SUPPORTIVE COMMUNITIES

casey family programs

Do place-based programs, such as **Family Resource Centers,** reduce risk of child maltreatment and entry into foster care?

Background

While child maltreatment occurs in all strata of society, and most low-income families will never come into contact with the child welfare system, poverty is the most consistent and strongest predictor of having an open child protection case.[1] Three-quarters of the 676,000 victims of child maltreatment in 2016 were found to be victims of neglect,[2] and neglect was the associated primary reason for removal in 61 percent of all cases.[3] Research makes clear that individual poverty is a significant risk factor for neglect.[4,5,6,7] In addition, the high concentration of poverty in a community has been associated with increased rates of child abuse fatalities. For instance, one study found that the rate of child abuse fatalities was three times higher in poor counties compared to wealthier counties.[8,9]

A number of programs seek to limit the impact of poverty and reduce the risk of child neglect by strengthening families' protective factors before hardship turns into crisis. They address concrete needs like housing assistance, child care, and food. Some interventions also seek to reduce parental social isolation by building parents' social connections, and strengthening parental capacity to deal with stress.

Do place-based programs, such as Family Resource Centers, reduce risk of child maltreatment and entry into foster care?

Given that poor families often live in communities with few if any resources and services, **place-based programs** can be an effective way of offering individual and community services that mitigate the risk of child maltreatment and serious injury. One strategy for providing community-based family support has been the development of family resource centers. This issue brief addresses the following questions:

- What are family resource centers?

- What are the defining characteristics of a family resource center?

- What do we know about the effectiveness of family resource centers in reducing child welfare involvement?

- What is the return on investment?

- What is missing from the research literature?

What are family resource centers?

Family resource centers (FRCs) — also referred to as family centers, family success centers, family support centers, parent-child resource centers, or parent education centers — are community-based resource hubs where families can access formal and informal supports to promote their health and well-being. FRCs can be located in apartment complexes, schools, health centers, libraries, community centers, storefronts, or churches. FRC services also vary widely but typically include some combination of the following: parent skill training, job training, substance abuse prevention, mental health services, housing support, crisis intervention services, literacy programs, and concrete supports such as food or clothing banks. While there are other programs that may provide some of the services listed above, FRCs are distinct in that they are uniquely community-focused, are driven by family needs, and offer a multitude of programs and resources. Most aim to be one-stop shops for children and parents that address all five protective factors (Parental Resilience; Social Connections; Concrete Support in Times of Need; Knowledge of Parenting and Child Development; Social and Emotional Competence of Children).[10] While programs such as food banks, employment centers, and community-based clinics are important resources for families, they are not discussed in this brief because they are distinct from the FRC model. The FRC model seeks to provide multiple services to both children and families, increase parenting skills and protective factors, and reduce the likelihood of formal involvement with child protective services.

Despite being located in different facilities and having diverse approaches to service selection and service delivery, FRCs generally share a common goal of improving outcomes for children and families by strengthening and supporting families and the communities in which they live.

> I don't have words for it. It was just so welcoming. The help was quick. Everything I listed that I needed — they started making phone calls, making it happen right away. Telling me about programs, getting me signed up for free … I don't know where I'd be without this place, in terms of being a parent and how I treat my son, his mother, and even myself.

- JEREMIAH SHAFFER, FATHER
SAN FRANCISCO SAFE AND SOUND

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FRCs also are designed to help stabilize families before a crisis reaches a level requiring CPS intervention, or a child's placement in out-of-home care.

What are the defining characteristics?

Given that FRCs are community-driven, they naturally differ in terms of services, interventions, populations, and target outcome measures. Despite the challenge this creates for documenting and evaluating FRCs within and across networks and jurisdictions, this variability is essential for responding to the unique needs of specific communities. Notwithstanding the need to have services and policies reflect the community, a number of common elements and components are found across most FRCs. While different studies frame slightly different guiding principles, **10 common elements** typically underscore the work of FRCs:[11,12]

1. Operate using a **set of standards or a framework** for implementing programs and assessing outcomes, such as the National Family Support Network's Standards of Quality for Family Strengthening or the Strengthening Families Protective Factors Framework developed by the Center for the Study of Social Policy. As an alternative, the Alabama Legislature passed into law state standards for its family resource network, and New Jersey recently contracted with the National Implementation Research Network to develop a practice profile for its network of Family Success Centers.[13]

2. Seek to be **welcoming spaces** that can be utilized by a mixture of diverse community members.

3. **Partner with families and whole communities** using strengths-based, multi-generational, family-centered approaches.

4. Provide services that are grounded in a **strengths-based** approach, are **culturally sensitive** and, when possible, **linguistically competent**, or offered in languages that reflect the families and communities being served.

5. Be **prevention-focused** and aim to improve parents' **protective factors**.

6. Coordinate, implement, and make **referrals** to a multitude of services in order to provide comprehensive and flexible individualized and group-based support to address families' complex needs, including a focus on concrete needs and evidence-based practices.

7. Develop **parent and community leadership** to support advocacy efforts and family and community resilience.

8. Have a **diverse, high-quality and well-trained staff**.

9. Be an integral part of the community — serving as a **link between families, schools, support services, and the community** — and sustain **strong partnerships** with a variety of other community-based providers, system leaders, and key stakeholders in order to adequately address local needs.

10. Be **reflective and adaptable** in order to address the specific needs of the community in which they are located.

In addition to these common elements, many FRCs provide or can make referrals for the following services:

1. **Comprehensive case management**, including assessments, crisis intervention, and ongoing support and referrals to resources and services.

2. **Concrete supports**, including assistance with housing, public benefits, educational pursuits, employment, food, clothing, child care, health care, and transportation.

