

## Family Resource Programs: Values, Evidence and Challenges

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### Abstract

Family resource programs are community-based initiatives that offer multidisciplinary services and resources to families with the aim of helping them to maximize their potential. Programs serve individuals who demonstrate a range of needs, and employ personnel who work from a strengths-based, empowerment-promoting perspective. It is believed that adopting such a philosophy will promote the healthy development of the entire family system. The author discusses the historical basis and theoretical underpinnings of current family resource models, and provides a review of current research. Program elements identified as most effective are highlighted, and parents' preferences and frustrations are discussed. In doing so, critical practical and theoretical challenges are identified, and suggestions regarding essential areas for future inquiry are made.

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## ***Introduction***

Family resource programs are community-based initiatives that offer services and resources to families with the aim of helping them to maximize their potential. Services are multidisciplinary in nature, and reflect the unique needs of their participants and the communities in which they are situated. Programs serve individuals who demonstrate a range of needs, and employ personnel who work from a strengths-based perspective to promote the healthy development of the entire family unit.

This paper provides an overview of family resource programs' historical and theoretical foundation, along with a summary of current research. Program elements identified as most effective are highlighted, and parents' preferences and frustrations are discussed. In addition, both practical and theoretical challenges are identified, and suggestions regarding potential areas for future inquiry are made.

Due to the fact that each program is unique, a number of difficulties arise when attempting to generate a universal definition. For example, programs differ vastly in terms of the services they offer, the populations they serve, centre titles and affiliations, involved professionals, and sources of funding (Smythe, 2004). According to Dunst (1995), an "all-inclusive definition of family resource programs is scientifically, functionally, and practically useless" (p. 8). He, therefore, suggests developing a definition that emphasizes the wide diversity that exists across programs.

Kyle and Kellerman (1998) achieve this aim. After conducting case studies of 15 Canadian family resource programs, they developed a comprehensive definition that accurately captures the divergence that is so essential within this sphere of service delivery:

Family resource programs are multi-service, non-profit, community-based programs that promote social support, co-operation, collective responsibility (civic mindedness) and

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citizenship through offering a mix of education, information, activities, material support and other resources to family members and groups of families across a number of service areas. These service areas may include parent/caregiver education, family preservation, child care and development, health and safety, food and nutrition, recreation, life skills, employment support and community economic development, housing, literacy, and community education and leadership development. The range of services offered by family resource programs varies depending on their stage of organizational development, their specific community context, their assessment of community needs and on available resources. Not all services are offered by every family resource program, nor are they necessarily provided directly, but may be offered in partnership through co-operation and collaboration with other local groups and services. (p. 55)

This description is useful as it clearly communicates the multidisciplinary nature and range of potential services that may be provided by family resource programs. It also effectively portrays the objectives that service providers aim to help families attain.

### ***Historical Evolution***

Family resource programs in Canada have their origins in the settlement house movement that began in London, England in the late 1800s. These establishments offered services to the city's working class, and emphasized the importance of higher education in helping those involved to realize their potentials and strive to better their lives (Kyle & Kellerman, 1998). According to Kirby (2000), service providers in these settings also encouraged participants to take initiative to help themselves. This is similar to the currently emphasized notion of empowerment, and is considered central to program success today. The first settlement house in Canada, *Evangelia*, was opened in Toronto in 1902 (Kyle & Kellerman, 1998).

During the 1900s in Canada, efforts were directed toward parent, or perhaps more accurately, maternal education in response to high infant mortality rates. Intervention occurred in the form of home visits from public health nurses, and development of baby clinics (i.e., Well Baby Clinics). The Victorian Order of Nurses, founded in 1897 in Ottawa, was an influential

social service of the time, offering prenatal care, as well as parenting and hygiene education, and helped to improve infant and maternal health (Kyle & Kellerman, 1998).

