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# Two-Generation Approaches to Supporting Family Well-Being

Outcomes for children are closely related to the well-being of their families and caregivers. Likewise, parents' ability to create positive change in their own lives often relies on the availability of safe and reliable care for their children. Yet many common child abuse and neglect prevention services focus on either parents or children in isolation. Programs, organizations, and systems that provide services to address parents' and caregivers' needs (such as education and job-training services, substance use treatment centers, parent education programs, and others) often work exclusively with the adults, while those that serve the needs of children (such as schools and child care centers) often do not focus on advancing the well-being of the caregivers or other adults in their lives.

[Two-generation \(2Gen\) approaches](#) bridge this gap by serving children and their families together through integrated and simultaneous services, with a particular focus on helping

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families achieve lasting financial stability. This issue brief introduces 2Gen approaches, explains their benefits and core principles, and provides examples of 2Gen approaches in child abuse and neglect prevention.

The website for the [Administration for Children and Families, within the U.S. Department of Health and Human Services](#), offers additional resources and examples that describe a range of strategies for implementing a 2Gen approach at program, system, and policy levels.

## WHAT IS 2GEN?

2Gen approaches focus on building parental capacity and protective factors within families, often with the explicit goal of interrupting generational cycles of poverty. They seek to create a "legacy of family well-being that passes from one generation to the next" (Ascend at the Aspen Institute, 2020) by combining services for children, including early care and K-12 education, with services for their parents, such as job training, financial coaching, parenting supports, and more.

2Gen approaches go by many names, including "whole family," "multigenerational," "intergenerational," and "[Ohana Nui](#)." These additional names reflect the fact that multiple generations often play a role in children's lives. Any 2Gen approach should be inclusive of the whole family, *as defined by its members*, including formal and informal kin. The concept of supporting all members of a family together rather than focusing on individuals is not new; 2Gen approaches build on the wisdom of Indigenous communities and the philosophy of late 19th century settlement houses (Mosle & Sims, 2021).

## WHY TAKE A 2GEN APPROACH TO CHILD ABUSE PREVENTION?

2Gen approaches focus on building financial stability in families and acknowledge the significant overlap between poverty and child welfare involvement. Most families who live in poverty do not abuse or neglect their children. However, families who are poor are overrepresented in the (much smaller) population of people reported to child protective services (CPS) agencies. [The Fourth National Incidence Study](#) found that children from families with low socioeconomic status were five times more likely to experience maltreatment and seven times more likely to experience neglect (reported to CPS agencies or not) than children in households with more resources. Conversely, movement out of poverty appears to decrease these risks (Rostad et al., 2017).

It is important to note that historical trauma and structural and systemic racism play significant roles in the disproportionate experiences of both intergenerational poverty and child welfare system involvement by Black, Brown, and American Indian/Alaska Native (AI/AN) families in the United States. According to the Brookings Institution, "Black adults in their 30s are over 16 times more likely than White adults to be in the third generation of poverty in a row" (Winship et al., 2021). Incomes for AI/AN people are only 50 to 80 percent of those of White people in each income quintile. This is not improving over time: between 2000 and 2014, AI/AN (as well as Black and Hispanic and Latino) families experienced more downward mobility than White and Asian families (Akee et al., 2017).

Similarly, in 2018, 23 percent of all children in foster care, compared with just 14 percent of the total child population, were Black (Kids Count, 2020). AI/AN children were the most overrepresented racial/ethnic group in foster care, at a rate 2.7 times greater than their proportion in the general population (National Indian Child Welfare Institute, 2017). Explicit and implicit bias affect how families are treated at every step of CPS systems. African American and AI/AN families are reported to CPS and subjected to investigations at higher rates than other families, are more likely to be removed from their families, and are less likely to reunify (Child Welfare Information Gateway, 2021).

Such disparities in treatment have resulted in a deep mistrust of public systems in many families and communities. 2Gen approaches can help rebuild that trust (Aspen Institute, 2021). In child-focused settings, offering services for adult family members demonstrates that caregivers are valued as people and partners in their children's well-being. In adult-focused settings, such as education or vocational training, including children in services shows parents they are seen, welcomed, and supported.

There is some evidence that both children and parents are more motivated when they both have access to opportunities (Mosle & Sims, 2021). Growing evidence shows that investing in both parents' education and job training and early childhood education yield lasting benefits for families:

- On average, a college degree doubles parents' income. Parents' level of educational attainment is the best predictor of economic mobility for their children.

