



# Evaluating CBCAP-Funded Programs

(i.e., Family Resource Centers)

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Claire Ackerman and Joshua Mersky





# **Family Resource Centers: A Universal Primary Prevention Strategy**

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Wisconsin Child Abuse and Neglect Prevention Board**



# Who we are

- Independent board
- Advance statewide policy, public awareness and programming to strengthen families and prevent child maltreatment
- 20 members comprised of state government officials, legislators, and public members

# Our Funding

- State GPR
- Birth Certificate Revenue
- CBCAP
- Smaller private funds
- Funding FRCs- ~28.4%
  - Direct to FRCS ~21%
  - FRC Network support ~7.4%

## The focus of the Prevention Board is **Primary Prevention**



### PRIMARY PREVENTION

ENTIRE COMMUNITY  
REGARDLESS OF RISK

Strategies seek to stop maltreatment and other challenges before they occur, buffer against adversity, and promote optimal development of children.

- ▶ Strengthen Economic Supports for Families
- ▶ Universal Parenting and Healthy Relationship Education/Skill Building
- ▶ Provide Quality Childcare and Education Early in Life
- ▶ Change Social Norms to Support Parents and Positive Parenting
- ▶ Connecting Families to Resources
- ▶ Universal Enhanced Primary Care
- ▶ Father Inclusive Strategies
- ▶ Support Families with their Racial, Cultural and Historical Context

