For several years, San Diego public schools have been involved in a comprehensive school-community collaboration effort to restructure education. Institutional links were formed between schools, social-service agencies, and other community resources to help reduce dependency on public assistance. Three different levels of community collaboration were used within the school district. Interviews and observation were used to compare the approaches. The first level of collaboration included contacts between heads of organizations such as schools and social-service agencies. The second level was interagency relationships between front-line professionals. The third level involved collaboration between onsite professionals and the clients being served. Collaboration at the first level resulted in the creation of a center at an elementary school to deliver social and health support services. Front-line professionals at 11 schools established a group to meet student and family needs. At the third level of collaboration, parents and teachers at a troubled and racially diverse elementary school worked together to improve education and increase the school's involvement in the community. The study found that school-community collaboration must be customized to local needs and must draw upon local resources. (JPT)
SCHOOL-COMMUNITY COLLABORATION: COMPARING THREE INITIATIVES

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SCHOOL-COMMUNITY COLLABORATION:
COMPARING THREE INITIATIVES

In San Diego strong support exists for school restructuring that includes a prominent role for school-community collaboration. In 1987, the district created a task force of citizens and educators with a mandate to develop a vision for the fundamental restructuring of schools. This work was followed by establishing a permanent group of educators, citizens, and representatives of business that is charged with "nothing less than a fundamental overhaul of education itself." The mandate called for innovations in teaching and curriculum; participatory decision making and site based management; shared accountability; and partnerships between schools, community agencies and business.

Institutional links between schools and social service agencies have been underway now for several years, and San Diego provides an opportunity to study what some consider a comprehensive vision of school-community collaboration. This vision includes improvement of the school and community human service delivery systems by reducing fragmentation and increasing the systems’ responsiveness to client needs. Community development is aimed at helping people in the neighborhoods of the schools to organize and develop resources that will reduce dependence on scarce public assistance. A central strategy in this effort is to weave together the resources of schools, the community surrounding schools, county social services, and health services. This study identifies the development of three contrasting forms of collaboration with the district and points out some of the strengths and limitations of each.

Methodology and Purpose of The Study

The methodology involved interviews and observations with educators, social service personnel, parents, and involved citizens as they struggled to reform and integrate school-linked practices associated with health, education, and social service support for children and families. The study began by making observations of several initiatives that involve collaboration and that are considered by the San Diego School District to be successfully implementing the district's vision. Three of these initiatives were selected to be presented as case studies to illustrate various types or levels of collaboration, and problems and potential associated with each.

At one level, collaboration can involve the chief executive officers of important agencies. Heads of systems, such as the superintendent of schools and the director of county human services can collaborate with one another to conceptualize change in policy and practice at the macro level. At another level, front-line professionals from several schools and agencies may recognize a shared sense of need based on day-to-day contact with clients, and form strong professional relationships that result in shared knowledge, responsibility and professional support. At still another level, there is opportunity for collaboration of on-site professionals with parents and families, the clients that are served. Viewing collaboration as
it takes place at various levels within organizations gave rise to the categories, hypotheses, and focus questions that are outlined below:

1. **Interagency collaboration at the executive level:**
   This category includes, for example, relationships among the chief executive officers of organizations such as the school system and the county health organization. When there is a formal relationship characterized by direct communication among administrators of agencies and institutions, an important context for successful collaboration over broad policy has been established. How were these relationships developed in San Diego? And, will high level planning lead to successful implementation?

2. **Collaboration among front-line professionals:**
   Interagency relationships involve front-line professionals with each other in common tasks within and across their disciplines and agencies. Shared professional knowledge and personal understanding among front-line professionals is an important ingredient of collaboration. In San Diego, where top-down authority is giving way to site based and more collegial forms of leadership, what mechanisms are being invented that will ensure the sharing of professional knowledge and personal understanding among professionals?