Other Canadian family services that helped to pave the way for family resource programs' establishment include self-help and mutual aid groups. These groups, of which Alcoholics Anonymous serves as a salient example, provide individuals with opportunities to meet and connect with others dealing with common struggles, to share their experiences, and to lean on one another for support. Facilities such as toy libraries, drop-in programs, and parent-child centres began to appear in Canada in the 1970s, and provided families with much-needed instrumental support (Kyle & Kellerman, 1998).

In examining the historical origins of family resource programs, how little the core components have changed in over a century becomes overwhelmingly evident. Programs today use many of the same elements, including home visiting, and the provision of social, instrumental, and educational forms of support, as were implemented in the past. This speaks to the enduring nature of such aspects, and likely indicates that they are accepted and appreciated by families.

Nobody's Perfect is a community-based initiative that aims to provide families with many of these obviously essential components. Developed in 1980 out of a partnership between the Public Health Agency of Canada and the four Atlantic provinces' Departments of Health, the Nobody's Perfect curriculum is aimed toward "at-risk" parents and their young children (between birth and five years). "At-risk" refers to parents who are young, single, low-income, isolated, and who may have limited education. The program, which has been available nationally since 1987, is delivered in a small-group environment where parent sharing and participation is encouraged. The aims include educating parents about child health, safety and

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behavior, positively changing their relationships, improving their competence and confidence as parents, teaching them effective coping skills, and expanding their social support networks (Public Health Agency of Canada [PHAC], 2003). Studies have demonstrated that Nobody's Perfect is effective at achieving its intended aims and is considered to be a best practice model for family education and support (Skrypnek & Charchun, 2009; VanderPlaat, 1989).

### *Underlying Principles of Family Resource Programs*

Although vast differences exist across centres, family resource programs share common principles that govern how professionals view and interact with families. Service providers recognize that the primary responsibility for a child's healthy development and well-being lies with his or her family, and as such, support parents' journey toward learning appropriate disciplinary techniques, positive communication strategies, and functional coping mechanisms (Canadian Association of Family Resource Programs [FRP Canada], 2001). The ultimate goal of family resource work is to improve overall child and family functioning by empowering parents.

As previously stated, family resource programs aim to help "at-risk" or vulnerable families, as these groups are more likely to experience negative outcomes. Willms' (2002) discussion of socioeconomic gradients helps to shed light on this issue. According to this hypothesis,

people at the lower end of the social hierarchy tend to have a greater frequency of illness and disease and a shorter life span than those further up . . . children and youth . . . tend to do less well in academic pursuits, are less likely to complete secondary school, and tend to be less successful in entering the labour market than those from more advantaged backgrounds. (p. 8)

This projection has been corroborated by research. Results from Canada's National Longitudinal Survey of Children and Youth demonstrate that socioeconomic status, based on parents' levels of education, occupation prestige, and family income, significantly relates to children's

vulnerability (Willms, 2002). Two factors that appear to be especially significant are maternal age and education. The younger and less educated a mother is, the more likely her child is to experience poor social, cognitive, and behavioural outcomes (Willms, 2002). This indicates that intervention is necessary in order for individuals' developmental trajectories to be positively redirected. It is this knowledge that provides the supporting rationale for family resource programs. Programs strive to provide families with the tools that will allow them to embrace and fulfill their parenting roles, and enable them to better meet their children's needs.

Family support professionals view families from an ecological perspective. They see the child and family as interconnected not only to each other, but also to the larger community of which they are a part (Bronfenbrenner, 1979). Service providers are thus encouraged to address and incorporate the settings and individuals important in families' lives. These may include the home, work, and school environments, and may involve friends, neighbours, teachers, and extended family members. This also points to the importance family resource programs place on the community context as programs often utilize and connect families with existing community supports. This is a beneficial practice for a number of reasons. Of primary importance is that it assists families in making connections and serves as a form of social support. It is also a more cost-effective exercise for under-funded programs to team up as opposed to duplicating already-existing services, and furthermore, barriers to access are reduced (Smythe, 2004).

