Strengthening Wisconsin's Family Resource Centers

Family Resource Centers

Family Resource Centers (FRCs) are community hubs that offer services, resources, and activities to strengthen families. FRCs vary by design according to the needs of different families and communities. Typical services include parent education and skills training, child development activities, and basic needs assistance. FRCs also help families by linking them to local resources from other agencies and providers.

It is estimated that there are more than 3,000 FRCs in the U.S. that serve around 2 million families per year.² Wisconsin has an especially rich tradition of supporting FRCs since the state's first program was founded in Milwaukee in 1976. Each year, thousands of families across the state receive support from an FRC, most of which belong to Thriving Wisconsin's FRC membership network.

FRCs have great potential to strengthen families and prevent child abuse and neglect given their community-wide reach and comprehensive services.3 Yet, there is surprisingly limited evidence related to the FRCs and their impact on family safety, stability, and well-being. To address this gap, the Wisconsin Child Abuse and **Neglect Prevention Board** partnered with the Institute for Child and Family Well-Being to launch Strong and Stable Families, the most robust study of FRCs to date.



Key Facts

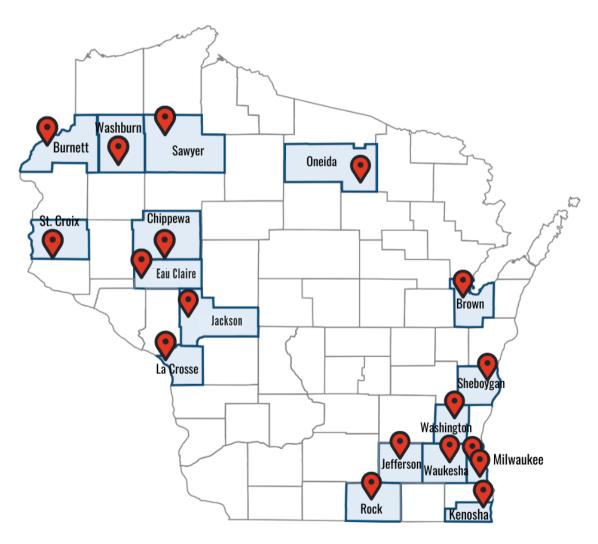
- Family Resource Centers (FRCs) serve millions of families with children in the US each year.
- Wisconsin has an especially strong statewide network of FRCs.
- Strong and Stable Families is the largest and most robust study of FRCs to date.
- Early results confirm that Wisconsin's FRCs support families from diverse backgrounds with an array of services and resources.
- Future analyses will continue to explore the extent to which FRCs strengthen families and prevent child abuse and neglect.

Strong and Stable Families

Strong and Stable Families is a longitudinal study that aims to explore whether Wisconsin's FRCs enhance family protective factors and reduce the risk of child abuse and neglect. The study includes 646 families who participated in programming at one of 18 FRCs (see Figure 1) and 1,489 families in the general population. Families who enrolled in the study completed an initial survey between October 2021 and June 2023. The next sections summarize baseline results related to sample characteristics, family risk and protective factors, and FRC services.



Figure 1. FRC Agencies County Map



Sample Characteristics

Table 1 describes demographic characteristics of the FRC and general population samples. Families who received FRC services were more racially and ethnically diverse. For instance, they were more than twice as likely to be non-White (31.9% vs. 14.4%). FRC participants also had lower educational attainment levels and annual household incomes. Yet. illustrating that FRCs are open to families from all socioeconomic backgrounds, about half of FRC households had incomes above \$50k and nearly 1 in 5 households had incomes above \$100k.

Table 1. Demographic Characteristics (N = 2,135)

	Gen. Pop. Sample N=1,489	FRC Sample N=646
Age (Mean)	41.9	35.5
Female	84.0%	90.7%
Income		
<\$50,000	19.6%	50.0%
\$50,000-\$99,999	32.5%	31.4%
≥100k	47.9%	18.6%
Race/Ethnicity		
American Indian/Alaskan Native	1.7%	6.7%
Black	4.3%	9.0%
Hispanic	4.8%	11.1%
White	85.6%	68.1%
Other	3.6%	5.2%