3. **Collaboration with clients:**
   Human service institutions can choose to treat clients as passive recipients of services or clients can be given a more active role and voice through collaboration, but this would require some different assumptions and relationships between professionals and clients. One assumption is that willing and active engagement by families in school and social service programs is essential to better social and educational "outcomes." What practices are being employed in San Diego that are building client knowledge and trust leading to meaningful and productive forms of public engagement in rebuilding schools and communities?

These questions will be pursued through three case studies, each representing one of the levels identified above.

**Executive Level Collaboration: Integrating Services**

Executive level collaboration deals primarily with the relationships among the leadership and heads of agencies. In San Diego the purpose of collaboration at this level is to create a fundamentally new system for delivering social and health support services. Though this prototype of a new service delivery system is not yet complete, the case of New Beginnings illustrates the type of innovation envisioned by collaborating agencies and reveals some of the problems that have arisen.
Former Superintendent Thomas Payzant of the San Diego Schools, writing about the need for interagency collaboration, stated that "The days are past when schools could concentrate simply on basic education and leave a child's social, physical, psychological, and economic needs to others..." (Payzant, 1992). He points out that the array of child and family services is typically overlapping, uncoordinated, crisis oriented, and wasteful. In order to address these concerns, the San Diego School District and County agreed to a collaborative effort that also involves the San Diego Housing Commission, the police, San Diego State University, and area health care providers. The initial commitment to collaborate resulted from meetings between the powerful chief executives of the public schools and county social services who agreed, in principle, to attempt design of a totally new configuration for jointly delivering services, and assigned high level staff administrators to work out the details. The new configuration is to meet certain objectives: provide preventive assistance early in a child's life; focus on families rather than individuals; be less fragmented; provide higher quality service at less cost by repositioning and reallocating existing resources; and emphasize adoption of the developments in many settings. The restructured services are concentrated in a "pathfinder program" that has been implemented at Hamilton Center, on the grounds of Hamilton Elementary School. At Hamilton Center the collaborating agencies have co-located and are jointly providing services to the children and families of the school.

Collaboration In Planning

An interagency committee, the New Beginnings Council, was formed to achieve the objectives established by the chief executives. The Council's work during the period of this study focused on the Hamilton site. The Council is co-chaired by the Deputy Director of San Diego Social Services and the Special Assistant to the Deputy Superintendent of the school district. These and other members of the committee are in powerful positions to shape policy in each of their organizations. Consequently this effort is greatly influenced by the central offices of the respective agencies.

A preliminary study by the Council found that most social service providers are frustrated with "the narrowness of and inflexibility of their roles", and "should be given more authority and flexibility to determine when cases are opened, what services are rendered, and when cases are closed". The results of the study supported the perception that the service delivery system is too fragmented, but also found that the families in the study saw school as a place to get help (Payzant, 1992). By developing new institutional pathways for communication and collaboration the agencies are attempting to demonstrate the upper limits of interagency, integrated services that can be delivered at school sites. Though this pilot program will not immediately bring services to children and families in schools other than Hamilton, it is creating innovations that are transferable across the system of human services.

The collaborative has made progress in a number of areas, though the time necessary to plan and implement change has exceeded the original expectations. During the first year, the center developed an "expanded registration" whereby families new to Hamilton receive an assessment and opportunity to become familiar with the Center's social service planning for
families, case management, and health services. Also, the Center has designed a common, single, eligibility process that reduces overlap and prevents families from having to "repeat their stories again and again to meet various agency requirements" (Payzant, 1992). The Council is also designing a shared data base, one management information system that can be accessed by school, county, and medical personnel. This system will unify a previously fragmented system of services, and help clients obtain multiple services at a single site; i.e., information about housing, registration for AFDC, and health screening will be accomplished at one location.

The Center, relative to other collaboratives in this study, benefitted from a large allocation of resources. In fact, one member of the council expressed the opinion that the cost associated with the model will prohibit replication on a large scale. Members of the Council gave two reasons for deploying a model that was too expensive to replicate. First, there is an expectation that the innovations will be transferable and applied with cost savings in other settings. And second, building New Beginnings under relatively ideal conditions was necessary to fully demonstrate its potential and to strengthen resistance against the tendency of institutions to revert to past practices, the familiar but inadequate ways that services have been delivered.