- A \$3,000 increase in parent's income during early childhood yields a 17-percent increase in the child's future earnings.
- Each year of high-quality early childhood education yields a 13-percent return on investment based on increased school and career achievement and reduced social costs (Ascend at the Aspen Institute, 2020).

2Gen approaches seek to improve multiple aspects of child and family well-being, many of which overlap with [protective factors](#). Some of these include physical and mental health (parental resilience), economic assets (concrete supports), and social capital (social connections).

## CORE PRINCIPLES FOR EFFECTIVE 2GEN APPROACHES

Below are five core principles, as identified by Ascend, that are embedded in effective 2Gen approaches.

### MEASURE AND ACCOUNT FOR OUTCOMES FOR CHILDREN AND ADULTS TOGETHER

2Gen approaches have many different [intended outcomes](#), depending on the goals of the organization or system in which the program originates and the needs of the people it intends to serve. Regardless of the specifics, 2Gen approaches establish and measure outcomes for *both* children and the adults in their lives, together. Tracking family outcomes is key to assessing success as a 2Gen approach and to obtaining and sustaining adequate funding. Many organizations and systems conduct needs assessments of both individual families and target communities, in partnership with families themselves, to establish their specific goals and measurement strategies.

## EXAMPLE: FAMILY RESOURCE CENTERS

**Family resource centers (FRCs)** are flexible, place-based hubs of support and resources for local families that often implement 2Gen approaches. Sometimes called family support centers, family success centers, family enrichment centers (FECs), or parent-child centers, FRCs exist in a variety of community settings, including school buildings, hospitals, housing projects, libraries, restored buildings, and new structures (Child Welfare Information Gateway, n.d.). Regardless of their location, FRCs are hubs for universal, primary prevention strategies that include offerings for both caregivers and their children and facilitate the development of strong communities of support. Services are generally voluntary, free, and offered for any family that wants to participate.

The **Administration for Children's Services in New York City** operates three [FECs](#) that provide community-designed supports in warm, inviting, home-like spaces. FECs work with families and local leaders to identify community strengths and develop programs (called "offerings") that promote one or more of seven family [protective factors](#). A 2020 [FEC evaluation](#) found significant evidence that FECs have a positive impact on strengthening a range of protective factors. This finding suggests that FECs may play a role in reducing the need for future child welfare intervention, as prior studies have shown that social supports act as important buffers against child maltreatment. The study on the Administration for Children's Services' FECs provides additional preliminary evidence that FECs have a significant, positive impact on increasing members' protective

factors across other domains, including family functioning, nurturing and attachment, and maintaining a positive outlook. Along with FECs, the Administration for Children's Services' [community partnerships](#)—which are coalitions of local stakeholders—play an important role in providing concrete supports in times of need, one of the family protective factors. In May 2022, Casey Family Programs published a [brief](#) on FECs and community partnerships, describing their work in supporting families during the COVID-19 pandemic.

## EXAMPLE: EARLY CHILDHOOD HOME VISITING

**Early childhood home visiting** is an umbrella term referring to any program that provides voluntary services to parents and young children in their homes. Trained home visitors provide support and resources to help foster healthy child development and address the needs of all family members, including prenatal support, physical and mental health care, financial support, social support, and education and job training (Supplee, 2016). Variations among models include who provides the home visits (e.g., nurses, social workers, trained paraprofessionals), the ages of the children they serve (generally within birth to 5 years old), and the specific outcomes targeted (e.g., health, financial stability, prevention of child abuse). According to the U.S. Department of Health and Human Services' [Home Visiting Evidence of Effectiveness \(HomVEE\)](#) review, at least two evidence-based models—[Healthy Families America](#) and [Nurse-Family Partnership](#)—have shown positive outcomes in child abuse prevention.



## ENGAGE AND AMPLIFY THE VOICES OF FAMILIES

Family perspectives and experiences are essential to effective 2Gen approaches. Understanding how to engage families in all aspects of program and policy design, implementation, and evaluation is essential to success. This might include engaging family members in gathering and interpreting data to inform service delivery, selecting evidence-based and promising practices, and designing meaningful program evaluations. At the level of direct service, it is important to build trusting relationships with all family members, which in some cases may require acknowledging an individual's valid reasons to distrust social services systems. Additional ways to build trust include employing a coaching model that encourages families to set their own goals rather than a case-management approach and involves intentionally asking about the needs of family members who are often overlooked or undervalued, such as fathers, grandparents, and extended/chosen family.

