhood, but disturbances do not prevent family members and children from spending time outside in the community.						
Serious Challenge Refers to many disturbances such as fights and/or outbursts in the neighborhood. The neighborhood is not safe for children to play outdoors or walk to the bus or to scho Evidence of violence, boarded up or barred windows, gun fire, the use of alcohol of and/or drug trafficking in the neighborhood. Neighbors fearful of getting involved							
3. Environmental Risks							
Clear Strength	Refers to family's living and neighborhood circumstances being essentially free from environmental risks such as toxic chemicals, industrial gases or waste, lead paint or plumbing, vermin infestations, mold, high traffic density, building construction or demolition nearby, or similar risks. Caregivers recognize environmental risks and pursue remedies to protect children and family.						
Baseline/Adequate	Refers to family's living and neighborhood circumstances being largely free of known environmental risks. Some environmental risks may be present, but caregivers seem to recognize those risks and are taking appropriate steps to protect children and family, such as lead paint removal, vermin control, and appropriate inspections for mold. Care- givers may not be aware of all potential risks, but generally take appropriate steps to reduce risks.						
Serious Challenge	Family living or neighborhood circumstances are fraught with environmental risks. Rats, roaches, and other vermin present, and droppings are present. Children or family members may suffer asthma due to industrial gases or waste. Abandoned, condemned buildings, or building under construction pose risk to children at play. Children's play areas not sufficiently protected from traffic or other risks. Lead paint or plumbing pose heavy metal ingestion risk. Caregivers unwilling or incapable of detecting or recognizing risks and do not take appropriate steps to remedy or protect children and family.						

. Habitability of Housin	g						
Clear Strength	neat. Plenty of space and privacy for children. Plenty of furnishings in good repair. Safety precautions are considered and taken, such as the use of smoke alarms and dead bolts on outside doors. Poisonous items are kept locked and out of children's reach. Plumbing is in good condition.						
Baseline/Adequate	Refers to minimal issues in the home, such as slight overcrowding, or some clutter. However, most safety precautions are taken (e.g., poisons are out of sight but not locked). Minor house repairs (e.g., crumbling plaster) may be evident, but do not require immediate attention.						
Serious Challenge	Refers to unsanitary situations, including roaches, litter, clutter, and/or unpleasant odors present in the home. Food particles and/or rotting food on the counters and tables. Urine-soaked or stained furniture, dirty diapers, dirty dishes, overflowing garbage, and/or animal or human feces on the floor. Hesitance to sit down or enter the home. Nonfunctioning plumbing and/or no electricity. Many hazards within the reach of children, such as guns, knives, street drugs, or open medication and poisons.						
. Learning Environmen	t						
Clear Strength Refers to caregivers' enthusiasm in teaching their children and supporting education and school attendance. Age-appropriate games, toys and other materials supporting educational pursuits are provided, and evident in the home.							
Baseline/Adequate	Caregivers occasionally plan time for learning activities in the home. Some age- appropriate, educationally related games/toys/materials are present. Caregivers may not have sufficient resources to provide an abundance of these items, but their desire to provide them and some activities are evident.						
Serious Challenge	Caregivers make no effort to provide opportunities for learning at home. Games/toys/other materials are absent, and/or are not age appropriate or are violent. No identified space for learning activities.						
6. Overall Environment							
Clear Strength	Refers to family receiving very high ratings in the following areas: housing stability, safety in the community, environmental risks, housing habitability, and learning environment.						
Baseline/Adequate	Refers to family experiencing a few minimal issues in the following areas: housing stability, safety in the community, environmental risks, housing habitability, and learning environment. However, issues do not interfere in family's ability to function, and issues do not need to be addressed. Some minimal challenges may be due to or made worse by poverty-related issues rather than skill or attitude of caregivers.						
Serious Challenge	Refers to family receiving very low ratings in the following areas: housing stability, safety in the community, environmental risks, housing habitability, and learning environment.						

B. Parental Capabilities

Note: This section refers to biological parent(s), if present, or current caregiver(s).

1. Supervision of Child(real	n)
Clear Strength	Refers to caregivers' provision of age-appropriate supervision, such as setting limits for activities based on the children's ages. Caregivers are careful and attentive to children's needs in selecting substitute caregivers (babysitter, neighbor). Makes sure children feel comfortable and safe with substitute caregivers. Keeps track of children and knows children's friends. Infants and toddlers are under constant, consistent care and supervision in conditions and in surroundings that put the child at ease.
Baseline/Adequate	Refers to caregivers providing satisfactory supervision of children. Some limits are set on activities based on the children's ages. Some consideration given to selecting substitute caregivers, and some concern with children's comfort with the substitute caregivers. Caregivers have a basic knowledge of location of children and children's friends. Infants and toddlers are under constant and adequate supervision, assuring that the child is safe, but circumstances may require a variety of caregivers, settings and surroundings.
Serious Challenge	Refers to caregivers' lack of age-appropriate supervision, or any supervision. Limits on activities of children are not set or set inconsistently. Little or no consideration given to selecting substitute caregivers (strangers, known abusers, persons under the influence of drugs/alcohol). No thought about children's comfort and feeling of security with substitute caregivers. Children's friends are not known, and location of children is not regularly known. Infants and toddlers are sometimes left unattended, or supervision is provided by other children incapable of attending to child's needs or assuring safety, or child is left in the care of incompetent or uncaring adults or in surroundings that pose risk to child safety or induce serious discomfort.
2. Disciplinary Practices	
Clear Strength	Refers to caregivers' ability to provide age-appropriate, non-punitive, consistent discipline. Uses positive reinforcement and tries to educate children through appropriate discipline. Presents good role model. Caregivers agree on parenting style and support one another.
Baseline/Adequate	Refers to caregivers' adequate provision of discipline and guidance of children. Occasionally discipline is inappropriate to age, too harsh or too lenient, but inconsistencies do not create major issues between children and caregivers.
Serious Challenge	Refers to caregivers' lack of discipline, or past or current emotional or physical abuse referred to as discipline. Discipline is excessive, punitive, inappropriate to age, inconsistent, and/or absent. Present poor role models. Caregivers disagree on parenting strategies and present mixed messages to child.
3. Provision of Developmen	ntal/Enrichment Opportunities
Clear Strength	Refers to caregivers' encouragement of opportunities such as sports, music lessons, and/or visits to museums and parks. Caregivers do not push children to be involved. Caregivers are actively involved, providing transportation, coaching teams, and/or participating in advisory boards.
Baseline/Adequate	Refers to caregivers' support of opportunities for children such as sports, music lessons, and/or field trips, but caregivers are not actively involved or are involved sporadically in supporting these activities. Limited opportunities may be more related to poverty than skill or attitude of caregivers.

Refers to caregivers' lack of support or over-involvement in opportunities for children such as sports, music lessons, and/or field trips. Caregivers do not encourage or may even discourage children's involvement in these activities. Conversely, caregivers push children to not only be involved but excel in activities and are demanding regarding their children's progress.
nterferes with Parenting
Refers to caregivers' current or past use of drugs/alcohol. Caregivers do not use drugs/ alcohol or use alcohol appropriately. Caregivers do not use illegal drugs and actively discourages children's use of drugs/alcohol. Moderate use, if present, does not impair ability to parent.
Refers to caregivers' current or past use of drugs/alcohol; mostly uses alcohol appropriately. Use of drugs/alcohol does not significantly hinder the caregivers' ability to supervise or parent children.
Refers to caregivers' current and/or past alcohol/substance abuse issues that negatively affect ability to parent children. Caregivers are frequently unable to care for or supervise children due to use of drugs/alcohol. Caregivers project personal issues on children or other household members; blame them for the need to drink alcohol or use other drugs.
ds Child(ren)'s Education and Development
Refers to caregivers' active encouragement of educational pursuits. Caregivers assure regular attendance at school and assure that children do homework and are prepared. Caregivers monitor children's participation and progress in school; willingly attend parent/teacher conferences. Caregivers monitor children's use of television, music, videos and the internet, screening for violent or sexually explicit materials or dangerous chat rooms and sexual predators.
Refers to caregivers' awareness of need for education. Caregivers will go to parent /teacher conferences but may be passive. Some attempts are made to get children to school regularly, and will admonish children to do homework, but may not be willing or able to actively support homework or school-related activities. Attempts to monitor and control media access and content may be passive or inconsistent, but parents are reasonably successful in setting limits on accessing violent or sexually explicit media content.
Refers to caregivers' obvious lack of support or disdain for education. May reflect caregivers' personal negative history with school. Caregivers do not monitor school performance, do not attend conferences, blame school for academic or behavioral issues in school; may threaten teachers or school administrators. May encourage children to quit school prematurely and go to work. Caregivers are unwilling or unable to monitor media content of children, or are disinterested in doing so, allowing children to access pornography, violent movies or video games. Children are allowed to access the internet and engage strangers.
)'s Literacy
Refers to caregivers' integration of reading and writing into family's everyday life. Reading materials evident in home. Caregivers read for pleasure and read to/with children. Caregivers and children communicate in writing when appropriate. If English is not family's primary language, caregivers can communicate well enough to accomplish needs of everyday life, or they live in ethnic community of sufficient size that cross-cultural communication does not adversely affect family life.
Refers to caregivers having basic literacy skills. Can read when necessary, at a level that does not inhibit normal family life. Caregivers may not read for pleasure and may not encourage children to read regularly, but they acknowledge the need for literacy.

