





The Senator Walter Rand Institute for Public Affairs (WRI) at Rutgers University - Camden produces and highlights research leading to sound public policy and practice, and with that as a foundation, aims to convene and engage stakeholders in making the connections across research, policy, and practice in support of Southern New Jersey residents. From 2013 to 2022, WRI has conducted a comprehensive evaluation of the implementation of the Pascale Sykes Foundation's Whole Family Approach initiative across 12 nonprofit collaboratives in Southern New Jersey. The Whole Family Approach is a preventative, family-led strategy that provides adults and children tools to set, plan for, and achieve goals together. Collaborating agencies work together with families with two adult caregivers to develop long- and short-term goals to thrive. WRI's evaluation of the Whole Family Approach includes:

- A longitudinal, quasi-experimental evaluation of families' changes in forming healthy relationships, child wellbeing, and financial stability.
- A process evaluation to understand how the Whole Family Approach was implemented across collaboratives, including observations, interviews, focus groups, and document review.
- Multiple focused evaluations that examine the impact of the Whole Family Approach in areas of interest including student social, emotional, and behavioral growth, service model delivery, family-community partner relationship development, and the cultural responsiveness of the Whole Family Approach.

In the last two years, the COVID-19 pandemic has been detrimental to the livelihood of the whole nation as its people experience job loss, financial and health insecurity, and untimely deaths. It is unsurprising that mental health challenges have increased, given the environmental, financial and physical threats posed by this health crisis (National Center for Health Statistics, 2020; The Senator Walter Rand Institute for Public Affairs, 2022). This report focuses on changes in physical and mental health for families who participated in the Whole Family Approach before and after the onset of the COVID-19 pandemic.

METHODS

For this report, we identified longitudinal survey data from adults participating in the Whole Family Approach that pertained to their perceptions of their mental and physical health, social supports and financial wellbeing. To conduct these analyses, we compared frequencies and, in some cases, average responses for the following scales:

- The multidimensional scale of perceived social support (Zimet, Dalem, Zimet, & Farley, 1988)
- Perceptions of health, current weight, and weight goals
- Center for epidemiological studies depression scale (Thomas, Kelman, Kennedy, Ahn, & Yang, 1992)
- Brief resilience scale (Smith et al., 2008)
- Perceived stress scale (Cohen, Kamarck, & Mermelstein, 1994)

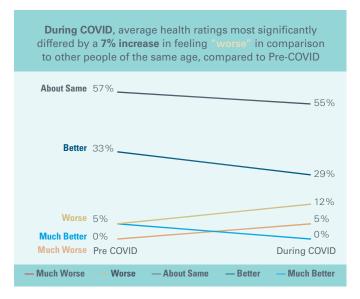
Specifically, we isolated and analyzed data from before and after the onset of the COVID-19 pandemic; that is, we examined the data in two separate periods: from January 2018 to February 4th, 2020 (which marks the official declaration of a public health emergency in the United States as per the Department of Health and Human Services, 2020), and February, 2020 to October 2021.

45 participants from our sample met the criteria for this analysis. The majority of participants were females (62%). The age of adults ranged between 17-74 years old, with the average age being 44 years old. Racial background included majority White participants (61%), followed by Black or African Americans (22%) and Hispanic/Latino participants (9%). Highest levels of education vary, with most participants completing high school or GED equivalent (27%).

FINDINGS

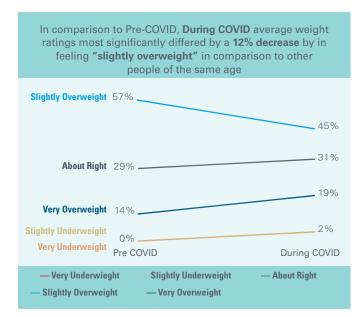
Physical Health and Weight

Health ratings, expressed as percentages, indicate that fewer individuals reported improvement or stability in their health. Instead, responses of "worse" and "much worse" increased during COVID-19. This change in personal health perception is telling of an increase in negative perception of personal health and the potential worsening of physical health since COVID-19.