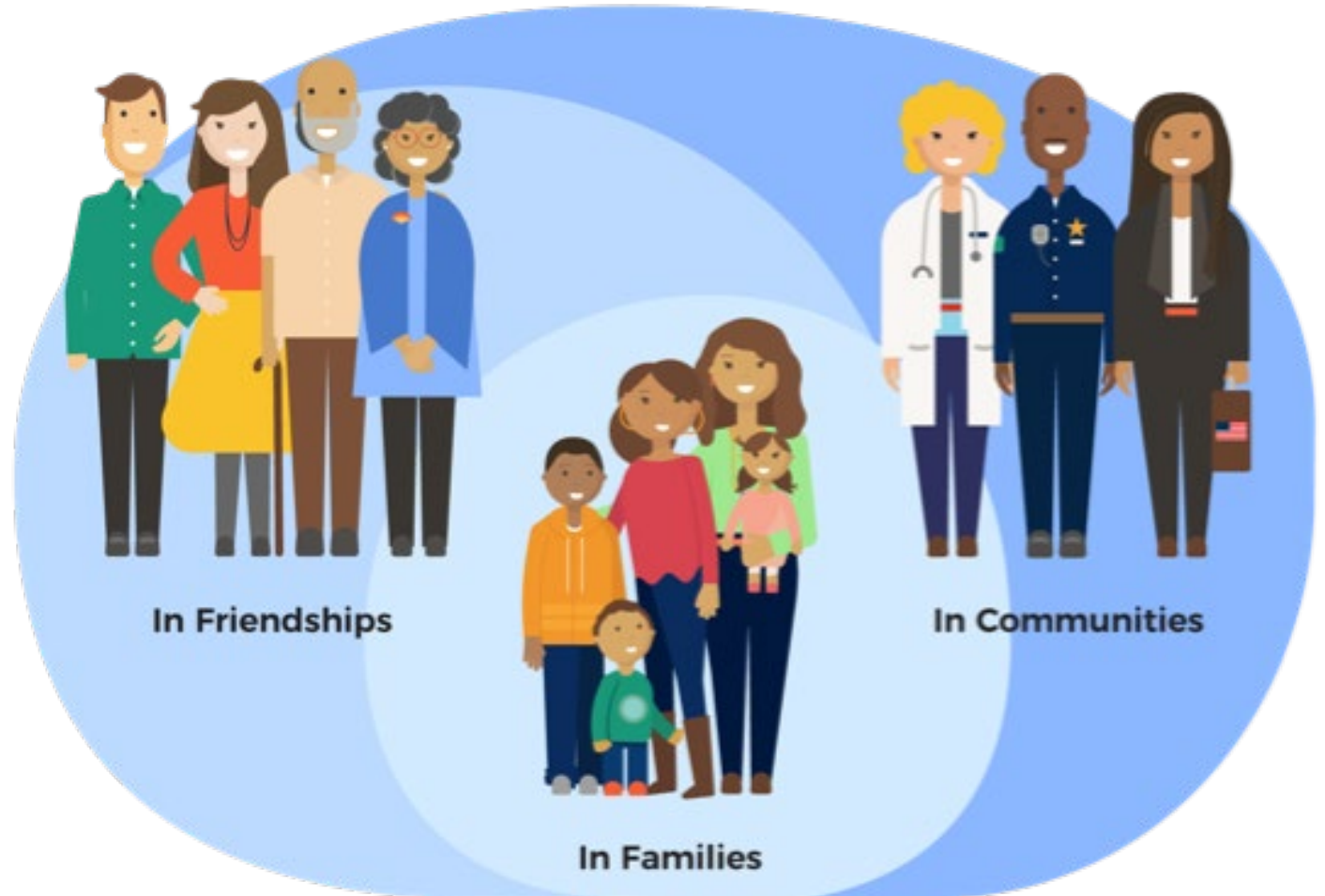


SUPPORT FOR ALL FAMILIES

# Public Health Approach

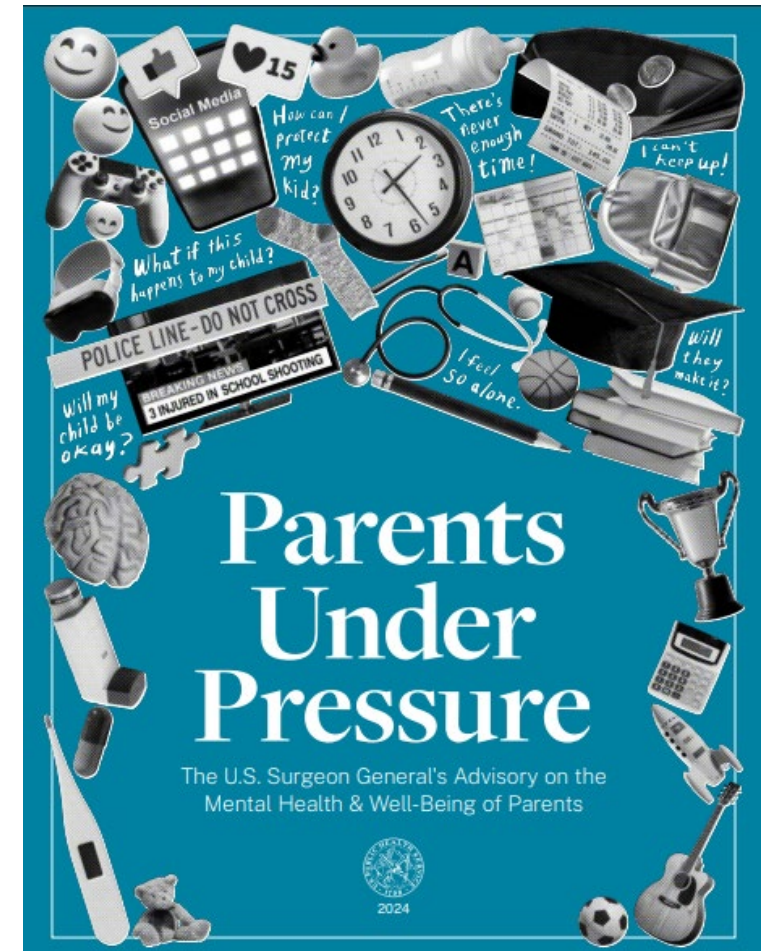
Public health is what we, as a society, do **collectively** to assure the conditions in which (all) people can be healthy.

Institute of Medicine  
*The Future of Public Health*, 1988  
& 1997



# Parents Under Pressure: Key Statistics

- **33%** of parents **reported high levels of stress** in the past month, compared to 20% of adults without children.
- **41%** of parents say that most days they are **so stressed they “cannot function”**.
- **65%** of parents/guardians report **loneliness**; among single parents that figure was ~77%.



# Parents Under Pressure: Identified Stressors

- **Financial strain/economic instability/poverty** (costs of child-care, housing, health care)
- **Time demands & work-family conflict** — parents working longer hours, also spending more time on child-care, leaving less time for rest, partner, leisure.
- **Children's health and safety concerns** (including rising youth mental health challenges, school safety, etc.).
- **Technology / social media pressures** (parents worry about kids' online lives, social media, etc.)
- **Parental isolation and loneliness / lack of support networks** — many parents feel they are doing this largely alone.

# Why Family Resource Centers

Research has shown that children are more likely to thrive when they live in safe, stable, nurturing environments and in families that have the support and opportunities they need.

- FRCs are a model for primary prevention
- FRCs offer a broad array of activities that are universally accessible
- FRCs deliver evidence-based and evidence-informed programs
- FRCs fill a niche not covered by other services in the state



# What is a Family Resource Center

FRCs are community-based or school-based organizations that serve as welcoming hubs of services and opportunities designed to strengthen families.