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Serious Challenge	 Refers to caregivers' illiteracy. Caregivers cannot read or write in English, or if English is not the primary language, caregivers basically illiterate in language of native culture. Caregivers cannot read necessary information such as medical care instructions or recipes; cannot read well enough to follow written directions, shop effectively or economically. Family may be victims of crimes that prey upon the illiterate (scams, etc.).
7. Parental Resilience	
Clear Strength	Refers to caregivers' ability to cope with stresses of everyday life; maintain positive, nurturing parenting behavior in spite of significant stressors; and to insulate children from those stressors. Caregivers exhibit problem-solving skills and are able to recover from disruption when stressors adversely affect family life. Caregivers maintain control of themselves and the family environment and are able to calmly nurture and care for children even when dealing with crises and negative life events.
Baseline/Adequate	Refers to caregivers generally maintaining a positive attitude in the face of adversity, seemingly able to generally identify things that need to be fixed, but they may become frustrated or even beleaguered by significant stressors, all of which may temporarily disrupt family life. Basic problem-solving skills are evident, but caregivers may struggle to implement them.
Serious Challenge	Refers to caregivers' inability to deal with stress or disruptions to family life. Caregivers seem incapable of forming a problem-solving plan or exhibit problem-solving skills. Caregivers appear to be overwhelmed by stressors and become depressed or angry, discontinue nurturing behaviors, may blame the children for the onset of stressors. Caregivers lose control of their emotions, behaviors, and family life, in general.
8. Overall Parental Capa	bilities
Clear Strength	Refers to family receiving very high ratings in the following areas: supervision of children, disciplinary practices, provision of developmental and enrichment opportunities, use of drugs/alcohol, promotion of children's education, controls access to media and reading material, and literacy, displays resilience in the face of adversity.
Baseline/Adequate	Refers to family experiencing some issues in the following areas: supervision of children, disciplinary practices, provision of developmental and enrichment opportunities, use of drugs/alcohol, promotion of children's education, controls access to media and reading material, and literacy. Caregivers exhibit adequate resiliency, but may struggle to overcome adversity; however, issues do not pose major difficulties for family members.
Serious Challenge	Refers to family receiving very low ratings in the following areas: supervision of children, disciplinary practices, provision of developmental and enrichment opportunities, use of drugs/alcohol, promotion of children's education, controls access to media and reading material, and literacy; adverse events are not dealt with adequately by caregivers and may throw the family into chaos or put children at risk.

C. Family Interactions

Note: This section refers to family members living in the same or different households.

. Bonding with Child(ren	n)
Clear Strength	Refers to caregivers' healthy closeness with children, and their ability to nurture children. Caregivers encourage appropriate independence for children and give love and attention freely to children. They respond to children's needs appropriately and have a sense of attachment to children. For infants and toddlers, there is at least one primary caregiver who is consistently available, dependable, totally committed to the task of parenting, and the child responds accordingly.
Baseline/Adequate	Refers to caregivers' ability to be close to children. Caregivers may not openly encourage independence for children and may not give affection openly to children. However, children's needs appear to be met. For infants and toddlers there is at least one primary caregiver available to provide adequate parenting and show affection for the child, and the child appears to respond accordingly.
Serious Challenge	Refers to caregivers' inability to form a close relationship with children and inability to nurture children. Caregivers are resentful, rejecting, or detached from children. Also refers to caregivers' non-responsiveness, inappropriate responsiveness, or extreme enmeshment with children. For infants and toddlers, there is no primary caregiver consistently available or devoted to the child, or caregiver shows no affection for the child.
. Communication with C	Child(ren)
Clear Strength	Refers to caregivers' use of age-appropriate and loving communication with children. word choice and voice volume are appropriate for developmental stage of children. Even when upset, caregivers maintain voice and body control and communicate effectively. Verbal communication frequently accompanied by affectionate physical contact (e.g., touching, hugging). Infants and toddlers: Non-verbal communication with infants is calm and tender; communication is accompanied by appropriate facial expressions. Verbal communications are cheerful and intended to encourage verbal skills development and language acquisition. Child responds with interest, even excitement, and child attempts to vocalize/verbalize with caregiver.
Baseline/Adequate	Refers to caregivers' basic ability to effectively communicate verbally and non-verbally with children. Caregivers may raise voice, tower over children, deliver stern lectures when upset. Caregivers may express frustration that children do not listen, when under- standing or communication style may be an issue. However, children are not at risk, and intervention is not warranted. Infants and toddlers: verbal and nonverbal efforts to communicate with the child may be less frequent than ideal, or made without accompanying facial expressions or physical contact, but communication efforts are not harmful.
Serious Challenge	Refers to caregivers' inability to communicate effectively with children. Communication is infrequent or absent, or constant and harping; often blaming in tone and content. Verbal and physical outbursts may occur frequently. Little or no consideration is given to children's developmental level and ability to process and understand communication. Caregivers blame children for poor communication. Infants and toddlers: caregivers' attempts to communicate with child are loud and/or aggressive, caregiver does not acknowledge child's inability to comprehend due to age and stage of development, caregiver may interpret child's inappropriate reactions or lack of reactions as willful defiance or disinterest.

3. Expectations of Child(re	en)
Clear Strength	Refers to caregivers possessing age-appropriate expectations for the children, and clear expectations of children. Above average understanding of children's development cognitively, physically, socially and emotionally. Infants and toddlers: caregivers fully understand infants'/toddlers' total dependence on parents to provide care and assure their well-being. Caregivers understand infants and toddlers limited abilities to communicate effectively, and interpret crying, screaming or infantile behavior as attempts to communicate or to have their needs met. Caregivers understand and react appropriately to successes as well as accidents relating to developmental processes such as toilet training and changing sleep patterns.
Baseline/Adequate	Refers to caregivers' expectations for children as mostly age-appropriate. Caregivers appear to have an average understanding of children's developmental needs, or occasionally fail to attribute normal or age-appropriate expectations, but this behavior does not warrant intervention. Infants and toddlers: parents may not fully understand the ages and stages of child development and processes such as toilet training and changing sleep patterns. Caregivers may be frustrated by these changes, lack of progress, etc. Caregivers may not be accepting of excessive crying or infantile behavior but do not react in ways that are detrimental to the child or place the child at risk.
Serious Challenge	Refers to caregivers having unrealistic and unclear expectations for the children. Do not tolerate mistakes in children. Children are expected to take on adult responsibilities. Or, children are not allowed to engage in age-appropriate behaviors (e.g. sports, dating). Little or inappropriate understanding of normal child development. Infants and toddlers: caregivers are intolerant of normal processes associated with age and stage of development, especially with regard to toilet training, excessive crying, infantile behavior and changing sleep patterns, etc. Caregiver interprets normal child development and skill acquisition as abnormal or willfully disobedient and expresses anger or inflicts discipline on child inappropriately.
4. Mutual Support Within	the Family
Clear Strength	Refers to excellent emotional and/or physical support within the family. Physical support is given when needed, such as providing daycare, transportation, or financial help. Family members appear to help each other willingly and know they can rely on one another in emergencies.
Baseline/Adequate	Refers to good support within the family. Some physical support is provided when re- quested by a family member. Most requests for help from family members are met by other family members.
Serious Challenge	Refers to poor or lack of emotional support or physical support among family members. Family does not provide transportation, day care, or financial assistance when needed. Undermining of each other in the family. Family members do not tolerate success by other family members.
5. Relationship Between P Note: This item may not be a is no significant other. If this	applicable in all cases. This would be the case if there were only one caregiver involved, and there
Clear Strength	Refers to relationship between caregivers as stable, consistent, affectionate, and loving. Caregivers are able to communicate clearly and encourage each other. Caregivers maintain a healthy separateness from children with clear parent/child boundaries.
Baseline/Adequate	Refers to relationship between caregivers. Some conflicts may be evident, but do not appear to be leading to divorce, separation, or abandonment. Some minor difficulties with communication but do not significantly impair the relationship or care and raising of children.

