This newsletter issue focuses on the twin themes that, together, represent the ways that programs to strengthen families also contribute to a better society. The newsletter includes the following articles: (1) "Family Center Planning Project: Family Support, Public Policy, and Community Development"; (2) "Pulling It All Together for Families: School-Linked Services under One Roof"; (3) "Creating Family Support Programs: Mobilizing Communities in Tucson"; (4) "On Families, Foster Care, and the Prawn Industry," arguing that child protection decisions should be made by families with assistance rather than intervention from child welfare authorities; (5) "Planting Seeds of Change by Training Frontline Workers: FRC's Experience with the JOBS Program"; (6) "New Mexico's Family Development Program and The Crucial Three Steps to Parent Involvement"; and (7) "Please Be Brilliant! An Alternative Way To View Staff Development and Your Organization." In addition, the newsletter includes an article describing the coordinated efforts of the National Coalition to Prevent Child Abuse, and a guide for family support professionals on the use of current telecommunications technology. (HTH)
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Building Community & Changing Systems
THE FAMILY RESOURCE COALITION IS A LOT MORE THAN THIS REPORT

The Family Resource Coalition leads the way in collecting, maintaining, disseminating, and publishing information about family support—information which makes the case for family support and shows how to use its principles to make fundamental and positive changes in the way families are valued by our service systems and our society.

- We run the National Resource Center for Family Support Programs, which provides information on program models, parent education materials, and networking opportunities and operates a new Families/Schools/Communities Division.
- We assist individuals and organizations delivering family support services, provide technical assistance in developing training capacity, produce training curricula, and, in some instances, deliver training.
- As leader of the family support field, we have undertaken a Best Practices Project to define quality in the delivery of family support services, a project which will ultimately help to strengthen all family resource and support programs across the country.
- Every two years we host a spectacular national conference. Next May, the theme will be Joining Forces for Change: Family Support in the '90s emphasizing collaboration, integrated services, and systems change.
- We publish resource guides and how-to manuals, and have become a marketplace for other titles of interest to family support professionals.

JOIN US!

The Coalition’s membership undergirds the strength of the family support movement. There are many reasons to join:

- Members receive discounts on books and conference registration fees, free subscriptions to the Report and our bimonthly newsletter, Connection.
- Members get updates on national legislation and funding opportunities: access to information and resources they need to enhance their program’s capacity.
- In all of our projects, our members are our first line of outreach for information and participation.
- Membership entitles you to participate in our African American Caucus or Latino Caucus.

But, these benefits aside, we think the best reason to join is the opportunity to be part of the only national network of family support thinkers and practitioners committed to community-based, culturally responsive services for families.

For more information or to receive a publications and services catalog (which includes a membership enrollment form), call: 312/341-0900.

If this Report didn’t have your name on it, we hope the next one will!

In This Issue

Building community and changing systems. These are the dominant themes of this issue and they represent the ways that programs to strengthen families also contribute to a better society. In the developing field of family support we are learning the importance of community development and of supportive public policies.

In this issue, several articles describe the relationship between communities and programs and the importance to each of building the other. We see once again how programs are rooted in and grow out of communities and how programs in turn nurture the growth of families and the health of communities. We also deal in these pages with frontline workers who are responsible for communicating the vision and the potential of family support programs as they provide services to and work with families. We emphasize empowerment: both the importance of empowering frontline workers and the significance of the empowerment of family members in a program’s day-to-day operations. And, as always, we offer tools and ideas for building and expanding programs and for reforming systems that affect families.

This is an eclectic issue of the Report. In eclectic issues we like to offer practitioners both practical and theoretical ideas, food for thought and food for action. The diverse selection of articles includes: a primer on databases (to help you understand the latest communications technology and how it could help you in your work), an essay on reforming the child protective-services system, an article on training that tells of the FRC’s experience trying to play a small part in reforming the welfare system, a description of a unique school-linked integrated services model. And more. We think these articles show the way the field is growing, the way family support is coming of age.

Write and tell us what you think.

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Family Center Planning Project: Family Support, Public Policy, & Community Development

The Family Center Planning Project (FCPP) was initiated in 1991 by the Federation for Community Planning, a private, non-profit research and planning agency in health and human services serving the greater Cleveland area. With funding from the Cleveland and George Gund foundations and the Ohio Department of Human Services, the project has involved a wide variety of service providers and community participants. The project's recent publication, Guide to Developing Neighborhood Family Centers: Strategies for Service Integration and Community Building was a product of the project’s first phase. FCPP is now working to influence the direction of state and local policy and planning, as well as to provide consultation and training.

What can family resource programs and neighborhood centers/settlement houses learn from each other, and how can the two movements work together? How can family resource programs build partnerships with public system services and influence system change? How can family resource programs be part of community development and a national urban agenda?

These issues emerged during the course of the Family Center Planning Project (FCPP), and moved the Federation for Community Planning toward a more comprehensive approach to family resource and support.

Family Support and the Settlement House Tradition

Many settlement houses date back to the beginning of the century when they assisted immigrants and were on the cutting edge of social reform. With their tradition of strengthening families and neighborhoods, neighborhood centers are in some ways the parents of the family resource movement.

The Cleveland Neighborhood Centers Association (NCA) has played a major role in the FCPP. From the beginning, their representatives challenged us by reminding our planning group that “family centers” and family resource principles are not new. And while neighborhood centers and family resource programs both emphasize family strengths and partnership, the settlement house tradition particularly emphasizes community organizing and participant responsibility. Parents and family members are considered active consumers and stakeholders, always able to give back to the program. They are also viewed as citizens who vote and work together to effect change.

Neighborhood centers are concerned about the full range of institutions and conditions—economic, social, cultural, spiritual and political—that affect families and their neighborhoods. Neighborhood centers contribute to community revitalization efforts.

Our NCA friends helped us avoid slipping into approaches that were exclusively “service” oriented. We discussed the importance of meeting needs with mutual help and non-service solutions such as cooperatives, bartering and credit unions.

With the current emphasis on empowerment and decentralization, settlement houses are being rediscovered at the national level. United Neighborhood Centers of America (UNCA) is reorganizing for a more visible national role. There will be opportunities for collaboration between the national family resource and neighborhood center movements.

At the community level, it is important to identify existing neighborhood centers and include them in planning family support services, mutual assistance and community action. At the very least, we should avoid situations where new initiatives for children and families ignore the older neighborhood centers and pit organizations against each other for dollars and recognition.

Public Services and Systems

The Family Center Planning Project’s goal is to establish an integrated, family-focused service delivery system at the neighborhood level, with a priority on low-income, high-risk neighborhoods. Public and private sector partnership is essential to achieving this goal. Most families in high-risk neighborhoods are likely to be involved with public-system services. In addition, the public systems increasingly control access to funding.

The FCPP identified ways neighborhood and school-based family centers might collaborate with public agencies to benefit families and maximize funding opportunities. For example, the types of partnerships we are working toward in Cuyahoga County include the following:

- Neighborhood family centers can be sites to decentralize eligibility determination for public entitlement programs. This becomes increasingly attractive as computer systems are developed to screen families and, eventually, send application information directly by modem to the relevant public agency.