### EXAMPLE: HEAD START/EARLY HEAD START

[Head Start](#) is considered by many to be the first federally funded 2Gen approach. Head Start provides free school readiness programs through center-based and home visiting services for children ages birth to 5 years old in low-income families. Since its inception in 1965, [engagement of families and communities](#) has been integral to Head Start's efforts to support children's learning and development. Family advocates in every Head Start/Early Head Start program conduct family needs assessments each year and create family

partnership agreements that include goals for both the children and the parents. Services for parents and family members vary by location and support family goals, such as housing stability, education, job training, and financial security. Data from the Head Start Impact Study show that the children of more engaged parents had greater gains in learning (Miller et al., 2014). Research shows that Early Head Start programs in particular can reduce family conflict and parenting stress, support engaged and responsive parenting, and promote children's cognitive development and self-regulation skills. In the long-term, these outcomes effectively reduce child abuse and neglect, even after services end (Child Trends, 2018).

**“Head Start was the first place I learned that I was the expert on my child. I’d never had someone tell me that before. I’d been a foster parent, I’d raised a child in difficult circumstances as a single parent, lived in poverty. But it was the first time someone said, ‘You’re the expert on that kid.’ The impact of the comment was great because I was talking to a fellow mom with lived experience. She had navigated systems and knew right where to meet me in my heart to encourage me.”—Megan Pirie, former Head Start parent and 2020 Parent Ambassador, cofounder of the Eastern Washington Chapter of All of Us or None**

#### EXAMPLE: MARYLAND FAMILY NETWORK

[Maryland Family Network \(MFN\)](#) maintains a network of family support centers that provide primary and secondary prevention services—interventions open to all as well as those specifically designed for families at higher risk of maltreatment. At the centers, families participate in joint parent-child activities and access self-sufficiency programs (adult education and employment support), parent education, high-quality child care, service coordination, and health education services. Engaging and developing parents as leaders is seen as critical—each center has a parent advisory board that meets monthly and offers opportunities for leadership training and legislative advocacy. MFN [measures gains](#) in children's health and development and parents' knowledge and skills in parenting, service access, education and employment, and fertility planning. For example, of children who attended an FRC three or more times in 2020, 85 percent are fully immunized and 90 percent received a developmental screening. MFN also serves as the State lead for federally funded [Community-Based Child Abuse Prevention](#) initiatives and as State lead for the Strengthening Families Network.

#### EXAMPLE: POWERLINES

[Powerlines](#) is a community-based program of Agape Child & Family Services in Memphis, TN, that emphasizes family voice and choice. Working in partnership with area organizations, Powerlines serves 3,500 households per year in 10 apartment complexes and 17 schools, focusing on connecting families with the resources they need to improve their lives. Programs are driven by the voices of community residents, in part solicited through regular [Community Cafés](#). Services focus on meeting families' self-identified needs for safety, employment,

education, spiritual connection and healing, health, and social and economic support. Some of the services offered include tutoring, life skills classes, GED practice, workforce readiness, and nutrition classes.

**“I believe in my bones that the holistic family approach, where you wrap support around everybody, changes things.”—Brandi Thacker, director of training and technical assistance, development, and strategy for the National Center on Parent, Family, and Community Engagement**

#### ENSURE EQUITY IN PROGRAM PLANNING, IMPLEMENTATION, AND EVALUATION

Ending intergenerational cycles of poverty requires an understanding of disparities because the impact of poverty falls disproportionately on Black, Brown, and AI/AN families and communities. 2Gen approaches use data to understand the disparities within the target community, both in terms of which families are thriving and where resources are currently invested. Many programs cite the need to develop more culturally relevant mental health services and strategies to address personal, intergenerational, and cultural trauma that impacts many families, especially families of color. Specific efforts to address inequities are critical both to understanding and addressing the structural barriers that families encounter (such as lack of access to education, transportation, high-paying jobs, and affordable housing) and to establishing positive, productive relationships with family members.

### EXAMPLE: HEALTHYSTEPS

The health-care system is the most universal community setting for reaching young families. More than 90 percent of children will receive at least one well-child visit before the age of 5 (Black & Boersma, 2020), making well-child visits an ideal place to reach caregivers with information and resources to support whole-family well-being. However, pediatricians may lack the knowledge and comfort to address issues in caregivers' lives—such as adult mood and anxiety disorders, interpersonal violence, or financial stressors—that impact children's well-being. [HealthySteps](#), a program of ZERO TO THREE, is an evidence- and team-based primary care model that promotes the health, well-being, and school readiness of babies and toddlers, with an emphasis on families living in low-income communities. Child development professionals known as HealthySteps specialists connect with families during and between well-child visits and refer them to community resources as needed. Research has shown that HealthySteps leads to [improved outcomes in areas where there are persistent inequities](#) for families of color, including breastfeeding, maternal depression, and social-emotional development. It also reduces risk factors and increases protective factors associated with child abuse and neglect, reducing harsh forms of punishment, child behavior problems, and mothers' depressive symptoms and increasing secure parent-child attachment and parents' knowledge of infant development (ZERO TO THREE, 2021).