For members of the Council there is both personal and professional satisfaction in being part of the ground-breaking process. One Council member spoke intensely about the dynamics of Council meetings. For her, the Council is a rare opportunity where, within a professional group, there is an rich sharing of common purpose and understanding, and the formation of a very strong bond among group members. Her feeling is that the strength of the relationships within the group has allowed members to maintain a common cause and positive direction in spite of circumstances that had the potential to destroy the process -- a series of financial crises and the departure of head of San Diego Social Services and one of the Council's most powerful supporters.

While the Council has strengthened relationships among agencies at a leadership level and is achieving integration of some functions, in the first year of implementation the process of translating Council planning into service delivery at the neighborhood level was slower than expected. Some of the reasons for this are addressed in the following section.

Collaboration at Hamilton Center in the Delivery of Services

Hamilton Elementary School, located in the City Heights area of San Diego, serves 1350 predominantly poor and minority students. The school population is characterized by "very high density need" across indicators such as AFDC, subsidized rent, medical assistance, and the number of children in need of protective services. The Hamilton Center, located in a separate building on the Hamilton grounds, has a staff of six professionals. There is an on-site coordinator who directs the work of the Center and is accountable to the Council, rather than to the principal of Hamilton. The rest of the center staff included four "family service advocates" (FSA's), and a nurse. Two of the FSA's formerly worked as social workers and
another served for 12 years as a school counselor. The counselor and the nurse had been located in the Hamilton Elementary building but were relocated when they joined the staff of Hamilton Center. Two of the FSA's are still on the payroll of the Department of Social Services but have been assigned to Hamilton Center as part of the commitment to forming an integrated collaborative.

Because a major purpose of the Center is to change the service delivery system, implementation is thought to require leadership at the executive level: "A top-level person from each participating agency, preferably the chief executive officer, must demonstrate commitment to the collaborative through rhetoric and personal involvement" (Payzant, 1992). However, there are pitfalls for executive level policy becoming effective practice. One problem confronted in this instance was concern, or perhaps resistance, by the Hamilton teachers. Interviews with teachers revealed that the top-down and outside-the-school origin of the program resulted in some negative first impressions. Teachers expressed the view that the situation was "them and us...school here, social service there." This generated competitive feelings regarding the Center which was viewed by some as "the superintendent's pet project." Some felt the school had lost a counselor and the school nurse to the Center without getting the expected level of services in return. For example, at Hamilton the counselor had helped teach classes dealing with sensitive issues, but in the new configuration the counselor was located in another building and unavailable for teaching. These perceptions were fueled by the view among educators at Hamilton (and other schools) that the Center had an abundance of resources while at other schools resources were seen as inadequate and declining.

The Center is administered separately from the elementary school and this contributed to the tension between the two organizations. Confidentiality became an issue when the Center would not report information about students to teachers after their referrals. The Center staff saw this policy as necessary to protect family privacy. This led some teachers to feel that they had lost access to critical information about their students. Other sources of tension were that FSA's were not accountable to Hamilton Elementary or to the school's principal, some FSA's were not members of the educational bargaining unit, and some (in the words of teachers) were "not even educators". These factors contributed to some teachers seeing the FSA's as outsiders, and the Center as "just another layer of bureaucracy". Against this background teachers were impatient with the goal of integrating services; a goal they perceived to be an abstraction that was not yet meeting the immediate needs of their students.