- Neighborhood family centers can be a referral resource for public agency workers who see families needing support and assistance, including youth and adults returned to the community from specialized treatment or placement.

- The JOBS program can contract with neighborhood family centers to provide comprehensive and integrated services to JOBS participants and their families.

- Family centers can develop JOBS and JTPA contracts to recruit and train eligible neighborhood residents for employment by the neighborhood family center, as well as for other employment opportunities.

- As exemplified by the Annie E. Casey Foundation initiatives, neighborhood family centers can
work with public children’s services to recruit and support foster parents. Family centers can provide a “least restrictive” parent support environment for families referred for abuse or neglect.

In planning for improved integration and collaboration, our public child-serving systems have developed a conceptual framework. This conceptualization may be helpful for planners in other communities.

The conceptual model involves three tiers: I. Family services through neighborhood and community; II. Safety net services; and III. Specialized services.

The planning group has recognized the importance of Tier I for strengthening prevention efforts, improving access to services, and building on informal helping systems. Several of our treatment agencies are already making clinical staff available to neighborhood sites in order to provide consultation, group and individual counseling, in-home family preservation services, assessment, and referral.

Our challenge goes beyond simply injecting family support principles into public systems. It extends to working with public systems toward service integration at family-friendly sites in neighborhoods or cultural communities—the needed “bottom-up” component of service integration and improvement of public system services.

Communities and a National Urban Agenda

Social services and family development should be part of an integrated approach to neighborhood revitalization, just as attention to employment, housing, and safety should be part of our effort to support and strengthen families and plan social services. However, this is not usually the case. Typically, community development focuses on investments in local housing and commercial development. Human services planning is usually absorbed in its own system complexities. Fortunately this seems to be changing.

Some agencies which develop housing are building in family development programs to assure that the families who move into new or rehabilitated housing are able to stay there. Neighborhood family resource programs are exploring partnerships with housing development corporations.

There is also growing interest in providing capital for local entrepreneurship (and not solely for attracting outside employers to depressed neighborhoods). Family resource programs can have an important role here as well. They can identify people interested in starting individual or cooperative businesses, survey residents to identify their skills and experience, bring people with complementary capabilities together, and provide a site for business training and support.

Comprehensive approaches to neighborhood revitalization which include a focus on family strengthening and social services are now supported by national foundations in many communities. In May, 1992, Cleveland hosted the Building Strong Communities: Strategies for Social Change conference. Sponsored by the Annie E. Casey, Ford, and Rockefeller Foundations, it convened delegations from the foundations’ various projects in 16 cities.

Most of the foundation-supported neighborhood revitalization initiatives are comprehensive, holistic, integrated, neighborhood-based, and not categorical: they build on assets and promote empowerment. These characteristics are remarkably similar to family resource principles. Neighborhood development and poverty reduction efforts need the participation of family resource and support programs and experts!

The Federation for Community Planning through the FCPP is a partner in one of these nationally supported projects—the Cleveland Community Building Initiative (formerly the Cleveland Foundation Commission on Poverty). The initiative includes strategies for investment, education, family development, health, and human resource development in four targeted urban “village” areas. Family development goals are 1) to enhance family and parenting skills; 2) to keep families intact through crises; 3) to build economic opportunities for families; 4) to strengthen family-to-family connections; and 5) to increase the commitment of village families to the community.

Conclusions and Recommendations

There are many opportunities for Family Resource Coalition members and programs to build relationships with settlement houses, with public systems, and with neighborhood revitalization efforts. These areas present family resource program— with the challenges of moving toward more comprehensive approaches and of participating in community planning and system change.

Family resource programs can benefit by partnerships with existing neighborhood centers in their communities and include them in community planning. The Family Resource Coalition and UNCA could both benefit by partnership in developing national policy.

Neighborhood and school-based family resource programs should work with public agencies for improved service integration and seek opportunities to contract with public agencies for services to neighborhood families. The Family Resource Coalition should maintain its high priority on national planning for service integration and related funding strategies.

Family resource programs should play a strong role in neighborhood revitalization. The Coalition can assist in sharing information from various localities. In addition, the Coalition should seek ways to ensure that the Clinton Administration and Congress make family resource and support an important aspect of national urban and anti-poverty strategy so that there is national commitment to what the League of Cities calls “family-friendly communities.”

Nina McLellan, M.A. is Director of the Council on Children, Youth and Families, Project Director of the Family Center Planning Project, and primary author of Guide to Developing Neighborhood Family Centers. For a free copy of that publication, contact her at Federation for Community Planning, 614 Superior Avenue N.W., Suite 300, Cleveland Ohio 44113. 216/781-2944.
Pulling It All Together for Families: School-Linked Services Under One Roof

The Franklin-McKinley School District in San Jose, California serves an ethnically diverse student population (90% minorities) with a large number of low-income families representing Latino, Cambodian, and Vietnamese cultures. Located in Santa Clara County, the school district has over 10,000 students in grades K-8.

In 1988 the Franklin-McKinley School District embarked on an ambitious plan to build an 80,000-square-foot district administration building. Planning this building was a labor of love. From the beginning, the building was to be a center for integrated children's services. Using a holistic approach to serving families and children, the building was to provide all the services that could have an impact on student learning.

This meant that the new building had to accommodate many agencies and service areas: 20,000 square feet was set aside for community services. In order to attract them, the district provided free office space and free telephone lines to these agencies. The district also allocated a 10,000 square foot mezzanine which would be leaseable at a rock-bottom price. (Leasing income will pay for the build-out of the space; after three years, the district will begin to yield a profit.)

The building was occupied on November 1, 1991. Within 60 days 90% of the eligible space was occupied. (Childcare was occupied by April 1 of the following year.) Why did it look so easy? The answer is that the district had done its homework.

The district's philosophy about families and children had been publicized by school board members, the superintendent, and the staff for many years. The philosophy was disseminated both within and outside the immediate community by district representatives as they networked on boards and committees with elected officials at the local, state, and national levels; and made presentations at workshops and conferences. Residents of the Santa Clara County area gradually became familiar with the Franklin-McKinley School District effort.

Even before space was available in the new building, the district started working with agencies on what it considered the first level of cooperation. Many district staff members sat on agency boards or worked with agencies on special projects.

The superintendent led the charge toward the integrated children's service concept and personally recruited agencies for co-location. She promoted a vision of how the various agencies would cooperate, co-locate, and finally collaborate.

The agencies which either moved into the building or had placed representatives there include:

- **Health Clinic**
  - The Health Clinic consists of two examination rooms and a large waiting area. The clinic is run by San Jose City Hospital and includes a resident physician, nurse, medical assistant, intern and receptionist. The receptionist is paid for by the district while all other staff are paid by San Jose Hospital funds through grants, foundation funds, and Medi-Cal payments. More than 8,000 students have filed eligibility papers, and the clinic, open each day for eight hours, sees about 20 patients a day. The clinic dispenses medicine and all care at no charge. Free transportation can be provided.

- **Dental Clinic**
  - Originally a dental screening room, the Santa Clara Dental Association requested that the district remodel to accommodate an internship program. Dental furniture and equipment were donated by the Association.