Service providers also look upon parenting as a continual learning process. This developmental perspective views children's and parents' learning as occurring in tandem (i.e., one informs the other), and acknowledges that all individuals become parents at different social and emotional points in their lives, and with varied levels of skill (Dunst, 1995; Smythe, 2004). It is for these reasons that individuals' strengths are used as starting points from which to build.

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Professionals emphasize parents' existing skills and abilities, believing this to be a more effective means of developing their confidence than by focusing on their inadequacies (Dunst, 1995; FRP Canada, 2001; Kyle & Kellerman, 1998). Family resource personnel demonstrate their support for families by interacting with them not as professional and client, but as equals. As such, professionals are respectful and nonjudgmental, and aim to collaborate with families in individualized and flexible ways. Honesty and trust, open communication and information sharing, as well as active and engaged listening characterize these partnerships (Dunst, 1995).

As noted, social support is an extremely important component of family resource programs. By bringing together formal and informal community supports, parents feel more strongly connected, gain valuable parenting knowledge and skills, and establish critical social networks (Kyle & Kellerman, 1998). According to Dunst (1995), social support assists families in four ways. First, it improves their access to important resources, such as time, energy, knowledge, and skills, which allow them to keep up with their parenting responsibilities. Families are also linked with essential community resources, thus reducing their feelings of isolation, and allowing them access to a valuable source of instrumental support. Dunst also states that social support gained through program participation encourages families to reorient their ideals to be more in line with successful principles of family support, thus making them more receptive to parent education and improving their outcomes. Finally, families realize their own strengths and capabilities, become less dependent on formal social services, and increasingly reliant on themselves. Gaining such competencies provides potentially at-risk parents with the necessary confidence to successfully face future adversity.

It is through the aforementioned approaches that professionals hope families will achieve the ultimate goal of becoming empowered. According to Dunst and Trivette (1996), individuals

become empowered after being exposed to participatory experiences. These are opportunities that strengthen existing capabilities, and allow individuals to experience success. Empowered individuals demonstrate greater self-confidence and self-efficacy, and set higher expectations for themselves. They are also more inclined to seek other competency-enhancing situations, to further experience success, and to make positive self-appraisals. Empowered parents do not rely on others in order to experience positive change, but become active participants by making choices that fulfill their best interests (Dunst, 1995).

### ***Program Components***

As previously stated, family resource programs offer a range of services depending on community circumstances, available resources, and parent interest. Kyle and Kellerman's (1998) investigation of 15 Canadian family resource programs effectively portrays the extent of this diversity, as over 100 distinct program components were identified. Those most commonly found (present in at least half of the investigated programs) were grouped into five broad categories. The first, and most commonly found, were *Parent/Caregiver Support and Education* programs. This refers to such services as drop-in times, playgroups, information and referral services, parenting education courses, access to toy and resource libraries, support groups, and family social events. Programs such as these are not only widespread, but also effective. According to the Harvard Family Learning Project (2006), providing time for parent-child bonding is a "best practice" of family resource programs. This is a time when program staff can model positive parenting behaviours, and parents can learn what developmentally appropriate activities they and their children can enjoy together. These opportunities are also important to parents, as they promote involvement and enhance parent-child communication (Silver, Berman, & Wilson, 2005).

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*Family Preservation*, the next most popular category, incorporates home visiting, short-term counseling, and mediation and support. Also within this category is education and counseling about family law, family violence, separation, and divorce. This is particularly relevant, as other research has demonstrated that this is an area in which parents demonstrate a great deal of interest (Silver et al., 2005). As many parents who seek family support are single, or are experiencing relationship problems, inclusion of such a component is highly valued by participants (Onyskiw, Harrison, Spady, & McConnan, 1999; PHAC, 2004).