- Programming is typically offered at no or low cost
- Reflective of and responsive to the specific needs, culture and interests of the communities and populations they serve



# What is the Role of a FRC?

- Help strengthen families to prevent child maltreatment before it happens
- Services are for **ALL** families, regardless of their background or level of risk

## 5 Core Service Areas →



Parenting Support



Resource Navigation  
Supports



Child Development  
Activities



Parent Leadership  
Development



Community  
Engagement

# Parenting Supports Continuum

**Parent  
Engagement  
Activities**

**Parenting  
Support  
Programs**

**Evidence  
Based Parent  
Education**

**Evidence  
Based Home  
Visiting**

**Lower Intensity**



**Higher Intensity**

## **Parent Engagement:**

- Referrals to other Services
- Parenting Hotline
- Lending Library
- Family Fun Event
- Activity Kits
- Concrete Supports
- Welcome Baby Visits
- Community Events
- Lending Library
- Open Play/Gym

## **Parenting Support:**

- Play Groups
- Triple P Discussion Group
- Parent Cafes
- Five for Families
- Newborn Programs
- Co-Parenting Class
- Parent/Child Workshops

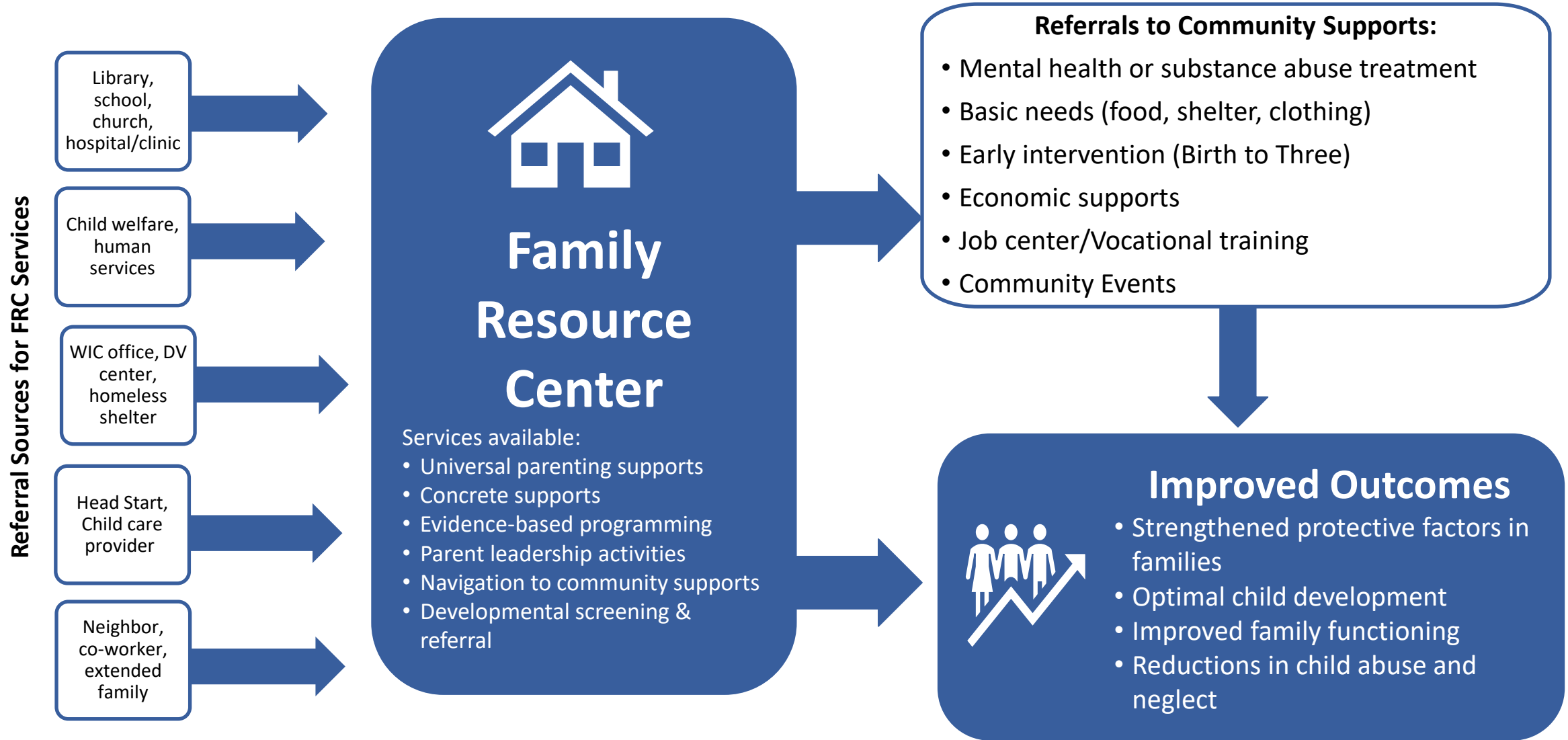
## **Evidenced Based PE**

- Triple P 1:1
- Active Parenting Class
- Act Raising Safe kids
- Triple P Group
- Nurturing Parenting
- Conscious Discipline
- Growing Great Kids