Serious Challenge	Refers to relationship between caregivers as unsupportive and unstable, or hostile. Major communication difficulties with evidence of discord, violence, or indifference. Divorce, separation, or abandonment are prominent issues. Boundaries are not clearly maintained between partners, or between the couple and children.
6. Family Routines/Ritua	ls
Clear Strength	Refers to caregivers' use of daily routines to facilitate family activities at the beginning and end of the day. May involve hygiene, meals, chores, work/childcare preparation. Provides structure and expectations for both caregivers and child. Flexibility for special occasions. Children participate in age-appropriate ways. There is regular observance by family of rituals that may include birthdays, holidays and expressions of faith. Rituals foster sense of security and belonging for children.
Baseline/Adequate	Regular family activities and routines are present that generally serve to meet family's daily needs. Routines may break down or become too rigid, becoming obstacles rather than aids to smooth family life. Family celebrates some rituals but may not integrate observances into everyday life. Children are usually included in rituals but may not have active role in observance. Basic sense of security and belonging is present.
Serious Challenge	Refers either to an absence of routines leading to chaos in family and daily struggle to begin/end day's activities, or to routines so rigid and inflexible that family members become resentful or rebellious. Observance of birthdays or other important days or events is sporadic or inconsistent. Lack of rituals leads to feelings of exclusion by children. Participation in rituals that are not age appropriate, or are violent, leading to fearful or violent behavior in children.
7. Family Recreation and	Play Activities
Clear Strength	Refers to family having regular time for recreation or play together. May involve sports, picnics, outings to park/zoo, camping, or board games, cards, puzzles, etc. Recreation planning takes all family members' needs and desires into account and activities are age appropriate. Recreation is balanced with work and household activities; fosters healthy family relations.
Baseline/Adequate	Refers to family having some recreation time together. Recreation or play may be slightly out of balance with work or household chores, but imbalance does not adversely affect meeting family's basic needs, and relationships are basically healthy.
Serious Challenge	Refers to family either having no recreation or play time together, or recreation time that is geared totally to adult needs or is clearly inappropriate for children. Recreation or play is way out of balance with work or chores: either no recreational outlets or recreation at the expense of meeting family's basic needs.
8. Overall Family Interac	tions
Clear Strength	Refers to family receiving very high ratings in the following areas: bonding with children, communication with children, expectations of children, mutual support, relationship of parents/caregivers, routines and rituals, recreation and play activities.
Baseline/Adequate	Refers to family receiving ratings of adequate in the following areas: bonding with children, communication with children, expectations of children, mutual support, relationship of parents/caregivers, routines and rituals, recreation and play activities.
Serious Challenge	Refers to family receiving very low ratings in the following areas: bonding with children, communication with children, expectations of children, mutual support, relationship of parents/caregivers, routines and rituals, recreation and play activities.

D. Family Safety

Note: This section refers to family members living in the same or different households.

Closer Strongth	Defers to families in which violance has never accurred between correctivers, and all
Clear Strength	Refers to families in which violence has never occurred between caregivers, and all family members are encouraged to solve issues nonviolently. Also refers to families in which domestic violence has occurred, but no longer occurs due to family's success in counseling, and family actively discourages violence.
Baseline/Adequate	Refers to families in which domestic violence has occurred, but no longer occurs. Families involved in counseling and making some progress. Also, families in which violence has never occurred. Disputes occur, and family members solve issues without violence.
Serious Challenge	Refers to incidents, complaints, or arrests for domestic violence. Violence between care- givers negatively affects ability to parent and/or has resulted in physical or emotional harm to children. One caregiver lives in fear of the other, and/or children fear for safety of one caregiver or themselves.
Absence/Presence of O	ther Family Conflict
Clear Strength	Refers to families having strong bonds among themselves and with extended family members. Family members and relatives are likely to serve as mediating resources or safe havens if family violence were to occur.
Baseline/Adequate	Family members and relatives generally get along but may become belligerent or combative when consuming alcohol or discussing sensitive or values-laden topics. Some family members are appropriately avoided, based on known histories, so that they do no pose a threat to children or children's immediate family.
Serious Challenge	Intra-familial fights may occur, or family factions may feud, sometimes with physical violence among family members occurring. Relatives may show up uninvited and unwant when intoxicated or when in trouble, posing a threat to family and children's safety. Nefarious relatives may expose caregivers' children to danger, drugs, illegal activities.
Absence/Presence of P	hysical Abuse of Child(ren)
Clear Strength	Refers to families in which incidents or substantiated complaints of physical abuse has never occurred, or they have occurred and family has successfully been involved in counseling. Caregivers do not condone violence. Caregivers successfully manage anger and discipline responsibly and without physical punishment. Caregivers actively prote- children from physical abuse by people outside the family.
Baseline/Adequate	Refers to families in which physical abuse has not occurred, or in which complaints, incidents, or substantiations of abuse by caregivers have occurred, but satisfactory progress is being made through counseling or the provision of other services. Caregivers successfully manage anger most of the time, and discipline normally is not physical and is never excessive Caregivers passively protect children from physical abuse by people outside the family.
Serious Challenge	Refers to incidents, complaints, or substantiations of physical abuse by caregivers which have not been acknowledged or addressed, or they have been resolved unsatisfactorily. Caregivers may be actively denying substantiated abuse and/or neglect, or actively resisting intervention. Caregivers cannot manage anger and react violently or irrationally toward children. Physical punishment is excessive or bizarre and meets definition of abuse. Caregivers flagrantly fail to protect children from abuse by people outside the family.

A Abaamaa /Duasamaa af F	werkienel Abuse of Child(use)
4. Absence/Presence of E	motional Abuse of Child(ren)
Clear Strength	Refers to families in which incidents or substantiated complaints of emotional abuse have never occurred, or they have occurred and the family has been successfully involved in counseling. Caregivers do not demean or denigrate children. Children exhibit secure feelings and sense of self-worth. Caregivers actively protect children from inappropriate criticism by people outside the family.
Baseline/Adequate	Refers to families in which emotional abuse has not occurred, or in which complaints, incidents, or substantiations of emotional abuse by caregivers have occurred, but satisfactory progress is being made through counseling or the provision of other services. Caregivers successfully manage anger most of the time, and rarely or never denigrate or belittle children. Caregivers passively protect children from emotional abuse by people outside the family.
Serious Challenge	Refers to incidents, complaints, substantiations of emotional abuse by caregivers which have not been acknowledged or addressed, or they have been resolved unsatisfactorily. Caregivers may be actively denying substantiated emotional abuse, or actively resisting intervention. Caregivers cannot manage anger and react with demeaning tirades towards children. Caregivers berate or denigrate children with apparent emotional injury to children. Caregivers flagrantly fail to protect children from similar abuse by people outside the family. Children exhibit emotional disturbance as a result of maltreatment.
5. Absence/Presence of Se	exual Abuse of Child(ren)
Clear Strength	Refers to children who have never experienced sexual abuse, and who have learned about such concepts as good and bad touch. Or, children who have experienced sexual abuse, and are now being protected. Children are in treatment and have been making excellent progress.
Baseline/Adequate	Refers to children who have never experienced sexual abuse but have not been actively taught concepts such as good or bad touch, leaving children potentially vulnerable to future abuse. Or, children who have been sexually abused, but are making satisfactory progress in treatment.
Serious Challenge	Refers to children having experienced sexual abuse by others, or children who have sexually abused others. May be inferred or substantiated. Children have been referred for treatment or are in treatment. A judgement is made regarding unsatisfactory progress in treatment. Sexual abuse is ongoing, or risk of sexual abuse is high. Caregivers do not protect children from situations where there is an elevated risk of sexual abuse or exploitation from within or outside the family.
6. Absence/Presence of N	leglect of Child(ren)
Clear Strength	Refers to families in which incidents or substantiated complaints of neglect have never occurred or have occurred but outstanding progress in counseling is observed. Care-givers recognize and are successful in meeting children's physical, social, medical, and emotional needs. Basic needs for shelter, food, health care, supervision, and education are always met. Adults and children are clean, well-groomed and take pride in themselves and their appearance.
Baseline/Adequate	Refers to families in which incidents or substantiated complaints of neglect have never occurred or have occurred but some progress in counseling is made for the family, and children are safe. Caregivers usually recognize physical, social, medical, and emotional needs of children and meet most of these needs. Oversights by caregivers do not pose undue risk to children. Basic needs for shelter, food, health care, supervision, and education are regularly met. Children may occasionally appear unkempt, but not to the degree that it causes issues for the family or children.