- **Si Se Puede**
  - This is a group of San Jose State University and community college students who serve as interns for school site outreach projects. The interns receive a $10,000 stipend and work 20 hours per week for 18 months. The cost for coordinating the program is paid by the district; however, all other salaries are paid by the City of San Jose.

- **Asian Americans for Community Involvement**
  - This agency assists Asian Americans. Six Asian counselors are on duty throughout the week.

- **Narvaez Mental Health Center**
  - This county-operated mental health facility provides two part-time mental health workers, one Spanish-speaking and one Vietnamese-speaking.

- **Probation Officer**
  - Funded by the county and the district, the probation officer sits on the Truancy Court, intervenes with marginal students, makes home visits, and counsels students who have been assigned a probation officer.

- **Truancy Court**
  - For students who are excessively truant, court is held in the superintendent's conference room. Modeled after the Indianapolis truancy court program, this court requires both parents and children to appear before the judge (who is a presiding juvenile court judge). The judge assigns roles and responsibilities to members of the family. Each family member signs a contract, as does the school district representative. The probation officer monitors the student's progress and if it is poor, the family and student will be "summoned" to a second meeting.

- **Legal Aid**
  - Legal Aid services are provided twice a month for two hours. Parents may make appointments for free legal service related to matters of immigration, housing, and domestic matters.

- **Child Care**
  - The County Office of Education runs the child care center. Low cost child care is provided for district employees and community members on a low-income-first-priority basis. The center uses a Head Start oriented program for children 2 through kindergarden age.
Project Crackdown

This is an administrative office for city drug prevention programs. Two of the city’s worst areas of drug abuse are located in the Franklin-McKinley School District, so having the administrative team located in the district building is particularly helpful.

Marriage and Family Counseling

The district employs ten marriage and family counselor interns, each assigned to a school site for ten hours per week. The interns are working towards the 3000 hours of field work required for a certificate. The program costs of $10,000 are paid for with drug and alcohol prevention funds.

Adult and Child Guidance Clinic

A San Jose Adult and Child Guidance Clinic staff worker serves as the case manager of the integrated children’s services interdisciplinary team. Once a month, the team (composed of mental health, health, school district, and marriage and family counseling professionals) meets with a principal to discuss a family that has not responded to recommended treatment or services.

Independent Study Center

This is a classroom designed for students in grades K-8 who are on independent study. A teacher works with the students, many of whom are pregnant teens.

Home Schooling Center

This resource center is for the families of students who are educated at home. The center has books, materials, equipment, and software that may be used there or checked out.

PTA Council

The location of this office—near the superintendent’s office—is symbolic of the partnership between district and parents, valued by both groups.

Community Affairs Office

This office is run by a district-paid employee who works with district transfers and their parents, and handles public relations. This person also coordinates volunteer efforts.

Head Start Teacher Training Center

The newest district program is a Head Start Teacher Training Center. Cameras are placed in the Child Care Center and monitored by teacher trainees in an adjacent room.

Children’s Discovery Center

The San Jose Children’s Discovery Center stores materials donated by Silicon Valley corporations. Thousands of items for classroom use are stored in a 4,000-square-foot area. Teachers may take ribbon, fabric, foam, string, games, books and other materials for their classrooms free of charge.

PTA Clothes Closet

The PTA stocks this clothes closet with clothing, shoes and blankets. The Community Affairs Coordinator assists families in need with visits.

The Technology Center

The technology center is used to train teachers and other staff on multimedia options, including computers. The center is also open to students and parents. Apple and IBM-compatible PCs are available until late evening.

Video Production Center

A room for video production is equipped and available to staff and community members.

Making it Work

For such a model to work, collaboration is imperative. For collaboration to be successful, it must build on relationships of respect and trust. Communication is vital: every stakeholder’s concerns and interests must be discussed and addressed and the chain of responsibility, system for resolving problems, and evaluation process must be clear and understood by all. The coordinator of the project should model communication and collaboration skills. If the collaborating partners really feel and act like a team, it will not be difficult to handle concerns of responsibility and confidentiality as they arise.

Summary

In its first 14 months of operation, this $7 million district administrative office has hosted over 18,000 people. In addition to providing needed services, the county of Santa Clara and the city of San Jose have been able to take advantage of meeting space in a building easily accessible to other agencies and programs. So far, integrated programs have treated, served, and supported more than 2,000 clients. Three children’s lives have been saved by medical care at the clinic. Countless parents know that they need never worry again about a sick child or any other problem that can be solved by the services provided within this building.

Collaboration is the direction of the future. Cities, counties, and school districts should never consider building a facility without first exploring the possibility of at least co-locating. Ultimately, no public entity should be allowed to construct a new building without the approval of a “Collaboration Committee.” This committee would guarantee maximum usage of public buildings and programs.

To the people directly associated with the Franklin-McKinley integrated children’s services there is absolutely no viable alternative to the model that was created. Although a new building is not needed in order to achieve this type of collaboration, a commitment to the model and the philosophy behind it is critical to the project’s success. That philosophy comes down to the assumptions that children will thrive if they are supported by a caring community of educators, parents, and service providers; and that integrated services initiated by a school district provide a vital and logical opportunity for building such a community.

Dolores A. Ballesteros, Ph.D. is currently superintendent of Desert Sands Unified School District in Indio, California. Dr. Ballesteros was the superintendent of Franklin-McKinley School District from 1982 to February, 1993, where she led the effort to establish the integrated children’s services facility described in this article. She can be contacted at the Superintendent’s office, Desert Sands Unified School District, 8279 Highway 111, Indio, CA, 92201.
Creating Family Support Programs: Mobilizing Communities in Tucson

In 1989, the Tucson Urban League held a series of Community Mobilization workshops at a neighborhood center in South Park, a low-income, inner-city neighborhood known for its gangs and drug activity. The goal of the workshops was to educate and motivate residents to become actively involved in their community. During the workshops, community members were asked for their input regarding the neighborhood—What were they most concerned about? What did they like most and least about their neighborhood? What would they like to see happen in their neighborhood? What could members of the neighborhood do to improve things?

The Tucson Urban League, with the assistance of the University of Arizona, undertook a community planning process. A Steering Committee of South Park residents and representatives of adjoining neighborhoods, neighborhood schools, businesses, social service organizations, churches, and government has formed. In a series of committee meetings and public community meetings, building on community input from the mobilization workshops, the neighborhood established its goals. These goals covered a broad range of topics including neighborhood participation, substance abuse, safety and security, health care, recreation, education, child care, employment and training, economic development, housing, transportation, and land use.

Focus groups of experts on each of the identified goals were held, to develop implementation strategies to enable the neighborhood to achieve its stated goals. The neighborhood reviewed the groups' recommendations and adopted those they considered appropriate.

The resulting South Park Area Community Development Plan was completed in January 1991. It has served as a guide for the neighborhood in its efforts to obtain funding for projects indicated by the plan. Thousands of local, state, and federal dollars, public and private, have been raised to enable the neighborhood to implement its plan. The plan has been widely recognized and in 1992 it received the Arizona Planning Association's award for the Best Comprehensive Plan of the Year.