## **Evidence Based HV**

- Parents As Teachers
- Healthy Families America

# FRC Supports and Services: What does an FRC do



# Benefits & Impact of Family Support Services



**Reduction in Child Maltreatment**



**Proven Return on Investment**



**Navigation support for families**



**Improved Family Functioning**



## Protective Factors

- Knowledge of Parenting and Child Development
- Social and Emotional Competencies of Children
- Social Connections
- Parental Resilience
- Concrete Supports



## 5 Strengths

- Thoughtful Parenting
- Feelings Matter
- Strong Connections
- Inner Strength
- Practical Help

# Connecting 5 Strengths to FRC Core Services

## **5 Strengths**

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Feelings Matter

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Thoughtful Parenting

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Strong Connections

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Inner Strength

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Practical Help

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## **FRC Core Services**

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Parenting Supports

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Child Development Activities

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Parent Leadership Development

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Resource Navigation Supports

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Community Engagement

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# Family Resource Center Network

POWERED BY



THRIVING WISCONSIN

# The Role as FRC Network Administrator

## Provide High Quality Training

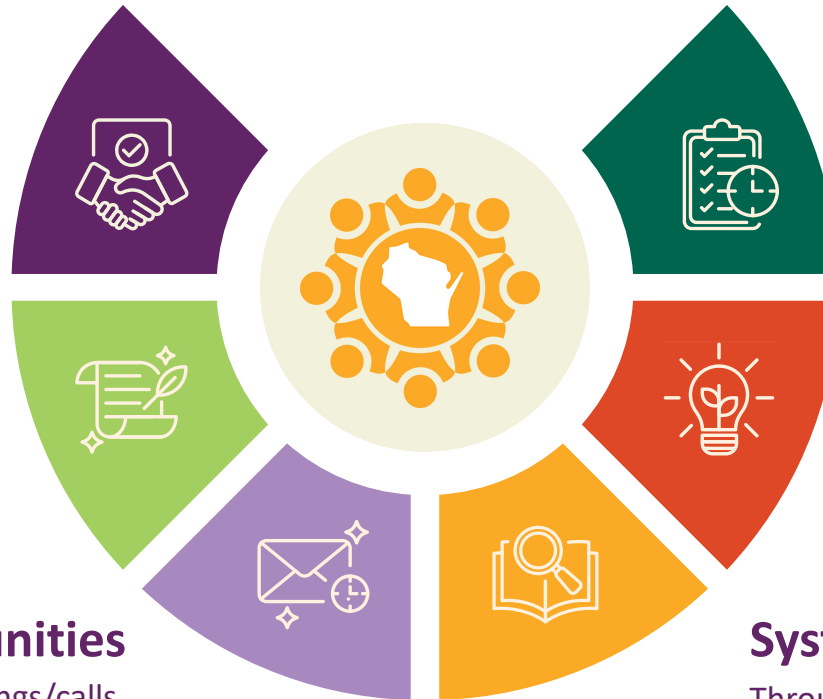
Offer a variety of family support training to support FRC of Quality Accreditation and to enhance staff knowledge, skills, and abilities in their professional role.

## Tailored Technical Assistance

Provide customized technical assistance and coaching for member agency leadership and staff to support their agency goals and strategic vision.

## Peer Networking Opportunities

Coordinate regular Director meetings/calls, community of practices opportunities for peer learning and professional networking.



## Data Collection & Quality Improvement

Collect and analyze data for the field of family support. Create reports to demonstrate the impact of FRCs in Wisconsin.

## Advocacy & Awareness

Coordinate advocacy activities to increase awareness of and funding for family support services. Facilitate statewide marketing campaigns to promote FRCs to the broader population.

## Systems Building

Through systems and relationship building among FRC members, stakeholders, partners, and more. Highly efficient program management and development.