Meanwhile, across the playground in the portable classroom that houses the Center, the FSA's were struggling with problems of their own. While in theory the integration of services made sense, the model meant that each FSA, in order to effectively meet the multiple needs of families, would need at least some expertise in a number of divergent areas, social work, housing, immigration, and health, to list a few. Or, assuming that it was not possible to personally help clients with all their problems, it would then be important to understand the several service delivery systems, and to know experts in key places that could be called upon for help. The FSA's felt that they needed more training, including more co-training with professionals from other agencies, in order to manage their multiple roles.
New Beginnings requires different levels of collaboration that entail complex relations across and within agencies. While there was a structure, the New Beginnings Council, for promoting interagency collaboration among the administrators that were planning and overseeing the Hamilton Center, no mechanism was created to provide feedback to the Council by the staff. Also a serious problem was the lack of a forum for meeting with their counterparts in other organizations. During the program's first year, the FSA staff had little opportunity, except among themselves, to share problems and exchange information. This tended to isolate the FSA's from other family and child care workers. Further, it appeared that because the FSA role was to be very different from other human service professionals whose jobs were more traditionally defined, the FSA's could only share understanding and gain support from the Council itself.

Second, implementation of Hamilton Center did not anticipate the potential for the families that were served to have a voice in planning or in making decisions about implementation. In keeping with social service tradition, families were seen as "dependents" rather than as resources who could contribute to the development of the Center and the surrounding community. At a meeting early in the project's development, this was apparent to one member of the Council who argued, to no avail, for families to be involved in decision making. The Council's perspective, she said, "assumes that there is something wrong with the children or families we're serving... that families don't have the capacity to manage, though, in reality, they have visions and dreams about where they are going".

While New Beginnings is to be applauded for its ground-breaking efforts, it is important to see collaboration of this kind as requiring attention at several different levels. It is ironic that planning did not more fully involve the teaching staff and families at Hamilton Elementary, and create more opportunity for contact of the FSA's with other family and child care workers. The case study illustrates the need for top level planning, and the parallel need for effective collaboration in planning and implementation by people at other levels. It suggests that top level planning alone will not be sufficient to create an effective collaborative. Such planning must be continually sensitive to the needs of participating professionals and clients. This requires that executive level leadership be continuously blended with bottom-up input, initiative and ownership.

The following case studies present perspectives that illustrate the potential for collaboration at other organizational levels. Next we describe how another site implemented a conception of collaboration among front-line professionals.

Collaboration Among Professionals: Collegiality on the Front Line

While Hamilton Center has drawn much attention, and may be considered by many to be the District's flagship effort, the Center is not the district's only example of collaboration. Another significant effort has been initiated among Crawford High School and its elementary and junior high feeder schools. The eleven schools in the "Crawford Cluster Connection" (CCC) have formed a consortium for the purpose of "helping to stabilize families so that
students can be more successful in school". The CCC can be seen as an alternative model for collaboration that has major strength in terms of building linkages at the level of frontline professionals.

The CCC began in 1990 when the principals of the Crawford High School attendance area were assembled by the Crawford Area Director and asked to consider how their schools could effectively increase student attendance. The discussions that followed focused on conditions in the community and in families that are associated with poor school attendance. According to one principal, "There was electricity at the meetings" and consensus developed within the group that "We needed to address the needs of families in a holistic fashion". Several respondents shared the perception that the group was extraordinary in its level of openness, trust, and ability to coalesce around important issues. The original plan, several ad hoc meetings dealing with attendance, was superseded by a much broader mission: the group became a forum for efforts to restructure cluster schools, coordinate existing resources, and develop new resources to shared across schools. For example, four of the cluster elementary schools have jointly committed to developing the Yale University Child Development Model in their schools, and, as a group, the schools applied for federal funding aimed at dropout prevention.

Based on the principals' success in collaborating, the counselors and the nurses of the cluster formed their own parallel groups that provide shared information, inservice training, and coordination of efforts within their professions. The counselors have had experts from the community come to meetings dealing with blended families and with development of a case management system; and the nurses used outside experts on topics such as daycare support, and how to help children deal with family tragedy.