The next group, *Child-Care and Children's Programs*, includes child-care, support and training for child-care providers, and before- and after-school programs. Research demonstrates that this component is appreciated by parents, and positively affects their outcomes. Statham and Holtermann (2004) found that parents valued the child-care provided in their support programs because it gave them a much-needed break, allowed their children to meet same-aged peers, and provided opportunities for developmentally appropriate play. In Layzer, Goodson, Bernstein, and Price's (2001) meta-analysis, programs that provided services directly to children were found to be effective in promoting children's cognitive development and school readiness. It is also likely that this practice promotes parental well-being, as it reduces stress (Statham & Holtermann, 2004).

Programs that had *Material Support and Nutrition* components offered classes on family nutrition, had community kitchens, and food and clothing exchanges. Exchange programs such as these allow parents to receive material support without feeling guilty or indebted (Sullivan, 2002). Examples of *Other Adult Education and Recreation Programs* include workshops and discussion groups covering topics unrelated to parenting, and weekend retreats. These allow

parents to establish peer connections and to temporarily escape from their numerous and potentially overwhelming responsibilities.

Research has demonstrated that centres that adopt the above-suggested philosophies and program components are associated with more positive outcomes. MacLeod and Nelson (2003) conducted a meta-analysis of family resource programs in order to identify which program types related most positively to family wellness and effectively prevented child maltreatment. They found that programs demonstrating the largest effect sizes were the ones that incorporated home visits over a period longer than six months and had more than 12 sessions. This finding could be related to the amount of time necessary for rapport building and the establishment of open and honest family-professional relationships. It is probable that programs lasting less than six months do not provide sufficient opportunity for families to feel comfortable with their service providers, and as a result, little progress is made or maintained.

Programs that facilitate social support are important to parents, and demonstrate significantly larger effect sizes than those that do not (MacLeod & Nelson, 2003). This is likely due to the fact that by meeting others who share similar experiences, their feelings of isolation are reduced. Individuals also realize that they are not alone in experiencing parenting difficulties, which reduces their guilt and sense of failure (Sullivan, 2002). Programs that are strengths-based and aim to empower families also demonstrate positive outcomes (MacLeod & Nelson, 2003). This is to be expected as capacity-building programs encourage parents to be reliant on themselves, confident in their abilities, and undaunted in asking for help.

Another interesting finding was that programs including participants of mixed socioeconomic backgrounds demonstrated larger effect sizes (MacLeod & Nelson, 2003). This could be due to the fact that including such a range is more reflective of the communities in

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which programs are situated, and provides comfortable and nonjudgmental opportunities for interaction. It is likely that professionals who share a sub-culture with families will have an implicit understanding of families' norms and values, and will therefore be better able to sensitively address and incorporate them within their service delivery approach (Bowe, 2007).

As a result, social barriers are reduced, participants with differing sociocultural backgrounds may learn from one another, and existing stereotypes are deconstructed.

### *Parents' Preferences*

Research addressing parents' preferences and desire for change also holds significant value, as this information provides program administrators with insight into potential areas for future improvement. Herman, Marcenko, and Hazel (1996) conducted interviews with parents involved in family resource programs to determine which factors they considered to be most essential. Intensity of services was one such element. As previously discussed, it is important that sufficient time is available for relationship building, as this improves the likelihood that families' needs will be understood and appropriately addressed. Families also value services that are flexible to their needs, yet well structured. As parents find accessing services to be both difficult and confusing, it is essential that professionals play a central role in providing guidance and easing their uncertainty. This will reduce participants' stress and make it more likely that they will be appropriately matched with the services they need, thus improving their experiences and outcomes.

In Silver et al.'s (2005) more recent study, the same measures were used with families who attended programs in Canada, and similar results were obtained. In both studies, parents identified the importance of sensitive and well-trained staff. Specifically, parents thought staff should be trustworthy, respectful, non-judgmental, resourceful, and have a strengths-based focus.

Parents felt welcome in these kinds of environments, and experienced increased confidence, autonomy and control as a result.