# Benefits & Impact of Family Support Services

## FRC Core Services Breakdown

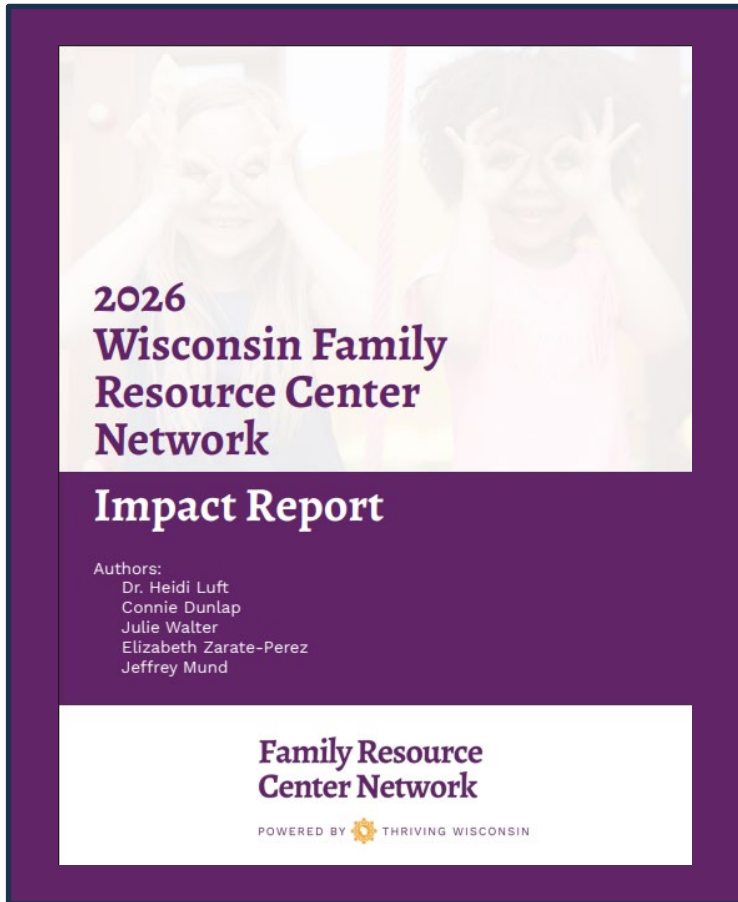
Average % of FRC budget dedicated to each service area



# Training Requirements

- National Standards of Quality for Family Strengthen & Support
- Bringing the Protective Factors Framework to Life in Your Work
- Parent Leadership: The Key to a Successful Family Resource Center
- Family Resource Center Foundations
- Child Sexual Abuse Prevention training (Stewards of Children)
- Online Core Competencies modules
- Online Abusive Head Trauma Prevention (Period of Purple Crying and Sentinel Injuries)

# Wisconsin FRC Publications/Resources

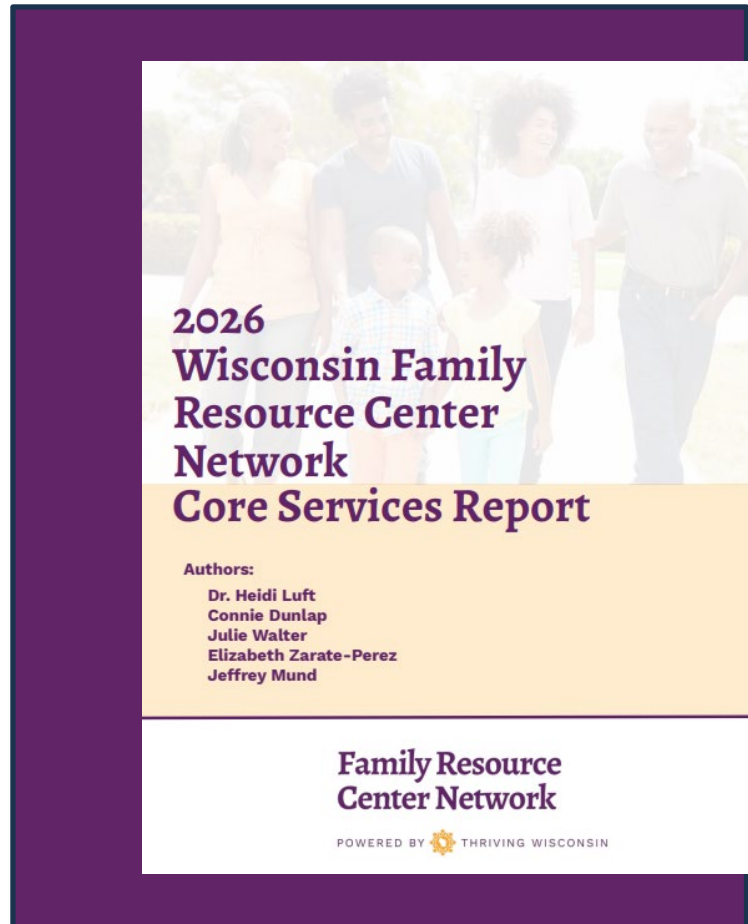


## Key Highlights:

- **64%** of FRC funding in Wisconsin comes from **local partners**
- On average, FRCs secure **6 individual contracts** to fund their agency (with the highest being 25 contracts)
- In 2025, with current funding levels, FRCs served **17,183 unduplicated families**; reaching just **2.7% of Wisconsin families** with children under age 18.
- FRC services reach 54 of 72 (**75%**) **counties** and 3 of 11 (**27%**) **First Nations/Tribes** in Wisconsin