**“When I take my children to the clinic, there is a sense of community and closeness I get from the care team with HealthySteps. HealthySteps has helped my family grow and has been a pivotal support system for myself and my two girls. HealthySteps is family to us.”—Shamyra King, family advisor, HealthySteps**

### FOSTER INNOVATION AND EVIDENCE TOGETHER

Effective 2Gen approaches look to incorporate evidence-based insights and interventions whenever possible. However, they also welcome opportunities to think outside the box, respond to local needs and circumstances, and cocreate new approaches alongside the families they serve. When they innovate in this way, they are conscientious about tracking outcomes and gathering evidence that can inform future efforts.

### EXAMPLE: PROBLEM-SOLVING COURTS

Problem-solving courts are specialized court dockets that focus on a particular type of case and use research-informed approaches. In these courts, an interdisciplinary team led by a judge provides case management to address underlying issues and reduce recidivism. Drug courts are the most common type of problem-solving court. The [Safe Babies Court Teams](#) approach, which was developed by a leading clinician and Miami, FL, court judge, is based on a foundation of

infant mental health. It incorporates the latest findings about infant and child development into its work with families with children aged birth to 3 years old who are in foster care or at risk of removal. A family team uses a trauma-responsive approach to ensure young children and their parents receive comprehensive services based on their needs to prevent removal and/or promote reunification, promote healthy relationships within the family, and build protective factors. The whole family's needs are addressed—including those of the grandparents or other relative caregivers, when applicable—based on the social determinants of health, and a full-time community coordinator facilitates information sharing and collaboration among the professionals from various sectors who are working to support the family. Meanwhile, a community team brings together stakeholders to discuss disparities and system coordination at a community level. Research has found that children involved in Safe Babies Court Teams experience lower rates of repeat maltreatment (less than 1 percent) and shorter time to permanency compared with national averages and Children's Bureau standards (Casanueva et al., 2017).

#### **EXAMPLE: FAMILY MENTORSHIP**

One-to-one mentorship is a common model for serving the needs of youth. [Friends of the Children](#) has adapted this model by employing paid, professional mentors to support and empower the entire family. Youth and families can remain in the program for 12 years or longer, during which time their mentors (known as friends) provide support to help caregivers understand their child's strengths and needs, equip caregivers with social and emotional learning skills, promote self-advocacy in educational and social

services systems, connect families to concrete supports, and create opportunities to build social connections. Friends of the Children increases protective factors that help prevent abuse and neglect. In 2020, surveyed caregivers said that as a result of their participation in the Friends of the Children program, their child's behavior had improved (88 percent), they spent more time with their children (84 percent), and they had improved their ability to navigate systems and build community connections (77 percent) (Friends of the Children, n.d.).

## **ALIGN AND LINK SYSTEMS AND FUNDING STREAMS**

No single program or organization can meet all the needs of children and families. Many organizations wishing to take a 2Gen approach recognize and overcome this by linking siloed programs and/or forming partnerships with other organizations and systems, each offering part of the full array of assistance that children and their families need to thrive. Doing so effectively requires partners to assess their synergy and alignment, establish a common vision and quality standards, integrate administrative systems (e.g., eligibility standards, data systems, performance benchmarks) with intentionality, and [blend and coordinate funds](#) across [public](#) and private programs and programmatic silos.

#### **EXAMPLE: “NO WRONG DOOR” INTAKE**

**Maryland's Garret County Community Action Committee (GCCAC)** designed an integrated intake process to ensure families experience a 2Gen approach from their very first contact with the organization (Morse et al., 2020). GCCAC has long offered an array of services for adults and children, from



child care and after-school programs to adult education and emergency services. Before 2013, however, those programs were siloed and tracked outcomes via more than 30 individual data-management systems. As a result, programs did not share data or even necessarily know when they were serving the same families. This meant families had to provide their information multiple times to receive services from different programs and sometimes missed out altogether on services for which they were eligible. Following a significant upgrade of its information technology system, funded by the American Recovery and Reinvestment Act, GCCAC now employs a universal basic intake process that ensures that the same information about well-being is collected from every family and shared across programs. Families receive a presumptive eligibility report from which they can choose their own bundle of services. With just one file per family, each program now receives complete information, and the organization as a whole is better positioned to support each family's self-defined goals.