Weight description results indicated changes to participants' rating of personal weight. Fewer participants reported being "slightly overweight;" instead, more participants changed their rating to being "very overweight" with the onset of COVID-19. There was also an increase in participants reporting being underweight or at an "about right" weight. The increase in people reporting weight gain aligns with widespread news and research data reporting significant weight among the general population (Glazer & Vallis, 2022); even individuals who were enrolled in weight management programs prior to the pandemic experienced significant weight gain with the first three months of quarantine that was related to a decrease in physical activity and an increase in emotional eating (Borgatti et al., 2021).

When asked about participants' goals around their weight, there was a slight increase in individuals aiming to "gain weight" which aligns with the percentage of participants who reported being underweight. In contrast, fewer participants reported an intention to lose weight during the pandemic compared to before the onset of COVID-19, and there was an increase in individuals wanting to "stay the same" or do "nothing" about their weight. Weight management research during the pandemic revealed that many people who experienced weight gain and desired to lose weight also encountered practical challenges to physical activity, adhering to routines, access to and consumption of healthy food, and sleep quality in addition to a general lack of motivation during the pandemic lockdown (Glazer & Vallis, 2022). These barriers may have contributed to a resolution to postpone goals around weight management as a way to manage additional stressors during the pandemic.

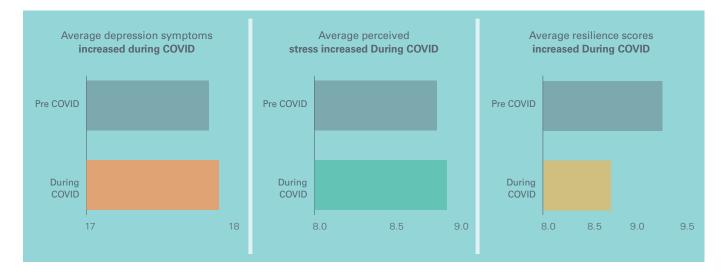




MENTAL HEALTH AND SOCIAL SUPPORT

Mental health was measured by comparing the averages of participants' responses on the Depression Scale (MeanD), the Brief Resilience Scale (MeanR), and the Perceived Stress Scale (MeanS) before the onset of COVID-19 and during the pandemic. Results indicated that depression

scores and stress scores increased slightly from prepandemic (MeanD=17.69; MeanS= 8.77) to duringpandemic (MeanD=17.75; MeanS= 8.84). More notably, however, resilience averages increased by half a point from pre-pandemic (MeanR=8.62) to during-pandemic (MeanR=9.12).



These findings stand out in contrast with at least one other study focusing on resilience during the start of the pandemic lockdown (Killgore, Taylor, Cloonan, & Dailey, 2020), in which participants reported significantly higher scores of anxiety and depression and lower resilience scores than the norm. One caveat, however, was that individuals who reported higher perceived support from friends and family also reported closer-to-standard resilience scores compared to those participants who reported lower social support. Other behaviors were connected to the higher resilience scores for these participants, including exercise and outdoor time, but these findings suggest that social support may have acted as a protective factor for people during the pandemic.

Scores for our participants in response to the Multidimensional Scale of Perceived Social Support Scale were totaled and averaged according to pre-COVID and During-COVID scores. Results revealed that average perceived social support did not change (Mean-pre=61, Mean-during=61), suggesting that the perception of social support of families involved with the collaboratives remained consistent even during the time of the pandemic.



CONCLUSION

Surveyed families involved in the Whole Family Approach reported trends towards perceptions of poorer health, fewer goals around weight management, and a slight increase in depression and stress. These negative outcomes coincide with national reports on the impact of the pandemic on people's health, particularly mental health. In

contrast, our families also reported higher levels of resilience and a consistent level of perceived social support. Further analysis comparing these results with the comparison group as well as later into the pandemic will provide more insight into the protective factors that these families receive through being part of the Whole Family Approach.

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