[www.thrivingwi.org](http://www.thrivingwi.org)

# WI FRC Publications/Resources



[www.thrivingwi.org](http://www.thrivingwi.org)

# Thank You!



Send additional feedback to: [preventionboard@wisconsin.gov](mailto:preventionboard@wisconsin.gov)



<https://www.nationalfamilysupportnetwork.org/resources>



Visit our websites: [fiveforfamilies.org](http://fiveforfamilies.org); [preventionboard.wi.gov](http://preventionboard.wi.gov)

# EVALUATING FAMILY RESOURCE CENTERS: FINDINGS FROM THE STRONG & STABLE FAMILIES STUDY

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- Thriving Wisconsin
- Wisconsin Department of Children and Families

*The contents of this presentation are those of the author(s) and do not necessarily represent the official views of the Wisconsin Child Abuse & Neglect Prevention Board or the Wisconsin Department of Children and Families.*

# FRC PARTNERS

## FAMILY RESOURCE CENTERS

4C Family Center, Washington Co.

Indian Community School, Franklin

Family & Child Resource Center of N.E.W., Brown Co.

Lakeland Family Resource Center, Washburn Co.

Family Connections, Sheboygan

Northwest Connection Family Resources

Family Resource Center, Burnett Co.

Parents Place, Waukesha

Family Resource Center, Black River Falls

Prevention Services Network, Kenosha

Family Resource Center, Eau Claire Co.

River Source Family Center, Chippewa Falls

Family Resource Center, Rhinelander

The Parenting Place, La Crosse

Family Resource Center, Rock Co.

The Parenting Network, Milwaukee

Family Resource Center, St. Croix Valley

Watertown Family Center

**PART ONE:**

**WHO DO FRCs SERVE?**

# BACKGROUND

- There are roughly 3,000 Family Resource Centers in the U.S. that serve about two million families each year
- Despite their long history and national reach, rigorous research on FRCs is limited
- Therefore, we launched a first-of-its-kind study in 2021 with two aims:
  1. Identify protective factors that reduce the risk of child abuse and neglect
  2. Explore the implementation and impact of Wisconsin's FRCs

# STRONG & STABLE FAMILIES

- Wave 1 Survey (2021-23): 2,135 families with children in Wisconsin
  - 646 received services from one of 18 FRCs
  - 1,489 households from the general population
- Wave 2 Survey (2024-26)
- Focus groups and interviews with FRC families (n = 32) and staff (n = 31)
- Matching CPS records and Census records

<https://uwm.edu/icfw/strong-and-stable-families/>



STRONG AND STABLE FAMILIES

# WAVE 1 SURVEY

| Measurement Domains           | Examples                                                 |
|-------------------------------|----------------------------------------------------------|
| Family Demographics           | Age; Race/Ethnicity; Gender; Income                      |
| Social Determinants of Health | Health Care; Housing; Employment                         |
| Adverse Adult Experiences     | Domestic Violence; Substance Use; Homelessness           |
| Positive Adult Experiences    | Healthy Relationships; Safety; Resources & Opportunities |
| Family Protective Factors     | Family Functioning; Social Support; Concrete Support     |
| Health & Well-being           | Depression; Anxiety; Substance Use; Life Satisfaction    |
| FRC Service Experiences       | Types of Services Received; Satisfaction                 |

# SAMPLE DESCRIPTION

|                       | <b>Gen Pop<br/>Sample<br/>n = 1,489</b> | <b>FRC<br/>Sample<br/>n = 646</b> |
|-----------------------|-----------------------------------------|-----------------------------------|
| <b>Age (mean)</b>     | 41.9                                    | 35.5                              |
| <b>Female</b>         | 84.0%                                   | 90.7%                             |
| <b>Race/Ethnicity</b> |                                         |                                   |
| AI/AN                 | 1.7%                                    | 6.7%                              |
| Black                 | 4.3%                                    | 9.0%                              |
| Hispanic              | 4.8%                                    | 11.1%                             |
| White                 | 85.6%                                   | 68.1%                             |
| Other                 | 3.6%                                    | 5.1%                              |
| <b>Income</b>         |                                         |                                   |
| < \$50,000            | 19.6%                                   | 50.0%                             |
| \$50,000 – \$99,999   | 32.5%                                   | 31.4%                             |
| ≥ \$100k              | 47.9%                                   | 18.6%                             |
| <b>CPS History</b>    | 7.3%                                    | 18.1%                             |