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Serious Challenge	 Refers to incidents or substantiated complaints of child neglect by caregivers which have not been acknowledged or addressed, or they have been resolved unsatisfactorily. Caregivers do not recognize or deny children's physical, social, medical, or emotional needs. Basic needs for shelter, food, health care, supervision, or education are frequently not met. Caregivers may be actively denying substantiated neglect, or actively resisting intervention. Children are frequently or constantly unkempt, dirty, and/or have body odor. Clothing is dirty, inappropriate for season, and there is an absence of awareness of personal hygiene.
7. Absence/Presence of A	ccess to Weapons
Clear Strength	Refers to the caregivers' proactive protection of children from access to weapons that could harm the children or that children could use to harm others. Guns, knives, etc. are locked in safes, cabinets, or drawers, as appropriate. Ammunition is kept separate from guns. Children are taught about the dangers of weapons and how to avoid contact with weapons when away from the home.
Baseline/Adequate	Refers to caregivers' awareness of need to protect children from access to weapons, particularly firearms. Caregivers have taken some precautions to protect children from access; caregivers may not be fully knowledgeable about how to protect children. Children are taught about dangers of weapons.
Serious Challenge	Refers to caregivers' flagrant lack of concern about protecting children from weapons. Weapons are not secure and are in areas where children might gain access. Children have potential to discover weapons or to use them during play. Children are not taught about dangers of weapons and may be encouraged to handle weapons for caregivers' amusement.
8. Overall Family Safety	
Clear Strength	Refers to families receiving very high marks in the following areas: absence/presence of domestic violence between caregivers, family conflict; physical or emotional abuse of children, sexual abuse of children, neglect of children, and access to weapons.
Baseline/Adequate	Refers to families receiving baseline ratings in the following areas: absence/presence of domestic violence between caregivers, family conflict; physical or emotional abuse of children, sexual abuse of children, neglect of children, and access to weapons.
Serious Challenge	Refers to families receiving very negative marks in the following areas: absence/ presence of domestic violence between caregivers, family conflict; physical or emotional abuse of children, sexual abuse of children, neglect of children, and access to weapons.

E. Child Well-Being (Age 0-12)

Note: This section pertains to all the children in the family ages 0-12. If more than one child, children may have different issues. Rate the family thus if any child has, for example, a behavioral issue, the family as a whole experiences that challenge. In this way, all children in the family contribute to the assessment ratings.

1. Child(ren)'s Behavior	
Clear Strength	Refers to children being well-behaved as appropriate to age, and there are no discipline issues. Children viewed as cooperative, following rules and doing chores. Infants and toddlers are on track behaviorally with respect to age and stage of development; exhibit behaviors indicating wanting to be with caregiver and responding appropriately to caregivers, appropriately shy of strangers or dangerous or surprising events or circumstances, but they accept care and comfort from known substitute caregivers.
Baseline/Adequate	Refers to some issues in managing children's behavior, and some discipline issues. Children are usually cooperative, have some difficulties in following rules or completing chores, but difficulties do not merit intervention. In the normal course of development, children may be rebellious or question family leadership, but issues are resolved and children avoid confrontation with the law. Infants and toddlers are generally on track behaviorally with respect to age and stage of development; they are accepting of caregiver and generally react appropriately to others.
Serious Challenge	Refers to challenges managing children's behavior at home and/or in school. Totally un- cooperative. Refuse to follow rules or do chores. Highly oppositional behaviors. Exhibit antisocial behavior; possible emotional disturbance, child seems beyond caregiver control. Infants and toddlers lack appropriate affective expression towards caregiver, rejects caregiver efforts to provide care/comfort; appears listless or withdrawn; are extremely delayed with normal development such as toilet training; exhibit volatile outbursts of crying or anger and appear to be inconsolable for extended periods of time.

2. School Performance

Note: This item may not be applicable in all cases. This would be true if the child is not of school age. If this is the case, use N/A.

Clear Strength	Refers to children having excellent attendance at school and excellent academic records. Children like school and/or behave appropriately in school.
Baseline/Adequate	Refers to children having good attendance and an academic record that is average or appropriate to children's capabilities. Some behavior issues may be evident in school, but they do not result in suspension or expulsion.
Serious Challenge	Refers to children having poor attendance at school, a poor academic record and/or many behavior issues in school. Children profess to hate school and/or avoid school with illnesses or truancy. Children serve frequent detention and may be suspended or even expelled from school.
3. Child(ren)'s Relationsh	ip with Parent(s)/Caregiver(s)
Clear Strength	Refers to children accepting discipline and supervision. Having open and clear communication with caregivers. Express or exhibit strong affiliation with caregivers.
Baseline/Adequate	Refers to children having some issues in accepting discipline and supervision. Also, some issues in communication with caregivers, but this doesn't warrant intervention.
Serious Challenge	Refers to discipline and supervision challenges with children. Lack of open and clear communication, or no communication with caregivers. Do not respect boundaries and have an abusive or hostile relationship with caregivers. Express desire to leave family as soon as possible.

4. Child(ren)'s Relationship with Sibling(s) and Peers

Note: This item may not be applicable in all cases. This would be true if there are no siblings or peers. If this is the case, use N/A.

case, use N/A.	
Clear Strength	Refers to getting along well with siblings and peers. Siblings help one another when in need. Infrequent fights or issues with siblings or peers. Siblings can play together. Play with peers is constructive and friendly. Children are cared for and protected by older siblings and treat younger siblings accordingly. Peers support one another socially and emotionally. Peers generally selected from prosocial sources, known community or neighborhood sources. Children exhibit good judgment when choosing peers to befriend.
Baseline/Adequate	Refers to getting along for the most part with siblings and peers. Some fights occur among siblings, and siblings do not play together frequently. Children may not always exhibit the best judgment when choosing peers to befriend, resulting in friendship tensions or fights. Child may have few peers as friends, but they are prosocial. On the whole, issues among siblings and peers do not merit special attention.
Serious Challenge	Refers to frequent fights and inability to get along with siblings or peers. No support to or from siblings. Intense rivalry, conflict, and/or scapegoat of siblings and/or peers. Fights may result in injury, or other behavior may result in emotional damage to siblings or peers. Older siblings may have physically or sexually abused younger siblings, or neglected younger sibling left in their care. Children exhibit poor judgment when selecting peers to befriend, resulting in negative or destructive behaviors and peer relationships. Children may seek friendships with persons much older or younger than themselves, and they may behave inappropriately to attain those friendships.
5. Cooperation/Motivation to	Maintain the Family
Clear Strength	Refers to children wanting to stay with family and caregivers and be part of the family. Children are motivated to change behaviors and cooperate in order to maintain a positive and cohesive family environment.
Baseline/Adequate	Refers to children's general interest in staying with family and caregivers. Children may need extra encouragement to change behaviors and cooperate, being willing to tolerate some level of family discord. Stages of child development are accompanied by opposition to family rules and caregivers' expectations, but when pressed, children will accept interventions or services.
Serious Challenge	Refers to children's lack of interest in staying with family/caregivers. Children are not motivated to change behaviors and do not want to cooperate. Children are against any intervention or services, or children have strong desire to leave family for self-serving reasons. Children may run away from home for days or weeks at a time. Children rebel against any effort by caregivers to supervise children and are secretive about peers, activities, or whereabouts.
6. Child(ren)'s Alcohol/Drug	g Use/Abuse
some older children in this age	younger children will be using or experimenting with alcohol and/or other drugs. However, cohort may have been exposed to alcohol/drugs at an early age, or they may already be y to be pre-adolescent children. Alcohol/drug use among this age group is very problematic.
Clear Strength	Refers to children's avoidance of the use of alcohol, cannabis, or other medical/recreational drugs. As appropriate to age, children understand the risks of drug use at an early age. As appropriate to age, children know how to avoid persons who use drugs and how to resist peer/social pressure to use drugs.
Baseline/Adequate	Children have minimally adequate knowledge of the risks associated with drug use, but they may not be wholly committed to avoiding drugs now or in the future. Children may have been exposed to alcohol and other drugs, but they do not use them now and know not to use them. Children may be concerned about the allure of drugs and be willing to accept counseling or treatment.