To assist South Park and other area neighborhoods in achieving their goals related to children and families, the Tucson Urban League created the Office for Family Resource Development. At the same time, the Tucson Community Foundation, in response to a leadership challenge grant from the Ford and MacArthur foundations, was researching and documenting the needs of children and families for a prevention system. With a grant from the Tucson Community Foundation, the Family Resource Partnership was born.

From the beginning of this process, the Urban League's role has been that of technical assistance provider, helping neighborhoods achieve their goals. In the Family Resource Partnership, Urban League staff have assisted families in creating and carrying out programs which the families have identified as important to them; above all, the Family Resource Partnership is created by and for neighborhood families.

Assessing the Neighborhood's Needs

Because families were to drive the programming, it was important to make contact—with as many families as possible in the target neighborhoods—South Park, Pueblo Gardens and Western Hills—and discover what their priorities and goals were. So, the Urban League hosted parties in each of the neighborhoods for kindergartners and their families. From the list of party attendees, interviews were set up.

Through these interviews the Family Resource Partnership obtained information needed to define its direction. But more importantly, the interviews helped establish the rapport and relationships which became the foundation for all future efforts. Through a series of open-ended questions, in a friendly and conversational atmosphere, people talked about what they wanted for their families and their community. The questions were designed to elicit responses about what actions families could take, and how they could form partnerships with agencies to achieve their goals. For many people this was a new way of looking at things. In the past, their model of social change had been to find an agency to solve a problem for them rather than to create their own solutions. For a portion of the responding group, these questions generated a shift in thinking that opened the door for them to help create the programs and services currently provided by the Family Resource Partnership.

Families Create Programs

During the first year of program development, families in the three target neighborhoods came together to work as a team. They created both long-term and short-term projects to meet identified needs. These projects included Baby Boxes, Kids' Business Opportunities, and Family Nights.

Baby Boxes

In the target neighborhoods, babies are often born to families with very limited resources. This is especially true of those born to teenage mothers. The Partnership families know from experience what years of research have shown: that these children are more likely to live at or below the poverty line; that they are vulnerable to child abuse; and that they are likely to suffer...
Two recent workshops were an
teers deliver the boxes to families'
new babies and to begin to create a
the immediate needs of families with
they will need to start their own
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entment, but for children aged 10 to
Older youth could find employ-
about their children's choices.
parents were concerned
press. Parents already report the
can be replicated in any community in
The Family Resource Partnership
The Partnership families created the
Baby Box project to help meet some of
the immediate needs of families with
new babies and to begin to create a
support network around them. Volun-
teers deliver the boxes to families' homes. If special needs are obvious, they refer the family to an appropriate agency. Occasionally, workshops are arranged through collaborative relationships with other agencies. Two recent workshops were an
Active Parenting class and an
Infant Massage class. In the first
year, the Family Resource Partner-
ship delivered more than 25 Baby
Boxes. Volunteers have made the
project completely self-sustaining through private donations and monies generated through raffles.

Kids' Business Opportunities (KBO)

In an area plagued by gangs and
drugs, parents were concerned
about their children's choices. Older youth could find employment, but for children aged 10 to 15 options were limited and temptations abound. This was the context within which KBO was born. With the support of a local hospital and the Junior Achieve-
ment group in Tucson, the young people are receiving the training they will need to start their own
businesses. Parent volunteers support and advise youths learning important business skills. The group has undertaken two money-making projects: a ceramic vase sale and a
resaleable. Their long-term goal is to
establish a babysitting business in their community. Parents already report the difference they see in their children. "I didn't know my son had these skills," one mother said. "This has really helped my daughter's self-esteem," another adds.

Family Nights

The interviews found that a signifi-
cant degree of isolation and mistrust
exists within neighborhoods. People who didn't know their neighbors
expressed longing for the "good old
days" when families knew everyone on
the block and could count on their neighbors for support. The Partnership families have tried to recreate that feeling of comm with a series of Family
Nights. Once each month, on a Friday
evening, families gather at the Family
Resource Partnership Center to share
food, play games, and make friends.
Parents and children play together.
New neighborhood families are invited
to join in. The positive consequences of
these gatherings are reflected in
parents' comments. "I feel that my
neighborhood is safer. My children
know where the other Partnership
families live and know they can go
to them if they are in trouble or if they

need a safe place." These opportunities
to relax are treasured. As one parent
put it, "This is a time when we can
come together, and laugh. I can get
away from my problems."

Parent Involvement

In all the Family Resource Part-
tnership programs, parent volunteers
provide short-term support—from
organizing the clothing bank at the
center, to maintaining contact with
neighborhood families, providing
transportation, and answering tele-
phones. Volunteers also coordinate the
Baby Boxes, KBO, donations, out-
reach, special events, and the newsletter. Through training made possible by
the Tucson Community Foundation,
parent volunteers have gained the
skills necessary to facilitate meetings,
plan projects, and make presentations in the wider community. They have found their voice and are helping
others find theirs.

Replicability

The Family Resource Partnership
can be replicated in any community in
the United States. The resulting
projects may not be Baby Boxes or
KBO, but they will meet the unique
needs of the communities from which
they arise. The key components to
replicating the Family Resource
Partnership are:

1. mobilizing the community
(educating and motivating) to
identify their goals and objectives

2. Creating an opportunity for
neighborhood residents to
freely express their opinions
and be listened to

3. Planting the idea that families
have the ability to effect
change

4. Providing families with the
opportunity to gain the skills,
confidence, and abilities they
need to work toward their
goals

5. Ensuring rapid follow-through
so families see the results of
their efforts.

Future Plans

The Partnership parents are
already planning how to
strengthen their existing services.
They plan to approach local
businesses to make donations and
to sponsor KBO. They hope to move to
a larger building that will have several
activity rooms, a nursery, and a
recreation area. They plan to recruit
senior citizens, so the youth can learn
from the wisdom of the elders. They
want to expand by opening centers in
different neighborhoods that will be
part of a big "family organization." They want their children to grow up to
run these centers. And they are already
planning their 30-year anniversary!

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On Families, Foster Care, and the Prawning Industry

I once owned and operated a prawning trawler. I loved being at sea, loved the romance of working all night and then watching the sun rise far from the sight of any land, and generally thrilled at the thought of my terribly adventurous life. I've now come to regard dragging chains across the floor of the ocean to net a few pounds of prawns as a wasteful and destructive practice. We ripped up coral beds. We pulled up tons of sea creatures, killing them on their trip to the surface and then tossing their bodies back into the sea because they couldn't be sold. In the course of harvesting a few pounds of prawns, we annihilated their habitats. Very bad practice.

* * *

Everyone is talking about child abuse these days, and, nearly everyone seems to be doing something about it. The noble and tireless efforts of child-protection services agencies, public and private child-abuse prevention organizations and celebrity pledgers seem to have brought these troubled children no closer to a safe haven.