**FRCs serve a diverse  
population statewide**



**FRCs serve families across  
the socioeconomic spectrum**



**FRCs serve many families at  
risk of CPS involvement**

# SOCIAL DETERMINANTS

| In the past year, have you...                                                    | Gen Pop.<br>Sample | FRC<br>Sample |
|----------------------------------------------------------------------------------|--------------------|---------------|
| ...been unemployed when you really needed and wanted a job?                      | 6.7%               | 21.7%         |
| ...lost access to your regular transportation?                                   | 4.0%               | 15.0%         |
| ...been evicted from your home or apartment?                                     | 1.0%               | 4.4%          |
| ...lived at a shelter, in a hotel/motel, in an abandoned building, or a vehicle? | 0.7%               | 7.6%          |

# ADVERSE ADULT EXPERIENCES

|                     | Adverse Adult Experiences   | Gen Pop Sample | FRC Sample |
|---------------------|-----------------------------|----------------|------------|
| PARTNER/SPOUSE AAEs | Mental health problem       | 36.6%          | 45.1%      |
|                     | Substance use               | 28.6%          | 39.1%      |
|                     | Physical or emotional abuse | 28.5%          | 37.9%      |
|                     | Incarceration               | 15.4%          | 25.9%      |
|                     | Sexual abuse                | 7.0%           | 12.6%      |
| SOCIOECONOMIC AAEs  | Discrimination              | 55.7%          | 59.8%      |
|                     | Chronic financial problems  | 13.4%          | 23.2%      |
|                     | Homelessness                | 7.7%           | 25.5%      |
|                     | Violent crime victim        | 8.4%           | 13.8%      |
|                     | Sexual assault              | 6.9%           | 14.1%      |

## 4+ AAEs

FRC = 38%

Gen Pop = 21%

# CONSEQUENCES OF AAEs

- Higher AAE scores were associated with:
  - An increased risk of depression and anxiety
  - Lower life satisfaction and quality of life
  - Poorer physical health

Mersky, J. P., Lee, C. P., & Liu, X. (2025). Advancing the study of adverse adult experiences: A validation study of the adult experiences survey. *Journal of Family Violence*, 1-13.

# POSITIVE ADULT EXPERIENCES

- Positive experiences were linked to reduced depression and anxiety as well as improved health and quality of life
- Higher scores on the Protective Factors Survey-2 (social support; concrete support; positive family functioning) were also associated with better outcomes
- Positive experiences and protective factors were more advantageous for adults with **high levels of adversity**

## Positive Adult Experiences

Able to talk to your family

Family stands by you

Safe in your home

Supported by friends

Belonging in your community

Have the resources and opportunities you need

Mersky, J. P., Plummer Lee, C., Liu, X., & Soto, M. (accepted). Advancing the study of adversity and resilience in adulthood: Exploring the influence of positive adult experiences. *Psychological Trauma: Theory, Research, Practice, and Policy*.

# WHY STUDY ADULT EXPERIENCES?

- Like ACEs, AAEs are **highly prevalent and consequential**
- Unlike ACEs, AAEs can **directly impact** children in the household
  - In other words, a parent's AAEs are often the child's ACEs
- AAEs **may reflect current household conditions**
- AAEs are **alterable**
  - FRCs may reduce AAEs and their impact by introducing PAEs and strengthening protective factors

# **BRIEF DISCUSSION**

**PART TWO:**

**HOW DO FRCs STRENGTHEN FAMILIES?**

# WAVE 1: SERVICES RECEIVED

| FRC Activities                        | % Received |
|---------------------------------------|------------|
| Family and Community Event            | 48.4%      |
| Parenting Education and Services      | 42.0%      |
| Parent-Child Group                    | 41.8%      |
| Open Play Space                       | 40.5%      |
| Parenting Groups                      | 37.4%      |
| Opportunities to Know Other Parents   | 32.8%      |
| Help Finding Community Resources      | 28.2%      |
| Drop-In Center                        | 22.6%      |
| Support for Basic Needs               | 22.5%      |
| Lending Library (e.g., books; toys)   | 20.5%      |
| Developmental Screening               | 20.1%      |
| Financial Information and Resources   | 17.9%      |
| Home Visiting                         | 16.2%      |
| Literacy or Educational Services      | 12.5%      |
| Information about Childcare Providers | 11.4%      |
| Violence Prevention                   | 5.5%       |
| Support for Child with Special Needs  | 4.5%       |
| Respite or Crisis Care                | 3.6%       |

# WAVE 2 SURVEY



- Matched a subgroup of FRC participants (n = 606) to a subgroup of participants in the general population sample (n = 735)
- Gathered survey data 3 years post-baseline
- Wave 2 survey asks about CPS involvement, protective factors, resource connections, parenting practices, child development, adult health & well-being, etc.
- 839 out of 1,341 participants completed the survey (62.6%)