Workshops have also been initiated for parent groups, some conducted by school district staff, and others by community-based organizations. Topics included parent effectiveness training, child development, child discipline strategies, health and wellness, and chemical abuse. In addition, a number of the schools in the CCC have designated a room just for parents in order to increase parent comfort and involvement in the school. Parent rooms are used for parent-teacher conferences and for social events that involve parents, but they have also become work rooms where parents work together on projects such as fund raising and publication of school newsletters.

**Development and Coordination of Cluster Activities**

There is a particularly important position within the Crawford Cluster that has played a critical role in developing shared resources and cohesion. By combining funding available to their individual schools, the principals created a shared position. From a bungalow that is adjacent to the high school, Ed Leon, who was a counselor at the nearby junior high school, coordinates a number of the cluster’s innovations. His job is defined broadly to include direct service to students and parents, gathering material resources that are made available to the schools as well as to individual students and their families, advocating for the needs of
students and families, and developing inservice opportunities as well as communication linkages for teachers, administrators, and support staff.

The CCC has created several mechanisms by which it becomes aware of the needs of children and families. First, when a school finds that it does not have the resources necessary to help a child or a family, a referral is made to the coordinator of cluster services. Second, whenever a student registers for school in any of the Crawford Cluster schools, and periodically in school newsletters, families are asked to complete a simply worded questionnaire that asks families to identify their needs. The coordinator's office follows up on all of the questionnaires, providing for material needs such as shoes or blankets but also with help in budgeting or referral for counseling or health issues. Third, the CCC has created a computerized student tracking system that makes preventive action possible. For example, when one child's problems are determined to be the result of family dysfunction, this information is entered into the system and siblings begin to receive help, even if they are in a different school. This is possible because the tracking system spans all the schools, K-12, in the cluster. (However, this tracking system is not the same management information system being developed at Hamilton Center. The CCC system does not link with other agencies.)

The functions of the CCC are both large and small. During one morning of an observer's visit, Leon telephoned a former student, now a banker, to establish a checking account for a parent who had been cashing her welfare check at a check cashing shop that charged $16.50 per check; he called on a parent who owns a pick-up truck to go to Sharp Hospital to receive 150 cleaned and packaged blankets that would be given to needy families; he worked with a retired computer expert who volunteered to develop and maintain the student information tracking system; and he had a lunch meeting with an attorney who provides free legal counsel for families as well as for the community-based organizations that are affiliated with the CCC. Fieldman, et al. (1992) described Leon as a man "who radiates energy and passion... (and who) seems to know everyone in San Diego: musicians, physicians, football players, bankers, nurses,..." It might be added that Leon is not afraid to ask for help for his clients. Rather, he seems to assume that individuals as well as businesses will benefit from and appreciate the opportunity to help others.

While Leon is personally energetic and able to do much singlehandedly, he is also aware of the immense scope of need among families in the cluster, and that he must "leverage" assistance through collaboration with other agencies. For example, he has nurtured a close affiliation with a number of community organizations that when combined provide a broad continuum of services for families. The community organizations also provided inservice workshops to the educators of all the cluster schools. By bringing front-line educators into contact with other services agencies, the CCC has increased the probability that children and families will receive appropriate referrals even without the coordinator's direct involvement. Another example of leveraging resources resulted when a worker from the Hunger Coalition asked why the school district did not take part in their breakfast program, available to economically poor students and to the entire school if a majority of students are poor.
Following up on the question, Leon became a catalyst for beginning a breakfast program that serves hundreds of students daily in school settings and many more at a neighborhood site.

During the first year of implementation, records were kept on the services delivered to Crawford cluster children and families. During the year 680 CCC families received help. By classifying the kinds of help provided the program attempts to plan for the future needs of families. The CCC analysis estimates that 60% of the families could now be directly helped within the collaborative's school and community resources. Examples in this category include families needing help in gaining access to assistance, receiving food or clothing, or in learning to budget their resources. Another 30% of the cases had problems beyond the service capability of the CCC collaborative and required referral to another agency. The need for alcohol and drug treatment was a frequent example. And, 10% of the cases were in need of longer term case management that could best be provided by Leon's office within the CCC. These include services aimed at helping stabilize families with children more than one school in the Crawford Cluster.