A common response to issues of abuse and neglect is the placement of children in state-regulated foster care. This practice is generally accepted by the public, and, judging from the swelling numbers of children in foster care, it is widely used by agencies charged with overseeing the protection of children. The population of children in foster care grew 4.1% during fiscal year 1991; the general population grew 1% during the same period. At the start of 1992, 429,000 children were in care throughout the United States and all indicators point to further increases. According to Wendel Primus of the Department of Health and Human Services, more than one out of every ten infants born in the poorest inner-city neighborhoods will be placed in foster care.

These placements outside of the family are disturbing on a number of fronts. In most cases, children experience significant trauma when they are separated from their families. Even when the environment from which they are removed is dangerous or unhealthy, to be taken away from all that is familiar can be devastating. Indeed, separation from a primary caregiver is often experienced as a threat to survival.

While the child may feel that separation from family threatens his or her survival, the system removing the child to foster care believes that the conditions from which the child was removed were the threat to survival. In making the placement, there is an implied assumption that the state, by way of its foster-care system, will be able to offer the safety and stability that the family was unable to provide. This is not always an accurate assumption. There are no guarantees that a foster-care placement will be stable or safe.

An additional tragedy many children face as wards of the state is the lack of continuity of care. Nationally, children entering foster care move an average of three times. Twenty-five percent of all children in foster care will experience three or more placements during their stay in the system. Having worked in the field of child welfare, I'd say that this average of three moves seems a very low estimate. I can think of numerous children who experienced as many as nine placements in a year. I've known infants to experience three placements in as many months. However kind, loving, and capable a foster parent may be, leaving a child with a series of kind, loving and capable strangers is a form of abuse. But what of more active forms of abuse? Can the state guarantee safety from physical or sexual abuse to a child in its care?

There are no accurate data, to my knowledge, on incidents of abuse in foster care. Still, this phenomenon is referred to in professional journals and, when the press in my state, Oregon, learns of tales of abuse in foster homes they become headline stories. Although abusive foster homes may not be the norm, only the most naive could promise a safe haven to a child entering the system.

Rather than focusing efforts and money towards improving what is, at best, a less than adequate system, this paper argues for a practice with demonstrated potential to radically reduce the need for foster care. It is a practice that can have an immediate strengthening effect on families as well as positively impacting the roles and responsibilities of families for generations to come. The practice is no panacea; it will not guarantee safety for all children; it will not end all fatalities by abuse; it will not ensure optimal developmental outcomes for all children. What it will do is increase the likelihood of child-safety. It has the potential to foster respectful and cooperative relationships between child protective services agencies and their clients. It will increase the number of individuals looking out for the safety and protection of children, individuals with an intimate connection to the child. And it will return to families the sanctioned roll of looking after their own.

Family Group Decision Making: An Option For Child Protective Services

In the Commonwealth of New Zealand, concerns regarding the inadequacies of state-regulated foster care precipitated the passage of radical legislation affecting the country's child welfare practices. The Children, Young Persons and their Families Act of 1989 mandated that when the state becomes involved in child abuse or neglect cases, the power of decision making regarding the protection of the child must be given to the family.

Plans for child protection are made entirely by the child's family; and, except for extraordinary circumstances, the state supports and helps to implement those decisions.

The initial response by those unfamiliar with this process is usually one of incredulity. "You mean to say that you would let the family who..."
caused (or allowed to be caused) abuse or neglect be responsible for creating a plan to end it?" The answer is "yes," with a very expanded definition of family. Stop for a while and think about your own family. Think beyond what is called the nuclear family to your grandmas, grandpas, aunts, uncles, nephews, brothers, sisters, cousins, cousins twice-removed, etc. Include the people in your life who have become family due to the nature of your relationship with them.

A national expert on child abuse and neglect told me that she often poses this question to child welfare professionals: Would you replace yourself, your family and friends with a team of the best pediatricians, policy makers, psychologists, and social workers to plan for the raising of your child? You know their answer. Their answer is the same as your answer: "No."

This brings me to an interesting conversation (argument) between my mother and myself. She had been reading in our local paper about a child who was brutally and fatally abused by his father after the state protective services became aware of the issues and chose to leave the children in the home. "They should put those children in foster homes and never allow them near their families again," exclaimed my mother. I asked her, "If I were to become a drug addict, lose control of my life, and become a danger to my son (your grandson), would you want the state to place him in foster care, and assume responsibility for his protection, or would you prefer that our family take responsibility for his protection and my rehabilitation?"

"Well!" She replied, "The state would have no business in our lives, but our family is different."

I submit that my family (or yours) is no different from many other families in certain respects. Among the members of my family and just about everyone else's are people willing, capable, and committed to caring for their own. Families are entitled to take responsibility for their children.

How It Works
In New Zealand, families have been given this entitlement. As is similar in the United States, abuse and neglect allegations are investigated by mandate. However, when allegations turn out to be well-founded and a plan must be made to create conditions of safety for the child, it is up to the child's family to make that plan. When an immediate placement away from parents is required to protect the child, in keeping with the philosophy of the Children, Young Persons and their Families Act of 1989, placement is sought within the child's family. State workers then arrange for a family group conference. At this conference, the family develops a plan to address the needs of child-safety.

All members of the child or young person's family who can be located are invited to attend. Funds are available for transportation when the family requires such assistance. Relatives from as far away as Australia and Europe have traveled to attend these conferences. Doesn't this cost money? It does; but the money saved avoiding unnecessary foster-care placements greatly exceeds the expenses of running family group conferences.

Social workers convening the meeting provide food and drink in a comfortable setting. They will also have invited nonfamily guests who can present all available information regarding the issues of the safety of the child. These guests may include medical professionals, police, protective service workers, therapists, teachers and others. There are two distinct phases to the conference: the information-sharing phase and the decision-making phase.

During the information-sharing phase, pertinent details regarding concerns for child safety are presented to the assembled group. Participants may ask questions and provide additional details pertaining to the care and protection of the child. The nonfamily guests might also describe what services they can offer the family should the group seek outside resources. Once all applicable information is shared, the nonfamily members plan and then negotiate resources (including financial) that will be required to implement the plan.

Some features of the conference merit further discussion at this point: 1) only family members may attend the decision-making phase of the conference; all others, including legal counsel, are excluded; and, 2) nothing said during the conference can be used as evidence in any court of law.

The protection of children via family empowerment and accountability is the desired outcome of these meetings.

At these meetings, the family enjoys legal immunity. If a family is to create a plan that provides for optimal safety for the child, family limitations and vulnerabilities as well as strengths need to be openly discussed. If a fear of legal entanglements prevents family members from raising concerns or openly discussing issues, the family has a reduced chance of developing a safe plan.

Judy Moore, senior social worker in Lower Hutt, New Zealand tells of a family group conference she helped arrange. She had hoped that the family would choose for the child to live with a very respectable and financially well-off aunt and uncle while the parents participated in a residential drug-treatment program. The family, however, selected another, less likely
(in Judy’s eyes) caregiver to take the child in. Some months later, one of the family members visited Judy. She told Judy that she knew the decision the family had made was unexpected. “You see,” she explained, “uncle did some funny things to us girls when we were young, it wouldn’t have been good for the little ones to go with him.” No one would have shared that information if they thought the uncle would be prosecuted; they didn’t want the aunt to be shamed.