## WAVE 2: RESOURCE REFERRALS

- At wave 2, we asked: ***Since your oldest child was born, has an agency or service provider in your community ever helped you or someone in your household by providing information or a referral to any of the following?***
- We compared whether FRC participants were more likely than the general population sample to have received different types of information and referrals

| Type of Information or Referral         | FRC vs. GP<br>Odds Ratio |
|-----------------------------------------|--------------------------|
| Parenting Education or Skills           | 2.90*                    |
| Home Visiting                           | 2.42*                    |
| Services for Child Disability or Delay  | 1.91*                    |
| Basic Needs                             | 1.87*                    |
| Childcare                               | 1.76*                    |
| Employment or Financial Support         | 1.75*                    |
| Violence Prevention/Crisis Intervention | 1.73*                    |
| Mental Health Services                  | 1.65*                    |
| Head Start or Early Head Start          | 1.62*                    |
| Literacy, Language, or Adult Education  | 1.58                     |
| Medical or Dental Care                  | 1.46*                    |
| Respite Care                            | 1.43                     |
| Housing or Energy Assistance            | 1.33                     |
| Substance Use Services                  | 0.88                     |
| <b>Any Support Received</b>             | <b>2.81*</b>             |

\*Note.  $p < .05$ ; Covariates = income, age, race/ethnicity; gender.

# SUMMARY

- FRCs increase access to services, resources, and opportunities that strengthen families and communities in ways that are likely to reduce child abuse & neglect
- FRCs are likely to have direct and indirect impacts
- FRC experiences vary by design—supports match family and community needs
- Recently, we began to explore the role that FRCs play in strengthening rural families and communities

# ADDRESSING RURAL DISPARITIES

- Rural children and adults face a ***double disparity***—they disproportionately suffer from health-related concerns that are compounded by inadequate access to resources
- FRCs may be especially vital in rural areas
- FRCs are a viable national strategy for addressing rural disparities
- We conducted a mixed-methods study to explore whether FRCs address disparities by linking families to services, resources, and opportunities

Mersky, J. P., Janczewski, C. E., Pollard, J., Amphlett, A., Lee, C. P., Walther, A. K., & Liu, X. (2026). Addressing Access Barriers in Rural America: A Mixed-Methods Study of Wisconsin's Family Resource Centers. *The Journal of Rural Health*, 42(3), e70201. <https://onlinelibrary.wiley.com/doi/abs/10.1111/jrh.70201>

# RURAL DISPARITIES IN WISCONSIN

- We found that 64% of Wisconsin's rural ZIP codes are low-opportunity areas, as compared to less 23% of non-rural ZIP codes.<sup>1</sup>
- As one family member put it: *“Like it’s just this small area community that I live in, there’s a lack of resources, period.”*
- Rural families were more likely than non-rural families to receive FRC support with finding community resources
- Non-rural families were more likely to engage in parent–child activities and parenting groups

Child Opportunity Index 3.0. (2023). <https://www.diversitydatakids.org/child-opportunity-index>

# ADDRESSING RURAL NEEDS

We learned that rural FRCs reduce access barriers in three ways:

1. FRCs address acute needs (e.g., car repairs; energy assistance) that hinder families from seeking support or meeting less urgent needs

*“There were a few additional resources like getting my car fixed and other things that my worker had shown me. She also got me into a rental assistance program at one point. The lady I had was amazing.”*

-Family participant

# ADDRESSING RURAL NEEDS

2. FRCs meet families where they are: They routinely schedule public events in different communities, and some maintain satellite offices in different regions

*“We didn’t often go to the FRC, but we would attend the programming that was in the surrounding towns and that’s important. The more they can do with that, the better, because it’s not always easy to travel.”*

-Family participant

*“We have a good handful that come to our center, but most of our programming is out in the community because we [serve] three counties... So, it’s meeting them at the libraries or coffee shops, or we meet everybody that delivers at four different hospitals.”*

-Staff participant

# ADDRESSING RURAL NEEDS

3. FRCs partner with community agencies, and FRC staff establish relationships with local providers

*“For example, housing, which you would think would be very challenging in a rural community. We have one staff person who is passionate about it and now a landlord will contact her when there is an opening.”*

-Staff participant

# PRIMARY PREVENTION OF ABUSE & NEGLECT

- FRCs have significant primary prevention potential because they:
  - (a) Link families to social and economic supports that are known to reduce the risk of child abuse & neglect
  - (b) Services are universally available, free or low-cost, and (mostly) voluntary
    - Promotes family engagement by reducing stigma
  - (c) Serve large numbers of families from different socioeconomic backgrounds
  - (d) Can be tailored to suit the needs of different families and communities

# THANK YOU!

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Institute for Child & Family Well-being

<https://uwm.edu/icfw/>