Serious Challenge	NCFAS-G Scale & Definiti Refers to children actively engaged in the use of alcohol and other drugs, or actively
Senous Chanenge	seeking that engagement. Children do not believe evidence of serious risks and consequences of drug use, and/or they may hold serious misconceptions about dangers of drug use. Children fantasize about future acquisition and use of alcohol/drugs. Children resist any efforts to educate or efforts of pre-emptive counseling. Contributing factor may be that parent/caregiver regularly misuses alcohol or drugs.
. Social and Emotional C	Competence of Child(ren)
Clear Strength	Refers to children exhibiting age-appropriate self-regulation of emotions and behavior. Children exhibit age-appropriate ability to solve problems, communicate their feelings and needs respectfully and nonviolently, and de-escalate confrontations with caregivers, peers and others. Children exhibit prosocial behaviors such as adhering to rules when playing and exhibiting a friendly demeanor. Infants and toddlers: show signs of developing appropriate social/emotional awareness, eager for caregiver contact, appropriately shy of non-caregiver contact as infants, less so for toddlers as comfort levels are established and reinforced by caregivers. Toddler can interact with other toddlers socially, such as sharing toys during play.
Baseline/Adequate	Refers to children exhibiting adequate self-regulation of emotions and behavior, though occasionally children may be confrontational but unable to communicate effectively. Children may become argumentative but not aggressive with caregivers, peers and others. Children may sometimes struggle emotionally or behaviorally, but generally are on track with respect to their age and stage of development. Infants and toddlers may show fear of strangers, but they will calm if caregiver displays comfort/confidence in stranger contact with child; may display some difficulty engaging with strangers and/or other children, but they appear to be acquiring adequate skills for social interactions.
Serious Challenge	Refers to children exhibiting an inability to control emotions or behavior. Children display age-inappropriate reactions to stress or social issues, may throw temper tantrums or become combative when parents attempt to regulate child's emotions/behaviors, and/or become aggressive when disagreeing with peers or facing other social stressors. Anger and aggression are used instead of problem-solving and social/emotional engagement. Children may appear consistently or chronically sad, frustrated or angry. Infants and toddlers: show fear/avoidance of caregivers and other adults, show extreme resistance to being held, soothed, comforted by substitute care providers or strangers; toddlers unable to engage socially with other toddlers, show fear, react aggressively, refuse to share, may bite, kick or hit other toddlers in social settings accompanied by emotional outbursts.
8. Overall Child Well-Bei	ng
Clear Strength	Refers to family receiving very high ratings in the following areas: children's behavior; school performance; relationship with caregivers; relationship with siblings; relationship with peers; and cooperation and motivation to maintain the family. Children exhibit age-appropriate social and emotional competence. No challenge ratings in these areas.
Baseline/Adequate	Refers to family receiving adequate ratings in all of the areas: children's behavior; school performance; relationship with caregivers; relationship with siblings; relationship with peers; and cooperation and motivation to maintain the family. Social/emotional competence is adequate but there may be some inconsistent/unpredictable behaviors as these competencies are acquired.
Serious Challenge	Refers to family receiving very low ratings in the following areas: children's behavior; school performance; relationship with caregivers; relationship with siblings; relationship with peers; and cooperation and motivation to maintain the family. Social/emotional competence is lacking, evidenced by extreme emotional reactions to even common stressors, and antisocial or asocial reactions when provoked.

F. Youth Well-Being (Age 13-21)

Note: This section pertains to all youths in the family. If more than one youth, they may have different issues. Rate the family thus, if any youth has, for example, a behavioral issue, the family as a whole experiences that challenge. In this way, all youths in the family contribute to the assessment ratings.

1. Youths' Behavior	
Clear Strength	Refers to youths being well-behaved as appropriate to age, no discipline issues. Youths are cooperative, following rules and doing chores. Youths exhibit minimum externalizing behaviors (aggression, disruptive behaviors, impulsivity) and internalizing behaviors (depression, anxiety, mood/thought issues)
Baseline/Adequate	Refers to some issues in managing youth's behavior, and some discipline issues, but not out of line with normal development. Youths are usually cooperative, may exhibit some difficulties following rules or completing chores, but difficulties do not merit intervention. In the normal course of development, youths may occasionally question caregiver leadership, but issues are satisfactorily resolved.
Serious Challenge	Refers to challenges managing youth's behavior at home and/or in school. Totally un- cooperative. Refuse to follow rules or do chores. Highly oppositional or antisocial behavior; possible emotional disturbance, youths seems beyond caregivers' control. Youths may engage in delinquency, gang-related activities, or provocative appearance (e.g. tattoos, outlandish dress, excessive makeup, body piercings). Youths have a history of, and inclination to commit status offenses (e.g., runaway, truancy) or more serious, chargeable offenses (e.g., burglary, larceny, destruction of property). Youths are engaged in dangerous or self-injurious behavior (e.g., extreme risk-taking, early sexual activity).
	 as used in E. Child Well-Being, above, this term is <i>always</i> applicable to youths as they are itioning towards independence and adulthood which normally requires attachment to the labor Refers to youths having excellent attendance at school, and excellent academic records in line with youths' general capabilities. Youths like school and/or behave appropriately in school. Appropriate to age, youths recognize the need for employment skills and engage in education or vocational training towards that end. Youths have achieved competence in literacy and numeracy.
Baseline/Adequate	Refers to youths having good attendance and average academic records appropriate to youths' capabilities. Some behavior issues may be evident in school, but they do not result in suspension or expulsion. Youths are making adequate progress towards skills/employment and labor force attachment.
Serious Challenge	Refers to youths having poor attendance at school, a poor academic record and/or many behavior issues in school. Youths profess to hate school and/or avoid school with illnesses or truancy, may have quit school or threaten to quit. Youths serve frequent detention and may be suspended or even expelled from school. Youths express no interest in acquiring employment skills, eschew vocational training, may brag about expecting to pursue a criminal lifestyle as adults.
3. Youths' Relationship	with Parent(s)/Caregiver(s)
Clear Strength	Refers to youths accepting discipline, guidance and supervision. Youths have open and clear communication with caregivers. Youths express or exhibit strong affiliation with caregivers.

	NCFAS-G Scale & Definition
Baseline/Adequate	Refers to youths having some issues in accepting discipline and supervision. Also, some issues in communication with caregivers. Confrontations are not hostile or violent and are normally resolved without incident. Issues do not warrant intervention.
Serious Challenge	Refers to serious disciplinary and supervision challenges with youths. Lack of open and clear communication, or no communication, or deceitful with caregivers. Youths do not respect boundaries and have an abusive or hostile relationship with caregivers. Youths express disdain or hatred towards caregivers.
4. Youths' Relationship v	vith Sibling(s) and Peers
Clear Strength	Refers to youths getting along well with siblings and peers. Siblings/peers help one another when in need. Sibling/peer relationships are constructive and friendly. Youths are protective of younger siblings. Youths demonstrate good judgment when selecting peers to befriend, generally selecting them from known, prosocial sources in the community or neighborhood. Youths are a positive influence on one another. Peer groups engage in prosocial activities such as sports, civic activities, clubs or other organized activities.
Baseline/Adequate	Refers to youths getting along for the most part with siblings and peers. Some fights occur among siblings, and siblings do not interact frequently. Youths do not always exhibit good judgment when selecting peers to befriend, resulting in strained friendship/negative interactions, but youths are learning from their mistakes. Youths may have few peers as friends, but those few are generally prosocial. On the whole, issues among siblings and peers do not merit special attention.
Serious Challenge	Refers to youths engaging in frequent fights and displaying an inability to get along with siblings or peers. Intense rivalry, conflict, and/or scapegoat of siblings and/or peers. Fights may result in injury, or other behavior may result in emotional damage to siblings or peers. Older siblings may have physically or sexually abused younger siblings, or neglected younger sibling left in their care. Peers may exhibit negative or destructive behaviors and peer relationships are not positive or supportive. Youths may seek friendships with persons much older or younger than themselves, and they behave inappropriately to attain those friendships. Youths may seek peers engaged in anti-social or criminal lifestyles; or peers/peer groups that idolize criminals (e.g., murderers, mass shooters), or extreme political/religious/cultural ideologies (e.g., Nazism, white supremacy). Youths may seek or have criminal gang affiliations.
5. Cooperation/Motivation	on to Maintain the Family and Transition Towards Independence
Clear Strength	Refers to youths wanting to stay with family/caregivers and be part of the family; and/or create and maintain positive relationships with adult mentors that will carry on into adulthood. Youths are motivated to change behaviors and cooperate in order to maintain a positive and cohesive family environment. Older youths seek to acquire skills/ experience needed to transition to independence by becoming self-supporting and avoiding confrontation with the law.
Baseline/Adequate	Refers to youths' interest in staying with family/caregivers. Youths are passive about changing behaviors in order to minimize family discord, but they can be motivated to do so. Stages of youth development accompanied by opposition to family rules and caregivers' expectations, but when pressed, youths will accept interventions/ services/skills training. Youths may be passive about developing relationships with trusted, mentoring adults, but can be motivated to do so.