3. **Differential response programs**, family reunification activities, and, to some extent, foster care and adoption support.

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4. **Treatment programs** addressing substance abuse, mental health, and domestic violence issues.

5. **Parenting education and supports**, including family navigation services, parenting classes, fatherhood programs, home visitation services, peer support groups, crisis counseling for parents, and parent drop-in programs.

6. **Formal services for children and youth**, including early care and education services, screening for developmental delays and disabilities, and local playgroups and after school programs.

While this is only a snapshot of the type of services FRCs provide, the comprehensive array of services and supports utilized by FRCs illustrate the complex, extensive, and varied needs of the families that come into contact with FRCs. A number of jurisdictions have even developed statewide, regional, and county networks of family resource centers, ranging from those that include a handful of centers to those that encompass more than 50, serving anywhere from a few thousand families to more than 52,000 a year.

What do we know about FRC effectiveness?

An [appendix to this issue brief](#)[14] provides an overview of what is currently known about the impact and effectiveness of family resource centers, with a particular focus on FRCs' ability to strengthen protective factors and reduce the risk of child maltreatment and entry into care. Results include:

- A 45 percent reduction in cases of child abuse and neglect in Alachua County, Fla.

- Significantly lower rates of child maltreatment investigations in communities with FRCs in Allegheny County, Pa.

- Statistically significant gains in family self-sufficiency in Colorado.

- A 20 percent increase in parents' self-reports on their ability to keep the children in their care safe from abuse in Massachusetts.

- A 25 percent increase in the probability that a family reduced its risk of abuse with the addition of one additional differential response case management visit per week at an FRC in San Francisco.

- All FRCs have reported positive outputs — and to some degree, positive outcomes — as a result of their family and community strengthening programs. However, limited numbers of rigorous research studies have been conducted regarding the effectiveness of FRCs. Given the sheer volume of families that FRCs engage with and the ability of FRCs to meet families where they are, provide wraparound services, and adapt to the needs of communities, additional research on the utility of FRCs and their ability to prevent maltreatment is warranted.

What is the return on investment?

A few studies have found significant return on investment for FRCs:

- In Alabama, an analysis of short- and long-term impacts shows that for every $1 invested in the Alabama Network of Family Resource Centers, the State of Alabama receives $4.70 of immediate and long-term financial benefits.[15]

- In Vermont, it was determined that through services to prevent adverse childhood experiences, the Vermont Parent Child Center Network saved the state $210,000 (in 2010 dollars) per family that would have otherwise been spent on addressing the effects of child abuse and neglect, including "$33,000 in childhood health care costs, $11,000 in adult medical costs, $144,000 in productivity losses, $8,000 in child welfare costs, $7,000 in criminal justice costs, and $8,000 in special education costs."[16]

- Recent and ongoing research co-led by Safe and Sound, an FRC in San Francisco, indicates that if only half of the money currently spent on dealing with the repercussions of child maltreatment was

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redirected to prevention efforts — particularly, efforts to strengthen families' protective factors — child abuse and neglect would be reduced by almost 50 percent.[17] Calculations reveal an estimated economic burden of child maltreatment of $400,533 per victim in San Francisco County in 2015, or more than $300 million over the course of the year, based on a conservative estimate (given that child maltreatment is often underreported, the financial impact could be as high as $5.6 billion a year).[18] The 2018 report noted the verified financial impact of child abuse and neglect in 2017 as $226.5 million in San Francisco alone ($2 billion dollars for the Bay Area as a whole[19]). The analysis indicates that the financial impact of child maltreatment in San Francisco in 2017 was enough money to send 24,000 children to pre-school.

What is missing from the research literature?

The decentralized and malleable nature of FRCs enables them to adjust to the needs of specific communities and evolve as families and communities change. However, the FRCs' varied services, structures, and delivery models also make it difficult to analyze impact and outcomes, and to extrapolate general findings. Many of the programs reporting data do not use a comparison group, a longitudinal approach, or randomized control group design, making it unclear whether families not served by the FRCs could also achieve the same results. Much of the purported "outcomes" reported on by FRCs and FRC networks are simple outputs, such as numbers of families served and the specific services provided. In addition, many of the outcomes provided focus on a single program offered at an FRC, not the combined impact of the FRC as a whole, and many jurisdictions report collective outcomes across their FRC network instead of individual-level outcomes for each FRC in the network, which may mask differential impacts between FRCs.

Because many FRCs have historically lacked the capacity and resources needed to record and monitor outcomes over time, there have been missed opportunities to evaluate the challenges and successes experienced by FRCs. Greater investments in rigorous evaluation studies are needed. While a couple of formal evaluations of FRCs document their role in child maltreatment prevention (see above), existing research does not provide a comprehensive picture of successful FRC program models, service delivery approaches, and return on investments, such as maltreatment and placement prevention. This makes it difficult to assess the utility of FRCs in general, as well as their specific role in preventing harm to children and family disruption. In order to better understand the current research findings as well as determine the capability of FRCs to help prevent child abuse and neglect, further research is needed to understand what makes FRCs successful, what services work best for what populations, and what are the pathways through which FRCs drastically reduce the risk of child maltreatment and entry into foster care.

Given the findings from the few existing studies, however, there is reason to believe that FRCs have been, and can be, instrumental in increasing

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protective factors and supporting children's safety through family support and strengthening. Additionally, given states' new flexibility under the Family First Prevention Services Act to spend Title IV-E funds on evidence-based prevention services,[20] it is imperative that the positive effects FRCs have on families and communities are well documented. Moreover, if the findings from some of the most promising studies can be replicated, there is no better time than the present to increase the literature on FRCs and make a deep investment in them.

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