Outcomes

There was, and continues to be, some resistance from the professionals who find it hard to relinquish power over families; particularly when within those families children have suffered. And yet the system is working. In the four years since the Children, Young Persons and Their Families Act of 1989 was instituted, foster care has been reduced by as much as 90% in many areas of New Zealand. Nonrelative adoptions are becoming a thing of the past. Outcomes of this practice include the following reports from New Zealand caseworkers:

“The families came up with a greater variety of alternatives than anything we could imagine or offer.”

“The families took the responsibility for the children from us and if a decision did not work the family took responsibility for making another decision.”

“The families are the best sources of information on which decisions can work out. We realized how inadequate our own assessments had been.”

“Even in the most difficult of family situations there has always been someone, somewhere in the blood-kin network who is willing to care for the child.”

“When the family made their own decisions, they did everything in their power to make them work.”

Our New Zealand colleagues have been challenged when families made decisions with which they did not personally agree. Despite their agreement or disagreement, if the plan met the needs for safety of the child, that plan was supported and provided with the resources necessary for implementation. When plans don’t work, a new conference is called, and a new plan is created. After all, just how well did the state do when acting as the chief decision-maker? Look at foster-care drift and adoption disposition an indication of the state’s record.

Wilcox et. al., (1992) describe it this way:

“How many children have we been responsible for placing in a multiplicity of foster homes, based on our professional assessments? How many of these children have been abused in spite of our professional assessment? We had to accept that families, like professionals, made mistakes. The luxury we had had, of making subsequent decisions following a mistake, had to be extended to them.”

What effects might this practice have on future generations of families? The impact could be monumental. Imagine when families are encouraged and expected to be responsible for their members. It should not be up to teachers to stop truancy, the police to prevent criminal activity, the state protective services to safely shelter the children: these jobs are most efficiently carried out by families.

Families generally have power, rights, and authority reaching far beyond what is appropriate or reasonable for nonfamily “professionals.” Why not capitalize on this power?

What does this have to do with the prawning industry? Traditional child-welfare practice has focused on saving children from hurtful environments. The ultimate salvation occurs, perversely, when parental rights are terminated in a court of law. After the painful establishment of a case which proves the parents’ unsuitability, expert after expert publicly details the failings of the parents before a judge. Through this process, the child learns that his family is “bad”—otherwise they’d be together. And might children not conclude that if their families are entirely too bad to care for them, then they must also ‘we that badness within themselves, being of the same flesh and blood? In its attempt to harvest a good catch, to save a child’s body and soul, the system drags its chains over families until all that was sound, strong, and life-sustaining is destroyed. How many children survive the trip to the boat? How many of those that survive are irreparably damaged by the process?

Foster care subsidies, developing better assessments of potential foster parents, sharpening workers’ skills at building a case to terminate parental rights, and high-tech marketing strategies to find adoptive placements all drain resources. Using a fraction of those resources, a child protective services system could be built that would not only help keep children safe, but would attract an abundance of committed volunteers. The volunteers I refer to are, of course, family members.

Notes

10HARTMAN, J. (1992, November 13). Expert: Dead child was beaten, abused. The Eugene Register Guard. pp. B1, B4
12HARTMAN, J. (1992, November 13). Expert: Dead child was beaten, abused. The Eugene Register Guard. pp. B1, B4
A number of innovative state system reform initiatives are attempting to strengthen services for families by removing the "muzzles" on frontline workers. These initiatives recognize that the relationship between the worker (or case manager) and the participant often serves as the catalyst for families to make life-altering changes. They also recognize that in order for families to receive quality services, frontline workers must be given increased flexibility and authority, and the tools to make decisions and access resources for families. They must also have adequate training and the support of the larger system in carrying out their duties. The Family Resource Coalition recently joined in this effort to strengthen services for families in a two-year project assisting states in moving towards a family-supportive approach to case management in their welfare-to-work programs.

The Coalition's Training and Support Project for States Implementing PL 100-485 was designed to assist the states of Illinois, Connecticut and Florida in conforming to Public Law 100-485 (the federal welfare reform legislation known as the Family Support Act) by designing and implementing technical assistance and training strategies which promote family resource and support principles. These principles, based on the experiences of exemplary community-based programs, promote an approach to service delivery that is preventive, community-based, culturally-responsive, comprehensive, family-strengthening, skill-building and empowering. It was hoped that training based on these principles would enhance the capacities of direct service personnel and public welfare administrators to work with families in new and different ways; ways not typically characteristic of an overburdened, understaffed welfare system. The project concluded with the development of a comprehensive training manual for JOBS (Job Opportunities and Basic Skills) workers, to be published later in 1993. Portions of this training program were pilot tested in Illinois and Connecticut; and the entire training program, in Florida.

The Family Support Act

The Family Support Act (FSA) of 1988 is national welfare-reform legislation that was designed to promote the self-sufficiency of long-term welfare recipients through education, employment training and placement, and supportive services such as child care, transportation and some medical benefits. These components are addressed in the JOBS portion of the legislation that served as the focus of this project. The FSA also addresses the issue of child support enforcement. Though this is a critical issue for many families, it did not represent a focus of this project. The FSA was designed to help the public welfare system move from focusing only on providing financial support to assisting people in securing jobs that will ultimately allow them to move out of the welfare system. Despite the fact that this legislation is now five years old, it continues to represent a significant challenge for states to change the way they interact with and serve families. Distributing financial benefits (the traditional role of the welfare system) requires significantly different skills from helping a long-term welfare recipient gain the needed skills, supports and confidence to move out of the system.
Making the Public Welfare System Family Supportive?

Anyone who is even remotely familiar with the public welfare system knows that trying to implement family resource and support concepts in a public welfare setting was a lofty aim. The welfare system has a history of working with individuals and not families, of providing financial supports but not social supports, and of being focused on deficits and not strengths. While the Coalition did not intend to take on the challenge of changing the entire welfare system, we believed that the Family Support Act provided an opportunity for changing welfare policy and practices within the JOBS program to an approach more congruent with the family support philosophy. This project served as a first step in moving toward that goal.

Five key provisions of the legislation (representing new approaches to working with families in a welfare setting) created what we saw as a new opportunity in our work with states and formed the basis for the project's activities:

1. Family assessment as part of client assessment during intake into the JOBS program
2. Family goal-setting as part of the employability plan in the JOBS program
3. Linkage between state agencies and community-based organizations
4. Improved case-management systems
5. Increased interagency cooperation and coordination at state and local levels

The Coalition's project responded specifically to the key provisions of PL 100-485: the FRC 1) assisted states in the development of family-focused assessment instruments, 2) created a framework and model for a family-supportive approach to case management, 3) helped to strengthen linkages between the JOBS programs and community-based agencies, and 4) trained direct service personnel in the use of the tools, process, and skills needed in working with families, in strategies for utilizing community-based resources, and in appropriate case management strategies.