	NCFAS-G Scale & Definition
Serious Challenge	Refers to youths' firm lack of interest in staying with family/caregivers. Youths are not motivated to change behaviors and do not want to cooperate. Youths eschew any efforts to develop relationships with trusted adult mentors. Youths express strong desire to be independent without developing a plan for acquiring skills for employment necessary to live independently. Youths are against any intervention or services, and they profess a strong desire to leave family for self-serving reasons. Youths may run away from home for days or weeks at a time and rebel against any effort by caregivers to supervise youths. Youths are secretive about peers, activities and whereabouts. Youths may run away or be homeless due to parent/caregiver cutting ties.
6. Youths' Alcohol/Drug	Use/Abuse
Clear Strength	Refers to youths' avoidance of the use of alcohol, cannabis, or other medical/recreational drugs. Youths understand the risks of addiction, including lethal overdose. Youths exhibit internalized belief in the avoidance of substances and understand their detrimental effects. Youths know how to avoid persons who use drugs and how to resist peer/social pressure to use drugs.
Baseline/Adequate	Youths have minimally adequate knowledge of the risks associated with drug use, but they may not be wholly committed to avoiding drugs now or in the future. Youths may have experimented with alcohol and other drugs, does not use them now, and knows not to use them, particularly addicting and dangerous drugs. Youths may be concerned about the allure of drugs and be willing to accept counseling or treatment.
Serious Challenge	Refers to youths engaging in the reckless abuse, chronic use, or excessive use of alcohol and other drugs. Youths eschew evidence of serious risks and consequences of drug use. Youths select peers based, in part, on shared interests in obtaining and using alcohol and other drugs. Youths may commit crimes to obtain drugs. Youths may fantasize about the criminal lifestyle associated with selling drugs. Youths may be active users of drugs, even be addicted, and refuse any effort to provide counseling or drug treatment.
7. Social and Emotional (Competence of Youths
Clear Strength	Refers to youths exhibiting age-appropriate resilience, including self-regulation of emotions and behavior, self-control and emotional stability. Youths exhibit age- appropriate reasoning and problem-solving. Youths communicate their feelings and needs respectfully and nonviolently, are appropriately assertive, cooperative and empathetic. They can de-escalate confrontations with caregivers, peers and others. Youths seek in-person social interactions and recreation/play and maintain a healthy balance between in-person and virtual interactions (texting, gaming, social media, etc).
Baseline/Adequate	Refers to youths exhibiting adequate self-regulation of emotions and behavior, though occasionally they may be confrontational and/or unable to communicate effectively. Youths may become argumentative but not aggressive with caregivers, peers and others. Youths may sometimes struggle emotionally or behaviorally, but generally are socially/emotionally on track with respect to their age and stage of development. Youths may prefer virtual interactions over in-person interactions, but they can be motivated to increase in-person interactions.

r	NCFAS-G Scale & Definition
Serious Challenge	Refers to youths being out of control emotionally/behaviorally. Youths display seriously age-inappropriate reactions to stress or social issues, may throw temper tantrums or become combative when caregivers' attempts to regulate youths' emotions/behaviors. Youths may exhibit burgeoning anti-social personality traits such as consistently blaming others for negative events or consequences, failing to accept responsibility for their own decisions/actions. Youths are reclusive, eschewing in-person interactions, relying instead on virtual/electronic social interactions, especially frequent gaming (esp. violent gaming) and frequent visits to anti-social internet sites. Anger and aggression are used instead of problem-solving and social/emotional engagement. Youths may appear to be either consistently or chronically sad/frustrated/angry, or agitated and hyper-vigilant about wrongs being done to them by others.
8. Overall Youth Well-Be	ing
Clear Strength	Refers to family/youth receiving very high ratings in the following areas: youths' behavior; school performance; vocational/transitional preparation; relationships with caregivers, siblings; peers. Youths are also cooperating and motivated to maintain the family and affecting an orderly transition to independent adulthood. Youths are avoiding drugs and exhibiting normal social/emotional development and resilience. Youths are developing good in-person social skills. No challenge ratings in these areas.
Baseline/Adequate	Refers to family/youths receiving adequate ratings in all of the areas: behavior; school performance; work/independence preparation; relationship with caregivers, siblings, peers; and cooperation and motivation to maintain the family while preparing to transition to independent adulthood. For the most part, youths are avoiding alcohol and other drugs and are exhibiting acceptable social/emotional development and resilience, including adequate in-person social skills.
Serious Challenge	Refers to family/youth receiving very low ratings in the following areas: children's behavior; school performance; preparation for independent adulthood; relationship with caregivers, siblings; peers; and cooperation and motivation to maintain the family. Youths have destructive peer relationships, are involved alcohol and other drugs as users, sellers or both. Youths are leaning behaviorally towards criminal or anti-social lifestyles; and do not exhibit adequate social/emotional development. Youths rely mostly or solely on virtual social interactions such as gaming and social media.

G. Social/Community Life

1. Social Relationships	
Clear Strength	Refers to family that has frequent interactions with relatives, neighbors and friends. These people are accessible and are a positive influence on family life. Few negative social relationships and if these occur, they are handled in a timely manner and are not allowed to continue. Family can always rely on friends, relatives or neighbors for help in emergency.
Baseline/Adequate	Refers to family having some interactions with relatives, neighbors, and friends. Individuals may provide positive and/or negative influences on the family. When negative, these influences are dealt with appropriately and do not pose a serious threat to family safety. Family can sometimes rely on these relationships for help in an emergency.

	NCFAS-G Scale & Definition
Serious Challenge	Refers to family being socially isolated and having little or no contact with neighbors, friends or relatives. Or, these persons are a strong negative influence on caregivers or children. Social contacts may revolve around illegal activities such as drug use, prostitution or gambling. Family makes little or no effort to participate in activities that provide opportunities for positive social relationships. Family cannot rely on relatives, neighbors or friends for help during an emergency.
2. Relationships with Chi	ild Care, Schools, and Extracurricular Services
Clear Strength	Caregivers' relationship with schools, childcare providers, and other child serving organizations (e.g., sports, youth groups) is open, respectful, frequent and honest. Caregivers, teachers or service providers communicate clearly and encourage each other's success. Interactions focus on and advocate for the best interest of the children.
Baseline/Adequate	Relationship between caregivers and school, childcare, or other youth service provider is adequate to ensure children's safety and is respectful. Minor difficulties in communications or advocacy may occur but do not significantly impair relationship.
Serious Challenge	Relationship between caregivers and schools, childcare or youth service providers is un- supportive, critical, disrespectful, hostile, dishonest, or nonexistent. Communication does not focus on best interest of children but may focus on caregivers' convenience or caregivers' interest at expense of children's participation and success.
3. Connection to Neighbo	orhood, Cultural/Ethnic Community
Clear Strength	Refers to family's connection to civic and cultural affairs in the neighborhood and community. Adult family members vote and are knowledgeable about issues affecting community. Family identifies with cultural or ethnic segments in the community and promotes welfare of all children and families. Civic involvement is a positive influence on family life and does not detract from family needs or relationships.
Baseline/Adequate	Family is involved in community to a limited degree. Caregivers may attend some community meetings, are likely to vote, but family does not invest time in larger social issues. Family identifies with some ethnic or cultural groups but not others, and caregivers may express suspicion or mistrust of other ethnicities or cultures. Family may be selective about community involvement based on culture or ethnicity.
Serious Challenge	There is little or no sense of neighborhood, or family feels alienated in neighborhood and community. Family members afraid to interact with neighbors. Caregivers do not participate in civic meetings or exercise voting rights, are not knowledgeable about social or political issues affecting them. Or, civic involvement is confrontational with respect to politics or other ethnicities or cultures, is damaging to family relationships or safety, and interferes with family's ability to function in the neighborhood or community.
4. Connection to Spiritua	l/Religious Community
Clear Strength	Family participates in family-centered spiritual celebrations. Family receives strength and encouragement from the spiritual community. Family connects with others sharing similar beliefs and appears to integrate beliefs into daily living. Children appear to be connected to and supported by spiritual community.
Baseline/Adequate	Caregivers identify a connection with a particular spiritual community, but they may be sporadic in investment of time or energy into spiritual community. Or, caregivers may not choose spiritual involvement, but they have other community supports for their family.
Serious Challenge	Family has had support from a spiritual community in the past but may be alienated or disengaged at this time. Family recognizes they need spiritual support but do not know how to re-engage.