Family Risk and Protective Factors⁴

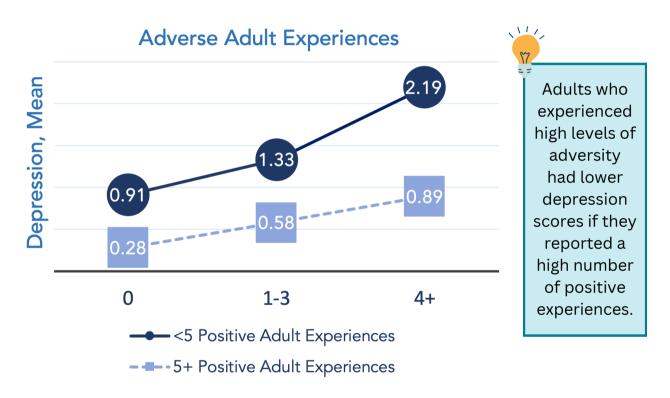
The FRC and general population samples also differed in terms of their life circumstances. For example, FRC participants were more than 3 times as likely to be unemployed despite needing and wanting a job. FRC recipients also had greater difficulties obtaining health insurance and accessing health, mental health, and dental care, and they were more likely to endure adverse experiences such as intimate partner violence, household substance use, violent crime, and homelessness.⁵

Despite these adversities, FRC participants endorsed many positive experiences. For instance, nearly three-fourths indicated their family stands by them through difficult times and two-thirds indicated they have the resources and opportunities they need to succeed most or all of the time. Moreover, the FRC and general population samples reported similar levels of nurturing and attachment parenting behaviors, family functioning/resilience, and social support.



Notably, results showed that certain positive experiences and protective factors were associated with better mental health and well-being in the face of adversity. For example, Figure 2 suggests that a high number of positive experiences (5+) buffered against adverse experiences and lowered depressive symptoms. These findings signal that, if FRCs introduce families to positive experiences that strengthen family protective factors, they may enhance parent's mental health. In turn, enhancing parents' mental health may reduce their children's risk of abuse and neglect along with other adverse childhood experiences (ACEs). ⁶

Figure 2. Protective Effects of Positive Adult Experiences



FRC Services and Satisfaction

Table 2 presents an abbreviated list of FRC services that participants received. As expected, families often engaged in parenting, parent-child interaction, and child enrichment activities, and many received help accessing community resources and meeting basic needs. To assess the total demand for different FRC activities and services, participants were not only asked what kinds of support they received but also what they would like to receive in the future. For example, 17.5% of the FRC sample received financial information and resources, but 50% either received this support or wanted it in the future. Most participants rated their FRC experience favorably, with 85% indicating that they were either very or extremely satisfied.

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Table 2. FRC Service Needs (N = 2.135)

FRC Services	Received Services	Total Service Demand
Parent-Child Groups	42.3%	72.4%
Open Play Spaces	40.6%	72.7%
Help Finding Resources	28.7%	63.8%
Support for Basic Needs	23.1%	45.6%
Child Development Screening	20.1%	41.0%
Financial Information and Resources	17.5%	50.0%
Home Visiting	16.7%	24.0%
Literacy or Educational Services	12.4%	37.2%
Childcare	6.1%	31.6%

Total Service Demand = % of participants who received the service OR who would like to receive the service in the future

Concluding Thoughts on Abuse and Neglect Prevention

Family Resource Centers have tremendous primary prevention potential given their statewide reach and broad scope of services that are available to all families. Although many abuse and neglect prevention strategies target children and families from underprivileged backgrounds, it is likely that a greater total amount of abuse and neglect in society occurs in households and communities with low to moderate levels of risk. This *prevention paradox* ⁷reflects the fact that children who reside in "high-risk" contexts make up a small proportion of the total population. Therefore, prevention programs may have a greater overall impact if they are implemented community-wide than if they target only the poorest families or most marginalized communities.

FRCs are an especially promising prevention strategy because, while they are open to all families, they offer flexible services that can be tailored to suit each family's needs. Known as *progressive universalism*, 8,9 this approach honors the principle of equality by guaranteeing universal eligibility while also honoring the principle of equity by ensuring that families can receive the level of support that matches their needs. Voluntary, universal programs like the FRCs are also less likely than mandated or targeted programs to be perceived as stigmatizing, making it more likely that families will seek FRC support and follow through on referrals.

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Future Directions

In 2024, the Child Abuse and Neglect Prevention Board received a Community-Led Momentum Grant from the Advancing a Healthier Wisconsin Endowment to extend and expand Strong and Stable Families. As of this writing, a second wave of survey data collection is under way. These data will be combined with child protective service records to estimate the protective effects of FRCs and their long-term impact on abuse and neglect. Qualitative data also will be gathered via interviews and focus groups with families and staff. The study findings will be disseminated to local, state, and national stakeholders to: (a) raise public awareness of FRCs, (b) promote FRC best practices, (c) strengthen local systems of care, and (d) elevate the FRCs as policy and funding priorities in Wisconsin.

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