The Frontline Practice Level

In our work with states, we observed four areas that were related at the frontline practice level (the point at which the family meets the system). In a single interaction with a JOBS participant, the caseworker 1) assesses the needs of the participant's family; 2) works with the participant to set goals that are relevant to both the participant and his or her family; 3) makes referrals to community-based agencies in response to issues that the participant raises; and 4) helps the participant access needed services from a variety of state departments. Carrying out these tasks in a manner that is congruent with the family-support approach requires a broad range of skills.

In his paper Frontline Family Workers—The Role of the Family Development Specialist, Charles Bruner highlights the key role that frontline workers play:

"There has been a call for more service integration and collaboration among agencies in meeting the needs of fragile families and at-risk children...Less often made explicit, however, is that at some point, this "service integration" and "collaboration" comes down to what happens when a worker comes into contact with a specific, real life family." 1

To gain a better sense of what was happening in contacts between workers and families, we held numerous meetings and interviews with state and local staff at all levels; observed the orientation, assessment and employability planning process; and conducted focus groups with workers, supervisors and JOBS participants. As we began to look more closely at the workers' daily practice, we were struck by the fundamental mismatch between the complexity of the job that workers were being asked to do and the training and systemic supports they were provided with. For example, workers were faced with caseloads that ranged from 100 - 400 participants, burdensome paperwork and case-recording duties, and pressure to place clients in jobs or training programs so that unit placement goals could be met (not necessarily because it was the right placement for the participant). At the same time, states were facing a severe financial crisis including worker layoffs and lack of funds for some of the basic elements of the JOBS program (e.g., child care) and the pressure to meet federal participation rates in an effort to receive needed federal dollars. Training for workers ranged from a few hours of training on the basics of the legislation to a few days training on case-management concepts. Many workers told us that their training program consisted of being handed a policies and procedures manual and then being trained on the job by another worker. The quality of this training was solely dependent on the competency of this more experienced worker.

Battling Systemic Barriers

As we worked to examine these practices and applications in a welfare setting, we were constantly challenged by the limitations and barriers in the system. As the project evolved, we remained steadfast in our belief in that it was possible and desirable to begin the process of moving the welfare system toward a system focused on prevention instead of treatment which engaged JOBS participants in respectful, supportive relationships; which sought real long-term gains and not short-term fixes; and which focused on families and not individuals. However, our enthusiasm was often tempered by the harsh realities of a system that sees individuals not as members of a whole (the family) but as mere parts, easily separated from one another and more easily served separately by a system that focuses on deficits rather than strengths. This contrast of the current welfare system with the family support approach represents a conflict in values, philosophy and principles,
be true that the system is a barrier to validate what everyone already knew to be true—the system is a barrier to providing quality services. As the barriers that we encountered arose at the level of fundamental values and beliefs about families, communities, and support services, we targeted training at this level. At the same time we worked with states to implement system-changing interventions (such as changing paperwork forms and supporting the development and implementation of caseload-reduction plans). While we realized that there were very systemic issues that would make it difficult to implement the concepts we advocated, we felt that we could use training sessions to press the system in new directions, even as other system-changing interventions were being implemented.

To truly create a responsive system, we felt that workers needed the:

- information and skills, and confidence to deal with the wide range of child and families
- a level of comfort in dealing with gray areas that were not explicitly addressed through policy or procedure manuals
- the sanction and support of the larger system to interact with families in new and different ways.

In addition to a variety of resources from the family support literature, development of the training program was also informed by publications by the Foundation for Child Development and Project Match, a welfare-to-work program in Chicago’s Cabrini Green neighborhood. These tools served as the most useful for examining ways the concepts we were promoting could be implemented in a JOBS setting. In their paper Changing What Counts: Re-Thinking the Journey Out of Welfare, authors Herr, Halpern, and Conrad state that

“At an ideological level, the Family Support Act embodies a ‘new consensus’ about welfare-related issues. It alters the stated purpose of AFDC from income maintenance to transitional assistance in the service of promoting self-sufficiency... Nonetheless, we argue... that the approach taken to key elements of the JOBS program is based on an unrealistic conception of what it will take to move the most disadvantaged recipients into mainstream work and social worlds. This approach does not reflect the fact that for the most disadvantaged recipients, leaving welfare is a long and difficult process, not a discrete event. Further, while on the surface leaving welfare appears to be a matter of helping people enroll in education and training programs or find jobs, at a more basic level it is about personal growth and change.

The implications of these two related ideas for the design of welfare-to-work programs are great. If leaving welfare is understood as a process, welfare-to-work programs should begin to focus more on the intermediate steps along the way, recognizing small gains, shaping them into a gradual progression, providing ongoing support for the transitions from step to step. If leaving welfare is understood as being fundamentally about personal growth and change [and not about income maintenance or even getting a job], then programs should focus on such issues as the developmental and situational appropriateness of demands made of people, and the kinds of experiences and supports that help alter people’s sense of identity.”

One Program, Two Generations: A Report of the Forum on Children and the Family Support Act provides one of the best discussions in the literature of the needs of welfare families and the ways that welfare systems need to change to respond to a broad range of family issues. “[T]he Family Support Act represents one of the first opportunities to link together the family supports that research suggests are likely to promote...conditions of healthy development and produce long-term benefits for low-income children [and families].”

According to the Foundation for Child Development, these supports include:

- services to enhance parenting and family functioning
- high quality child care and education
- preventive and primary health care
- basic education and vocational training
- support to help parents maintain employment
- assessment and case management

These three bodies of information—the family support literature, the Project Match experience, and the Foundation for Child Development materials—combined to create a framework for a family-supportive case-management model that became the basis for the training program. This case-management framework is a family-centered approach to working with JOBS participants that incorporates the following elements:

1. An understanding of the relationship between caseworker and JOBS participant as a mutually respectful, joint partnership. It is in the context of this relationship that JOBS participants grow and change.

2. A family-centered-approach where the individual is defined in the context of his or her family, and where the needs of the whole family are considered in the assessment and planning process.

3. The transition from welfare to work is defined (per Project Match) as a process of human and family development. The connection between motivation, readiness, and self-esteem is critical to the assessment and planning process.

4. The unique experiences and strengths of cultural/racial groups are respected and supported. Knowledge of the values, beliefs, and lifestyles of these groups are used in assessment and planning.

5. Both formal and informal networks of resources and support to the family are identified and supported. The family is seen in the context of its community and collaboration with the community is encouraged.
In the Florida pilot, the training included six instructional modules, and was delivered over a three-month period. We used a highly interactive and participatory methodology that included simulation, homework exercises, case presentations, role playing, videos, panel presentations, demonstrations, drawings, and large and small group discussions.

**Training as a System-Changing Intervention**

The training sessions are designed not only to impart skills and information but also as system-changing interventions in the following three ways:

1. **Training sessions are seen as opportunities to build bridges and relationships.**

   Workers in state systems are often as isolated as the families they serve. Training sessions can reduce isolation by bringing together unusual bedfellows. In one state, supervisors in the Aid to Families with Dependent Children (AFDC) program participated in the training along with the JOBS case managers. This provided numerous opportunities for an exchange of information and the resolution of misunderstandings (for example, JOBS workers reported that many AFDC clients come to them with inaccurate information about the JOBS program). AFDC supervisors were able to learn more about the aims and offerings of the JOBS program to take back to their workers.