5. Parent(s)'s/Caregiver(s)'s Initiative and Acceptance of Available Help/Support	
Clear Strength	Refers to family accepting help or support from extended family, neighbors or community when offered to the family. Caregivers will take initiative to provide basic needs for family. Caregivers will seek help when needed and are able to accept help without shame or guilt. Caregivers anticipate being able to help others when in a position to do so.
Baseline/Adequate	Refers to family being willing to accept some help from agencies, relatives or friends, but may not actively seek assistance. Caregivers may be willing to do without some basic needs or services to avoid asking for help. Caregivers may feel guilt or shame for accept- ing help, but these feelings do not prevent accepting help if it is offered from outside, or the need is sufficiently great.
Serious Challenge	Family is not motivated to, or actively avoids seeking help from agencies, relatives or friends when in need. Even if family life is deteriorating markedly, caregivers have refused help when offered in recent past, to the continued detriment of family life and children well-being. Family is suspicious of help, and may fear future consequences of accepting help, such as obligation to reciprocate. Caregivers may suffer overwhelming feelings of guilt or shame preventing acceptance of help.
6. Overall Social/Commu	nity Life
Clear Strength	Refers to family receiving very high ratings in the following areas: social relationships, relationships with childcare, schools and extracurricular services, connection to neighborhood and to cultural/ethnic community, connection to spiritual and religious community, caregivers' initiative and acceptance of available help and support.
Baseline/Adequate	Refers to family receiving adequate ratings in all of the areas: social relationships, relationships with childcare, schools and extracurricular services, connection to neighborhood and to cultural/ethnic community, connection to spiritual and religious community, caregivers' initiative and acceptance of available help and support.
Serious Challenge	Refers to family receiving very low ratings in the following areas: social relationships, relationships with childcare, schools and extracurricular services, connection to neighborhood and to cultural/ethnic community, connection to spiritual and religious community, caregivers' initiative and acceptance of available help and support.

H. Self-Sufficiency

1. Caregiver Employment	
Clear Strength	Refers to family having stable, legal employment over the past 12–24 months. Employer provides benefits, such as health insurance, and employer respects caregivers' need to attend to and spend time with family. Caregiver takes advantage of opportunities for training and advancement.
Baseline/Adequate	Refers to family having relatively stable, legal employment in the past 12 months. Employment experience may vary between periods of steady employment, layoffs or compulsory overtime that create occasional disruption to family routines or caregiver's availability to family. Benefits are not available or are available at very high cost.

	NCFAS-G Scale & Definiti
Serious Challenge	 Refers to caregiver losing employment for negative reasons (such as being fired, laid off for substance use or poor attendance) two or more times in the past 12 months. Caregivers work only sporadically by choice, placing extreme stress on family finances. Family is without benefits of any kind. Caregivers' employment may be illegal (unreported earnings, drug trade, prostitution). Caregivers not interested or unable (perhaps due to illiteracy) to participate in advancing employment options.
2. Family Income	
Clear Strength	Family has had stable and sufficient income over the past 12–24 months. More than enough income to pay for food, housing and clothing. Money is not an issue. Family has money to meet responsibilities and spend on leisure activities and recreation.
Baseline/Adequate	Income is sufficient in meeting basic needs, such as food, housing and clothing. There are some money pressures, such as credit card debt, but they do not significantly inhibit family activities or prevent purchase of necessities. Caregivers may worry about having sufficient income and may skimp on some necessities.
Serious Challenge	Family has seriously insufficient income and exhibits inability to pay for food, housing and/or clothing. Family receives public assistance as primary source of income, and/or primary caregivers are unemployed. Money is a major issue. Child support is not paid. Public assistance time limits have expired. Family does not have money to meet basic needs.
3. Financial Management	t
Clear Strength	Refers to family using money in a way that provides benefits financially, and family has clear spending plans or priorities. Debts are small and manageable. There is a planned use of money, and no back bills. Family is good at bargain hunting and sets aside money for recreation, leisure, gifts (e.g., birthdays).
Baseline/Adequate	Refers to family having debts, but debts are not sufficiently large or in default such that creditors are taking action against family. Some issues with budgeting, but these do not prevent family from meeting basic needs for food, housing, etc. Leisure or recreation is sporadic and occurs when extra money appears to be available, rather than as part of a spending plan.
Serious Challenge	Refers to family being severely in debt. Family may have a history within the past year of being evicted from their home due to nonpayment. Great difficulty paying bills, and/or bills are paid late. May have large credit card or loan shark debt. Chaotic budgeting, and family is constantly in crisis over money. Caregivers frequently broke, maybe due to gambling or substance use. There is no budget plan. Caregivers' leisure or luxuries are bought before necessities; children often without basic needs being met.
4. Food and Nutrition	
Clear Strength	Refers to caregivers' awareness of nutritional needs of children, including any special needs (e.g. food allergies). Meets those needs. Prepares balanced, nutritious meals. Caregivers may also provide vitamins or supplements. Ample food available. Children eat on a regular schedule. Food/nutrition actively monitored by caregivers.
Baseline/Adequate	Family meets basic nutritional needs. Children have access to sufficient and varied food, though individual meals may not always be balanced. Family may rely on fast foods a little too frequently as main source of nutrition. Children may consume excess junk foods, particularly when away from home.

	NCFAS-G Scale & Definition
Serious Challenge	Refers to caregivers' lack of awareness of nutritional needs of children, including any special needs. Does not attempt to meet nutritional needs. Does not consider food preparation important. Inadequate supply of food, and/or inappropriate food. Lots of junk food consumed. Children often go hungry. Obesity, diabetes, or other health issues related to poor nutrition are apparent in caregivers and/or children.
5. Transportation	
Clear Strength	Refers to family having a car, or regular access to a car or public transportation. Reliable transportation allows family to meet obligations such as doctors' visits, school, or regular work attendance.
Baseline/Adequate	Refers to family normally having regular access to reliable transportation. Occasionally, transportation difficulties will cause an issue for the family (e.g., arriving late to work because of difficulties).
Serious Challenge	Refers to family not having transportation available which, in turn, inhibits continuity of work, increases social isolation, and/or limits access to services, and/or prevents regular school attendance. Caregivers cannot keep medical or service appointments reliably, and they cannot assure those services for children.
6. Overall Self-Sufficience	y
Clear Strength	Refers to family receiving very high ratings in the following areas: caregiver employment, family income, financial management, food and nutrition, and transportation.
Baseline/Adequate	Refers to family receiving adequate ratings in all of these areas: caregiver employment, family income, financial management, food and nutrition, and transportation.
Serious Challenge	Refers to family receiving very low ratings in the following areas: caregiver employment, family income, financial management, food and nutrition, and transportation.

I. Family Health

1. Parent(s)'s/Caregiver(s	1. Parent(s)'s/Caregiver(s)'s Physical Health	
Clear Strength	Caregivers enjoy excellent physical health. There are no health issues that interfere with parenting, employment, or participating in everyday life. Caregivers promote good health in family, including keeping watch over diet, exercise, and lifestyle habits of children and other family members.	
Baseline/Adequate	Caregivers enjoy good basic health. May have some health issues, such as elevated blood pressure or mild diabetes that are under control through medication and routine health care. Health issues may occasionally inhibit caregivers, but do not pose major obstacles in parenting abilities or significantly hinder the caregivers' ability to parent. Caregivers are knowledgeable about health status and normally makes lifestyle and diet choices accordingly.	
Serious Challenge	Caregivers suffer from one or more chronic debilitating physical health issues (such as serious obesity, high blood pressure, HIV/AIDS), or progressive diseases (such as cancer, AIDS, etc.) that significantly interfere with daily life. Caregivers do not understand implications of diet, lifestyle, exercise, or proper medication regimen, and therefore do not manage the health condition(s) to the extent possible. Caregivers project personal health issues on children or other household members and/or or they require children to provide physical care.	