Parents have also expressed their dissatisfaction with service provision. Statham and Holtermann (2004) found that parents were frustrated when professionals did not follow through with promised services or keep them informed. Parents were also disappointed when they perceived that professionals demonstrated a lack of respect and appreciation regarding the extent of their difficulties. Program personnel's sensitivity toward parents' struggles and varying degrees of knowledge is a central principle of the family support model. As such, it is upsetting for parents when they feel that they are not being treated with the respect they deserve. These issues likely arise from the fact that the demands placed on service providers exceed their capacity. As a result, families may not receive sufficient attention.

Research also demonstrates that parents value programs that can offer a range of services. Onyskiw et al. (1999) developed a program in Edmonton, Alberta called *Together for Kids*, in which families had access to community nurses, social workers, child welfare workers, a mental health therapist, a police officer, and a child abuse detective within one centre. Participants reported that the multidisciplinary nature of this program made their experiences both personalized and responsive. Another important aspect was its nondescript location, which was among other professional offices. Parents felt that they could come and go without others being able to identify that they were seeking parenting help. It was also easily accessible by a popular bus route. In parents' often turbulent lives, the presence of such factors makes it easier for them to attend, and increases the likelihood that their involvement will be maintained over time.

### ***Challenges and Recommendations***

Despite the successes of these programs in improving parent-child relationships, child functioning, and parental well-being, numerous challenges remain. Although there are many that could be identified, the following will address those that are most widely cited in both research and practice: how to effectively involve parents, obtain necessary funding, and engage in constructive evaluation. Other areas that deserve future attention include facilitating father involvement, forming collaborative community connections, establishing formal staff training requirements, and expanding programs' focus beyond the early years.

#### **Parental involvement**

Parental involvement is crucial to program improvement. As important stakeholders, their voices deserve to be heard; yet, programs have difficulty effectively engaging this group. This is likely related to parents' feelings of being over-extended. It is doubtful that many parents have the extra time or energy to volunteer at their family resource programs, although they may want to (PHAC, 2000a). Parents may express an interest in participating, but could be deterred by measures such as registration with the Child Abuse Registry, that are mandatory for volunteers. They may also be unable to get to the various offices located across the city to fill out the necessary paperwork, and as such, become frustrated and subsequently lose interest (H. Lilly [pseudonym], personal communication, November 6, 2008).

Programs need to find ways to confront these challenges as parents represent an important perspective that must be sought. A number of helpful suggestions exist as to how programs can successfully facilitate this group's involvement. A key factor is the accessibility of the centre (PHAC, 2002b). If the location of the centre presents transportation challenges, parents are less likely to attend. Some programs have increased parental involvement by

providing transportation to and from their centres, child care during meetings, and adopting parent-friendly scheduling practices by holding meetings in evenings or on weekends (Kirby, 2000; R. Cooper & G. Grace [pseudonyms], personal communication, November 12, 2008; Office of Planning, Research and Evaluation [OPRE], 2005; PHAC, 2002a).

Creating a welcoming and parent-friendly environment is also extremely important as setting a positive tone for parents greatly impacts how involved they will choose to become. Suggestions for creating such a milieu include greeting people at the door, tolerating only positivity from staff and parents, and encouraging families to stay after programs for “hang-out time” (H. Lilly, personal communication, November 6, 2008). Centres may also have an open-door policy whereby participants are free to drop-in at any time. Other programs encourage a family presence by providing free access to the Internet or telephone, having books and newspapers available, and involving all participants and volunteers in centre-related decision-making. Furthermore, centre staff must make a commitment to cultural sensitivity. Pamphlets can be published in a variety of languages, a world map showcasing where participants originate can greet individuals as they enter, and the organization must maintain a strong partnership with community organizations that partner with newcomer families (O. T. Hancock [pseudonym], personal communication, November 10, 2008).

Others have Parent Advisory Committees (PACs). These groups consist of parent volunteers, and serve as a link between families and staff. This may be a more accessible form of participation, as meetings are held in the evenings, relatively infrequently, and no Child Abuse Registries are required. Anecdotally, Directors perceive this to be an accessible way for parents to voice their concerns. As some parents are uncomfortable with directly expressing dissenting views to staff, PACs serve as a “safe” means through which such perspectives can be relayed (H.