In considering the strengths and limitations of collaboration at this level it is important to mention that the CCC attempted to establish a collaborative relationship to the County Department of Social Services, but the county declined, indicating that its collaborative efforts had to be confined to the work at the Hamilton Center. And, the CCC does not have an executive level support group. Consequently, CCC functions span only two of the levels of collaboration: building relationships with the public and creating important professional linkages. This, according to CCC educators, is a project weakness because without "a champion" in central office the CCC innovations may not be recognized at the executive level, and therefore is not likely to be replicated on a larger scale.

The CCC is significant because it illustrates a capacity for enhancing professional relationships close to the point of service delivery. CCC meetings and professional workshops create strong collegial relationships among front-line professionals and a flow of information and informal contact among school personnel and community-based service providers. Professionals within the cluster allude to the trust, empowerment, mutual support and shared obligation that have resulted from their organized activities. These are important elements of effective collaboration.

Collaboration With Parents: Community Development

The third case study illustrates the potential for schools to collaborate directly with the parents and families. This level of collaboration has been developed at Central Elementary School, an inner-city school serving a poor neighborhood where the student population is 50% Hispanic, 29% Indochinese, 19% Black, and 9% white. Within the student population 24 languages are spoken, 900 students are limited in their English proficiency, and many begin school old enough to be in third or fourth grade, but have had no formal education. Without the addition of many housing units or changes in the boundaries of the school attendance area, in eight years, the population of students served has grown from 570 to
Much of this increase is the result of two or more families living together in a single apartment, a symptom of deep poverty and high family mobility.

Mary Louise Martin arrived as principal of Central eight years ago, inheriting a school with poor student attendance and parents who were "very angry" about the quality of education at the school. By her second year, the condition of the school and neighborhood had become of grave concern to the entire faculty. At that time, the faculty took inventory, "listing all the givens", the barriers to success faced by the students, and therefore by the Central Elementary staff. Martin recalls that there were two stark choices; "We could either give up, or decide what we could do".

Most of the Central teachers concluded that fundamental changes were needed. Several disagreed, and transferred to other schools. Mrs. Martin articulated what has become a new school ethic: 1) the school should be central to the life of the community; 2) the resources of the school should be flexible and subject to change determined by the needs of children and families, and 3) the school should reach out to parents, enlisting their help and advice in the education of the children. In practice this has meant that the school would become site managed and be guided by parent participation in school decisions.

Enlisting Parent Involvement

At Central, the parents are from many cultures and speak many languages, factors that might serve as barriers to involvement in the life of the school. It was considered critical to obtaining effective parent participation that when parents came to the office they be greeted by an employee in the parent's native language, and that translators be available for most languages in each of the classrooms. Multicultural/lingual office staff and classroom translators were hired using the school's normal operating budget. Today, when there is a general meeting involving the school's parents, the discussion is simultaneously translated into five languages. Beyond providing translators, Central has increased parent involvement by also providing childcare and snacks for parents attending school functions. For some occasions school staff members meet separately with one language group. At the request of the Spanish speaking parents Mrs. Martin has a well attended tea every other Thursday where the conversation is only in Spanish. Not to be outdone, the English speaking parents requested equal time, and now Mrs. Martin has tea "in English" on alternate Thursdays. Language differences had been a potential liability for parent involvement, but today might even be considered an asset, because by hiring people of many cultures the school demonstrates respect for cultural diversity and that effective communication is valued.