2. Parent(s)'s/Caregiver(s	s)'s Disability
Clear Strength	Caregivers do not suffer from any disabling conditions (blindness, physical handicap, chronic back pain, etc.) that would interfere with parenting, employment, or participating in daily life. Caregivers are physically fit, and activities are not limited or constrained.
Baseline/Adequate	Caregivers may suffer from one or more mildly disabling conditions that do not prevent caregivers from parenting or working, although some accommodation may be necessary (e.g., no lifting, no driving, accessible workplace) and caregivers are able to participate in daily life with some accommodation to circumstances. If disabling condition qualifies for benefits, caregivers receive benefits and participate in benefit program requirements.
Serious Challenge	Caregivers suffer from serious disabling condition (such as total blindness, para/ quadriplegia, absent limb, spastic colon, etc.) that substantially inhibits or prevents caregivers from effectively parenting children, working, or participating in everyday life. Caregivers may be SSI dependent. Caregivers are not able to manage disability and rely on others for daily living, and they may not make necessary lifestyle or medical decisions to assist others in managing the disability.
3. Parent(s)'s/Caregiver(s	s)'s Mental Health
Clear Strength	Caregivers enjoy good mental health. No evidence of mental illness or emotional instability. Caregivers know how to handle stress, and how to interact with other family members in ways that promote good mental health and stability. Have good sense of humor. Caregivers may have had mental health or emotional issues in the past but have successfully resolved them and use personal mental health history to promote good future health.
Baseline/Adequate	Caregivers may suffer from non-debilitating mental health issues, but have them under control either through treatment, medication, or counseling. Caregivers may be subject to mood swings or need to manage medications, but do so in such a way that parenting, employment, and daily life are not precluded or impaired. Mental health issues (mild depression) may occasionally inhibit caregivers, but do not significantly hinder the caregivers' ability to parent.
Serious Challenge	Caregivers suffer from serious and persistent mental health issues or are emotionally distraught. May be deeply depressed, actively psychotic, suicidal. May suffer from periods of mental or emotional impairment that prevent effective parenting, employment, or participation in daily life. Caregivers appear to be unwilling or unable to manage mental health issues, or medication regimen that would ameliorate symptoms. Family members or community may be at risk of harm from caregivers, or caregivers may be at risk of harm to self. Caregivers project personal mental health issues on children or other household members.
4. Child(ren)'s Physical H	ealth
Clear Strength	Children enjoy excellent physical health. There are no health issues that interfere with normal development, education, or participating in everyday life. Children receive regular dental and physical health checkups and immunizations. Illnesses and injuries are dealt with properly and appropriately. Children promote good health as appropriate to age, and are mindful to watch diet, exercise, and to make healthy choices, as appropriate to age. All immunizations are up to date, and caregivers have immunization and other health records available.

	NCFAS-G Scale & Definitio
Baseline/Adequate	Children enjoy good basic health. May have some health issues, such as asthma or being slightly overweight for age, but medical conditions are under control through medication and routine health care, and efforts are in place to lead healthy life even if children are not always successful at managing their own health. Physical health issues do not inordinately adversely affect children participation in family life or school, etc. Children are knowledgeable about health status, as age-appropriate, and participate in health management. Caregivers believe that children's immunizations are up to date, but health records may be incomplete.
Serious Challenge	Children suffer from one or more chronic debilitating physical health issues (such as serious obesity, childhood diabetes, serious asthma or life-threatening allergies, HIV/AIDS), or progressive diseases (such as cancer, AIDS, etc.) that significantly hinder normal development or socialization, and interfere with education and daily life. Children do not understand implications of diet, lifestyle, or exercise, or are not able to self-manage medication regimen, and do not participate in management of the health condition(s).
5. Child(ren)'s Disability	
Clear Strength	Children do not suffer from any disabling conditions (blindness, physical handicap, physical birth defect, developmental disability, etc.) that would interfere with normal development, education, or participating in daily life. Children are physically active and within normal height/weight for age.
Baseline/Adequate	Children may suffer from one or more mildly disabling conditions that do not prevent education, socialization, or participation in daily life, although some accommodation may be necessary (accessibility accommodations at home and school) and caregivers are able to participate in daily life with some accommodation to circumstances. If disabling condition qualifies for benefits, caregivers receive benefits and participate in benefit program requirements.
Serious Challenge	Children suffer from serious disabling conditions (such as blindness, physical deformity, cerebral palsy, para/quadriplegia, absent limb, moderate or severe developmental disability, etc.) that substantially inhibits or prevents children from participating in everyday life. Children may be SSI dependent. Children are not able to manage disability and rely on others for daily living. Daily life may require extraordinary machinery or attendant care that is not readily available or accessible by family.
6. Child(ren)'s Mental He	ealth
Clear Strength	Children enjoy good mental health. No evidence of mental illness or emotional instability. Children know how to handle stresses encountered as part of normal development, and they know how to interact with other family members in ways that promote good mental health and stability. Have good sense of humor and good outlook on life and good self-image, as age-appropriate.
Baseline/Adequate	Children may suffer from non-debilitating mental health issues, but have them under control either through treatment, medication, or counseling. Children may have had episodes of situational anxiety or mild depression associated with normal issues and experiences during various stages of development. Children may experience being bullied, stigmatized, or in other ways victimized by peers or others in environment, but they are reasonably successful in resolving these issues or circumstances, perhaps with caregivers' help. Caregivers may need to assist children to manage medications, or in advocating for children with school or peers, and this happens in a way that promotes children's mental health and stability.

	NCFAS-G Scale & Definition
Serious Challenge	Children suffer from serious and persistent mental health issues or emotional disturbance. May be deeply depressed, actively psychotic, suicidal. May suffer from periods of mental or emotional impairment that adversely affect children's socialization or participation in normal activities of daily life. Children may be stigmatized by peers or may suffer poor self-concept. Inability to handle stress. If diagnosed with mental illness, and/or other emotional disabilities, caregivers appear to be unwilling or unable to assist children to overcome or manage mental health issues, or medication regimen that would ameliorate symptoms. Caregivers cannot or will not advocate for children with school or peers to resolve issues, and they will not or cannot access appropriate treatment. Family members or community may be at risk of harm from children, or children may be at risk of harm to self.
7. Family Access to Health	h/Mental Health Care
Clear Strength	Family has access to prophylactic and palliative health and mental health care. Caregivers know how to access care, and where care is located. Insurance is available or family resources are sufficient that lack of money is not a reason to delay seeking medical or mental health assistance. Caregivers know family health and mental health history, have accurate records, and can assist health care system in provision of care. Good physical and mental health are valued by caregivers and other family members, and family supports each other's receipt of health care when needed.
Baseline/Adequate	Family has basic health care needs met through normally available healthcare outlets such as doctor offices or clinics. Family may not seek preventive care and may delay seeking palliative care unless injury is serious or illness is advanced. Insurance or re- sources may be insufficient to cover full cost of health care, but family members go to doctor when necessary and try to pay for treatment received.
Serious Challenge	Family has no insurance, children have only Medicaid or have no insurance. Family relies on emergency room care for serious injuries or serious illness, but does not seek normal preventive or palliative care. Caregivers do not know where or how to access healthcare or mental health care, and may rely on ineffective alternative treatments to the detriment of child or other family members. Lack of healthcare or mental health care treatment poses a threat to family continuity and safety.
8. Overall Family Health	
Clear Strength	Refers to family receiving very high ratings in the following areas: caregiver physical health, caregiver disability, caregiver mental health, child physical health, child disability, child mental health, family access to health and mental health care.
Baseline/Adequate	Refers to family receiving adequate ratings in all of the areas: caregiver physical health, caregiver disability, caregiver mental health, child physical health, child disability, child mental health, family access to health and mental health care.
Serious Challenge	Refers to family receiving very low ratings in the following areas: caregiver physical health, caregiver disability, caregiver mental health, child physical health, child disability, child mental health, family access to health and mental health care.