**White Earth Nation's WECARE** is a single point-of-entry system that helps families on or near the White Earth Reservation connect to all the services they need. The reservation is very rural, with services located in five different communities as far as 30 miles apart. WECARE navigators work with individuals in their homes to complete a universal intake assessment that explores the needs of all family members. Based on their needs and family goals, the system then sends electronic referrals to appropriate services, including housing and food support, child care, employment, health care, and spiritual and cultural resources. When needs are urgent, these referrals are sent within 4 hours and programs contact and

screen clients within 3 business days. Initial referrals are followed by a wraparound meeting attended by the client, WECARE navigator, and representatives of Tribal programs. In 2018, White Earth Nation added a 2Gen component to support 30 families pursuing specific goals in education, employment, or early childhood. These families are invited to a monthly family night where they share a meal, learn about Tribal services, participate in a cultural activity, and build social capital together. Every family is different and defines its own goals. WECARE measures success by how successfully families integrate into Tribal services and how many families graduate from the WECARE program having addressed all self-identified needs.

#### **EXAMPLE: COMMUNITY COLLABORATIONS**

The **San Antonio Dual-Generation Partnership**, led by United Way of San Antonio and Bexar County and the San Antonio Housing Authority, is a multiagency effort focused on children and families in the city's EastPoint neighborhood. EastPoint is one of three communities that participated in the Annie E. Casey Family-Centered Community Change (FCCC) initiative, a 2Gen approach to transforming neighborhoods into better places for kids and families to live, work, and grow. The San Antonio partnership aims to prepare parents for jobs and careers while providing quality early childhood and educational experiences for their children. All partner agencies are housed together, so families can easily find and access what they need in one place. The partnership has blended and braided funding from Federal grants, municipal funds, and private funds (foundations and corporations) to support its many programs and services. Many of the lessons learned from the FCCC communities are captured in various publications on the [Annie E. Casey website](#).

**“User engagement is a priority when it comes to being able to address the needs of an intergenerational model. Sometimes we go in assuming we know, but in reality, we don’t truly know what they’re facing. Are we going into the communities late at night, on the weekends, after hours to see what’s really happening in the community? We often think it’s one thing, but in reality it might be a real community of support and giving when we thought it was a community of crime and violence. Until you ask the users, you don’t know what their gaps and needs are.”—Pamela Lawrence, director, National Community Strategies, Annie E. Casey Foundation**

## CONCLUSION

Each of the 2Gen principles requires an intentional mindset, which will need to be encouraged through training, professional development, and culture-change initiatives. Staff members accustomed to focusing exclusively on children, in particular, may need training and support to [examine personal biases](#) regarding parents and take a more strengths-based approach to working with them. This includes an intentional focus

on celebrating caregivers' strengths and successes and acknowledging the structural and systemic challenges that interfere with families' ability to thrive. Direct-service staff accustomed to setting goals and providing case management for parents may require training in establishing more supportive relationships in which they coach parents to establish and pursue their own goals. Organizations unaccustomed to [centering parents' expertise](#) may need to seek guidance on effective ways to partner with families or those with lived experience.

At the community level and beyond, supporting the well-being of children and their families together requires an all-hands-on-deck approach. As the field continues to move in this direction, larger systemic changes will be required. Federal and State legislation will be required to disentangle poverty from neglect and shift more funding upstream toward prevention and family support. Funding sources may need to broaden allowable services and/or eligibility criteria to be more responsive to families' self-defined goals and needs. Increasingly working across service silos will require integrated software solutions and funding for data experts to make them work. Investments in research and evaluation will be needed to continue to build a strong evidence base for 2Gen approaches, particularly in the area of child maltreatment prevention. These actions will require strong Federal and State leadership, including fundamental changes to the ways that systems respond to families living in poverty, which are necessary to ensure greater equity and give all families the opportunity to thrive.

**“In order to support parents the way we want to support them, Head Start is a model that includes teachers, family service workers, nutrition workers, and more. There is an entire umbrella of people that surround the families. Supporting the whole family is too much to put on the shoulders of just one person.”—Rebecca Berlin, chief learning officer, National Center on Parent, Family, and Community Engagement**

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