At Central, Chapter 1 meetings for parents have become a forum for parent involvement in decisions that affect the school. Though the meetings are required by federal regulations to be held only four times per year, at Central meetings are monthly, may draw up to 200 parents, and have become integral to school decisions. While parents of all the represented ethnic groups attend, it is the Spanish speaking parents who have taken the lead in making their wishes known and developing a very strong reciprocal relationship with the school.
They have organized events that raise funds for the school; and weekly, a large crew of parents and children goes over the entire school grounds, cleaning, picking up litter, and getting rid of graffiti. In return, Central has responded to parent concerns about children’s learning by working with parents to develop a reading and mathematics enhancement program that is implemented after school, four days per week, by community-based organizations. Also, the school has realigned its budget, giving priority to initiation of a counseling center that is available to parents and families and that includes a registered nurse who is kept very busy with family health and wellness. In the next section the Central four year old program is highlighted as still another example of collaboration between parents and the school.

The Four Year Old Program

A program for four year old children was also initiated at Central out of parent concern that their children be successful in school. The program’s origin and operation illustrate the relationship between the school and the community. Parents, at the monthly meetings, asked that the school begin to provide programming for pre-school children. There was no disagreement from the educators at Central about whether this would be a good idea. However, the typical school program for four year olds is expensive, using a certificated teacher and a low student teacher ratio to meet state requirements. Central did not have enough teachers allocated to the building to support the parent request, at least not within state guidelines. While it would have been easy to tell parents that four year old programming was not possible, responsiveness to the community became the mother of invention.

Using general funds available to the school, a program was initiated that is in some ways "unofficial" because it does not meet state guidelines and therefore the children cannot be counted by the school for purposes of receiving state aid for education. The program, serves 80 children in classes of 20, and operates on a budget of $11,000 per year. The staff is comprised of paraprofessionals who speak the school’s languages and is augmented by parents who volunteer. A requirement for taking part in the program is that a parent or another adult, often a grandparent, must also attend half of the days. In operation, there are usually two aides and nine or ten parents in the classroom with the 20 children. There are two main activity areas at each end of the room, and a large play area in between. The room hums with activity as children play, rotate to other tasks, and regroup for singing or story telling. Parents often lead activities, or play with the children, but also spend time sitting and chatting with each other.

Though the program is only in its second year, it appears to benefit children, parents and the school. The children are exposed to English, and to school, in an environment that is especially non-threatening because of the presence of parents. The parents feel that the school is responsive, they are able to see other adults model effective teaching and child rearing, and are able to contribute to the program, playing productive and functional roles in the life of the school. And for educators, the program contributes to children’s readiness and
perhaps to long-term academic success. The school ethic, making school a center for parent involvement and the flexible response to community concerns about school, is being realized even in the midst of deep urban poverty.

Though the community is economically very poor, Mrs. Martin feels that most adults there have high aspirations for themselves and their children, and that if jobs were available the Central parents "would go to work in a second". This perception guides her thinking about the future of the community. Ideally, the community would provide both daycare and early education for children and job training for adults. Across the street is a vacant block owned by the city. "Put a school for the parents right there" she said, "and we'll start their kids in school at the age of two or three while they attend classes".

The combination of high expectations of parents and families in the midst of poverty and the school's ethic of helping people build a sense of community is a powerful foundation for collaboration. However, strengthening local communities will depend on obtaining resources from the larger community in the form of adult education and job opportunities. Without executive level involvement and support, collaboratives among schools and families are severely limited in their capacity for the kinds of development that require the allocation of tax dollars or other sources of financial investment.

Conclusions and Implications

Three levels of collaboration have been described: executive, front-line professional, and parents and families. These brief case studies were used to illustrate the requirements of collaboration at different organizational levels. Comparisons among the cases also illustrate the limitations of building collaboration wholly around the leverage gained at any one level.