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Lilly, personal communication, November 6, 2008; O. T. Hancock, personal communication, November 10, 2008).

Participation may also increase if parents are able to gain abilities that will be of value to them in other settings. OPRE (2005) recommends training both professionals and consumers in important skills, such as leadership and public speaking. In addition, research demonstrates that parents who take an active role in program planning acquire skills in staff management, critical reflection, assertive communication, research, and planning (Kirby, 2000). Participants can also be included in evaluation. Bernard et al. (1999) involved program participants in Atlantic Canada in evaluations, and found that this was an empowering experience. This practice ensured that parents' perspectives were represented, and helped them to see their contributions as valuable.

Another important factor is ensuring that parents hold meaningful roles, as opposed to simply serving as token representatives (OPRE, 2005). Kirby (2000) provides an example of this, as she held participatory workshops and planning sessions with parents attending family resource programs in Newfoundland. She found that when parents were directly involved with planning, they took ownership of the program, and wanted to see their changes through to the end. This researcher experienced unprecedented success, as the parent groups she established continued to meet even after the study had terminated. They formed a group called People Helping People, and held quarterly meetings where they assessed program development and made suggestions for improvement. It is clear that when parents feel their suggestions are taken seriously, they become invested in the program, and are highly motivated to give back through volunteering their time and serving in advisory roles (Silver et al., 2005). Aspects such as these

encourage continued parental involvement and help to maintain their sense of community connection, an established protective factor (MacLeod & Nelson, 2003).

### **Sustainable funding**

Funding presents another major challenge for administrators of family resource programs. Of primary difficulty is the fact that funding is often unstable, and as such, constant uncertainty exists as to what a program's next source of funding will be and whether all present services can be maintained (FRP Canada, 2001). An additional dilemma is that funding is insufficient (Gabor, 2003). Family resource programs do not charge fees for their services, and instead operate on money obtained through government funding, fundraising efforts, and charitable donations. As such, they rely heavily on these sources, and have little money for extras or emergencies. They often have inadequate space, and are forced to stretch their resources further than they were intended to go. Family resource programs are "under-staffed and under-funded" (R. Cooper & G. Grace, personal communication, November 12, 2008). Another concern is that increases in funding do not match changes in cost of living. This raises difficulties in terms of maintaining staff who often leave their jobs for others that can offer more competitive salaries. This is difficult for both centre staff and participating families who have formed meaningful and supportive relationships with these individuals.

Yet another challenge arises from the fact that funding is strongly linked to program outcomes. Evaluation is a difficult undertaking for family support programs, as the results programs strive to achieve are comprehensive in nature, and therefore nearly impossible to measure. It is also challenging for programs that have multiple funding sources, as each may have different and competing criteria (Gabor, 2003). Other difficulties associated with evaluation in family resource programs will be further elaborated upon.

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Currently, the Community Action Program for Children [CAPC] funds many programs across Canada (PHAC, 2008). This initiative provides long-term funding to Canadian community-based family support programs serving young children considered to be at-risk (PHAC, 2004). These projects aim to improve children's current living conditions so they may thrive developmentally now and into the future (CAPC, 1998). Other programs receive funding from very diverse sources, including the United Way, provincial ministries and departments (i.e., Ministry of Child and Family Development, Ministry of Community and Social Services, Ministry of Children and Youth Services, Nova Scotia Department of Community Services), Human Resources and Skills Development Canada, local health authorities, and from private businesses.

Watson and Westheimer (2002) propose that programs to meet funding challenges creatively. They suggest finding funding sources that align with the program's mission so that values do not have to be revamped. They also advise that programs incorporate support from multiple funding agencies, including public and private sources, as this will more accurately reflect a centre's multidisciplinary nature. Finally, they state that programs should maximize their existing funds, and should collaborate with existing agencies. As previously stated, this is a beneficial way to meet families' needs and reduce costs.