The planners that developed each of the programs had differing perspectives on collaboration, and this led to various forms or levels of collaboration. One perspective is that without collaboration by executives, "systems" problems such as the need for coordinated policy and large scale change among human service agencies can not be addressed. If they are to be effective in breaking institutional gridlock, agency executives must work toward leveraging their collective resources, power and authority as they are in the case of Hamilton Center. Collaboration at the executive level promises efficiency and effectiveness among big bureaucracies by bringing institutional change to what often appear to be immovable systems. This perspective begins with the realistic premise that effective change requires the authorization from top that new practices are legitimate. However, an entirely top-down approach would fail to capitalize on the potential for informal and local knowledge that can stimulate innovation and best practice. Not recognizing local expertise may promote cynicism and resistance from professionals not brought into the planning and policy process and ultimately produce practices that are as centralized, inflexible and unresponsive as the current system. If only a top-down development strategy had been employed in San Diego, initiatives such as those created in the Crawford Cluster and at Central Elementary School might not have been invented.
A second perspective illustrated by the schools of the Crawford Cluster is that front-line professionals should play a key role in initiating and implementing change. Front-line professionals in the CCC through strong collegial relationships and the pooling of scarce resources have succeeded in inventing structures for collaboration. CCC provides for considerable face-to-face interaction and informal association; people know and trust one another. Within this context professionals can use trial and error to establish best practices. Organized relationships (such as the CCC) among front-line workers encourage initiative, self correction, and sensitivity to the needs of professionals and clients, but this middle-level approach does not carry the authority from the top necessary to make large scale changes in systems.

A third perspective, illustrated by the Central Elementary School efforts, is that effective change can be initiated in collaboration with parents and children who are the consumers of social and educational services. This illustrates a bottom-up approach. It has the potential for contributing to community development by treating parents and families not just as receivers of service, but as resources who can have an effective voice in planning and play functional roles in improving conditions in the school and in the neighborhood. An important strength is that this level of collaboration can respond more quickly and directly to those being served. However, there are limitations for schools attempting collaboration only at this level. The problems of fragmentation, gaps and overlap that are the indictment of the current social service delivery system would not be addressed. To find the resources needed by schools like Central will require the resources now held by the social services and the larger community.

The three cases represent contrasting assumptions and strategies. The Hamilton Center effort points out the importance of macrosystems change that can only be accomplished through executive level commitment. The CCC suggests that there is much potential for effective collaboration planned and implemented in the middle level of systems by front-line workers. And the initiative at Central Elementary illustrates the potential for collaborating to empower parents and the community around a school. Each effort offers strengths, but has limitations relative to other levels. In San Diego it may be possible at some future time to combine the several independently created perspectives into a whole that simultaneously reinforces the strengths of each of the identified levels. What might this look like? The following is one hypothetical example of a configuration intended to accommodate all three levels into a comprehensive structure for collaboration.

Based on the Crawford Cluster, the high school and its feeder schools might prove to be the optimal unit for organizing change: it seems to be a workable size, is often a natural community, can bring together enough professionals for a productive exchange and collegial support, and, whereas strong executive support for each individual school in a district may not be physically possible, it would seem possible to organize for effective executive support across K-12 high school areas. The high school attendance area as the working unit for collaboratives would be strengthened if county social services were decentralized and reorganized within the same geographic boundaries. Within this configuration there could be
a school district director for the high school area unit, and a parallel unit director of social services. Working in cooperation, these directors could ensure executive level support from their respective organizations. The highest level of support, from the superintendent and director of county human services, could be incorporated if the area directors were organized within their respective agencies as a "superintendent’s cabinet" and a "director’s cabinet."

At the other levels of collaboration, assigning each county worker only to cases within a single, well-defined high school attendance area would reduce the number of county workers involved with any one school. Concentrating a case-worker’s clients into a few clustered schools would increase contact with each school, and reinforce a less superficial and more intense relationship with schools, neighborhood community service agencies, children and families. Working with families that share a neighborhood and that know one other, school and county front-line professionals, working together, could better develop collaborative linkages with families, help clients organize to have an effective voice in decisions effecting the school, and help the neighborhood to organize resources for community development.

In the final analysis, however, the best form and organization for a school-community collaborative must be derived from local purposes and will depend on resources and other factors that are unique to each locality. In spite of this qualification, this study advances the argument that in general there are vital functions to be accomplished at each of the identified levels; and that, ideally, communities should encourage and then integrate all three levels of collaboration in order to capitalize on the strengths, and counter the limitations, of each level.
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