### **Evaluation**

Evaluation represents yet another challenge facing family resource programs. As programs vary to such a large extent based on the needs of their surrounding community, universally effective evaluation practices are lacking and are perhaps inappropriate (Berman, 2004; Manalo & Meezan, 2000). In speaking with evaluation experts, funding sources, and leaders of Canadian family resource programs, Gabor (2003) identified a number of critical

issues. First, although program administrators participated in evaluation, they saw little function in it. This practice was done solely as a means of obtaining funds, and held no practical value in terms of informing decision-making or improving service provision. Participants also expressed concern with the fact that evaluations were incongruent with program principles. For example, evaluation focused solely on outcomes, and ignored the process, which according to Gabor (2003), is the “essence of programs” (p. 34). Further, it is true that evaluation measures likely neglect (or are unable) to address what staff members consider to be their most meaningful successes. For example, it is difficult, if not impossible to effectively quantify complex processes such as relationship formation or confidence building.

Another issue concerns the fact that typical evaluations force programs to prove their worth, and do not leave room for honest and critical reflection. As a result, program staff are hesitant to try new approaches, as they may result in less positive outcomes in the short-term, and a subsequent detrimental loss of funding. Participants are likely frustrated with what they perceive to be inadequate evaluation tools, their lack of training in this area, and unanswered desire for an accessible system.

In response to these challenges, FRP Canada (n.d.a) developed a user-friendly system, entitled *e-Evaluation*, which members can access for free. This initiative provides two surveys, one for staff and volunteers, and one for program participants, and can be completed in 15 minutes or less. Indicators for the evaluation system include participant characteristics, program quality, organizational and valued practices, and benefits and outcomes. Program staff can enter their data into a national database, and confidential reports are instantly generated. Another useful aspect is that program data are held in the system, so as new information is entered, programs can track their progress from year-to-year. In addition, yearly summative results are

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made available on the FRP Canada website (see [www.frp.ca](http://www.frp.ca)). As of the 2008-2009 published results, families and service providers from 94 centres, the majority (72%) of which reside in Ontario, had used the system (FRP Canada, n.d.b). This is an increase from the first year of data collection (2006-2007) in which only 65 centres participated (FRP Canada, n.d.c). These numbers, however, likely represent a very small proportion of Canadian programs. At the writing of this paper, FRP Canada had 619 programs listed in their national directory (FRP Canada, n.d.d). This indicates that the *e-Valuation* system may have to be revised in order to demonstrate better applicability to a broader range of programs, that it may not be as user-friendly as intended, or that its availability has yet to be effectively disseminated.

### ***Implications***

The reviewed research demonstrates that by providing “at-risk” parents with needed and appropriate support, they can achieve great success. This, in turn, reduces their children’s vulnerability, and improves their likelihood of experiencing positive developmental outcomes and of succeeding within society long-term. What appears to be most significant is their multidisciplinary nature and sensitive strengths-based approach. As researchers and professionals come together with differing backgrounds and areas of expertise, we must aim to take a holistic view of “at-risk” individuals. No one perspective is enough to incite positive and lasting change, as these individuals often demonstrate difficulties in multiple domains. This supports the practice of inter-professional collaboration, and as discussed earlier, will reduce families’ barriers to access and social isolation, foster community connections and social support, maximize the utility of existing services, and greatly improve participants’ outcomes.

If we are to best serve the families with whom we have the privilege to work, we as helping professionals must adopt a viewpoint that encourages us to seek varied sources of

information, and allows the application of creative approaches to funding as well as to other existing barriers. This perspective also impacts us on a personal level, and we must remember that we are but one part of a larger social system. Adopting an ecological perspective helps us to remain mindful of how various factors have influenced us, and of our potential to positively impact others. Future research must address the identified gaps, and further our knowledge of how families' needs may be best met.

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