   Training workers from different programs also provides an opportunity to spread the philosophy and commitment to new ways of working with families. One-third of the training sessions included representatives of community-based agencies, many of whom work with the same families being served by the welfare system. Those training sessions were rich with information-sharing and relationship-building that will ultimately serve to strengthen the support that families receive from the welfare system.

2. **Training can create an opportunity for dialogue with management.**

   Supervisors and managers participated in all training sessions. As workers raised issues about why certain family assessment techniques would not be effective or commented on a policy or procedure that stood in the way of implementing a new practice, managers were present to engage in a dialogue about strategies to resolve the issue. Issues, such as paperwork that had outgrown its usefulness or policy differently interpreted by several workers, were resolved on the spot. Other more complicated issues (such as reducing caseload size or changing a federal regulation) could not be immediately resolved, but the information gathered in the training often provided management with the tools and ammunition that they needed to take issues to a higher level.

   We tried to attack many of the systemic issues even before the training began (e.g., lowering caseloads) but many other issues were raised in the context of training. The training gave workers an opportunity to talk about what really happens on the frontline and gave managers a chance to talk with workers about needed systems changes. As training is developed and implemented there needs to be a feedback mechanism that keeps key administrative staff informed of the lessons that are being learned and the changes that are needed in the system to support the new kind of practice that is being proposed.

3. **Training can build a more competent and confident frontline workforce.**

   Providing quality training for workers increases their vision and their expectation for their work with families. As workers begin to see both themselves and their client families as more competent and capable, their expectations for a more responsive system will increase. As workers acquire power, skills, and knowledge, they become change agents for change within the system. There is some danger, however, of creating a situation in which the gap between what workers are trained to do and what they are realistically able to do in light of the systemic barriers is too great. Training must be delivered in accordance with other system-changing interventions (e.g., caseload reduction, revised job descriptions, etc.) so that workers can see change on the horizon.

   As people work together to strengthen family-serving systems, the important role of the frontline worker must not be underestimated. In their paper *Case Management in Welfare Employment Programs*, authors Doolittle and Riccio state:

   "The case managers—the line staff who are responsible for determining the needs and making sure they receive the appropriate services—become the agents of the policy maker, applying the general principles of the model to particular welfare cases....In many states, case management activities are the point at which the concrete meaning of a program is developed. Case managers operationalize the relationship between the client and the program...How case managers do this will have a great effect on what the program looks like in practice."  

   Effective and responsive training, combined with other system-changing interventions, can thus strengthen workers' practice and thereby improve the quality of services to families.

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**Notes**


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In January 1992, the National Committee to Prevent Child Abuse (NCPCA), in partnership with Ronald McDonald Children’s Charities, launched a national initiative called Healthy Families America (HFA). HFA, modeled after Hawaii’s Healthy Start initiative, seeks to reach all first-time parents with intensive home-visitor services. The goal of HFA is to assure that all new parents, particularly those at high risk for child maltreatment and other poor childhood outcomes, get off to a good start.

The HFA effort is being carried out in collaboration with the Hawaii Family Stress Center and the Hawaii Health Department. NCPCA has been working with public and private agencies interested in institutionalizing home-visitor systems in nearly all 50 states: a tremendous amount of activity has occurred over the past 18 months. As a result of the training and technical assistance provided to date, over 26 pilot HFA sites are operational. This article describes the overall vision of Healthy Families America and the approach NCPCA is taking to fulfill that vision.

While the primary objective of Healthy Families America is to prevent child abuse and neglect, HFA also provides infrastructure for identifying family and community needs and for empowering families to access a range of health and social services. As such, HFA promotes enhanced family functioning and health status.

Building a Flexible Model

Throughout the implementation process, NCPCA has emphasized flexibility in service delivery to facilitate HFA’s integration into a wide range of communities, to foster partnerships with existing service delivery systems, and to support opportunities for innovation. As HFA services are developed, they will be integrated as much as possible with existing community services.

Evaluations of early interventions with new parents have isolated basic attributes of programs that contribute to their effectiveness. These criteria, central to the HFA effort, are organized into four categories: 1) initiation of services, 2) service intensity and duration, 3) content of services, and 4) selection and training of service providers. The critical elements and attributes of programs that contribute to other school-readiness services (e.g., Head Start, HIPPY)

Content of Services

- Services are family-centered, addressing the needs of the child within the context of the family and recognizing the adults in the family as primary decision-makers
- Services focus on supporting the parent as well as on parent-child interaction and child development
  - Services include a focus on child health and links to the healthcare system (e.g., immunizations, visits to well-baby clinics)
- Services include a component on school readiness or they refer participants

Selection and Training of Service Providers

- Home visitation workers are selected on the basis of personal characteristics (e.g., nonjudgmental, compassionate, able to establish trusting relationships)
- All workers complete intensive, initial training program and periodic in-service training
- All workers receive ongoing professional supervision to assure quality (e.g., two hours per week of supervision for home visitors)
- Worker caseloads are limited to no more than 15 of the highest risk families at any one time

Healthy Families America calls upon states and communities to recognize programs already embracing many of these criteria and acknowledge their successes. But HFA also challenges us...
all to do better and to have the courage to change.

HFA and Service Reform

HFA is establishing partnerships with organizations and programs whose goals, objectives, and target populations are similar. Through these collaborative relationships, NCPCA hopes to reform systems so that they comprehensively provide the following: access for all, coordinated services, and continuity of care.

Access for All

Most Americans believe that all families deserve and can benefit from some form of enrichment. In NCPCA’s most recent public opinion poll, 70% of the respondents thought it appropriate to offer home visits and other support services to all first-time parents, including families like their own. The First Steps Program, created by the Georgia Council on Child Abuse, is one example of a model already providing educational and support services to families with newborns. Since the program is hospital-based and primarily short-term, it provides a solid foundation for identifying families in need of more comprehensive services. In at least two states with First Steps programs, Arizona and Georgia, efforts are underway to introduce systematic needs assessment and to expand the model to incorporate the components of HFA’s system. This type of partnership makes effective use of limited dollars by offering general support and information to all parents, and by supplementing this with more intensive services to families most in need.

Coordinated Services

No single prevention or intervention program can address the entire range of families’ needs. Instead, systems should be designed that link families with the various community programs and services that meet their specific needs. NCPCA’s training and technical assistance to HFA planning teams emphasizes and promotes such coordination. For example, the Cooperative Extension System of the U.S. Department of Agriculture currently trains paraprofessional home visitors to provide guidance on nutrition and household management issues. Many families are already receiving these services. To avoid wasteful duplication by creating new HFA sites or training new paraprofessionals, communities are encouraged to build on the Extension’s existing system.

Similarly, HFA sites seeking to offer parent support groups in addition to home visits are encouraged to connect with programs already well-established in their communities. For example, programs such as MELD (which has been serving families since 1973) are a source of parent support, offering peer support groups of parents helping parents. And, in addition to providing direct services to families, staff at programs such as MELD can help with ongoing training for HFA paraprofessionals.

Continuity of Care

The home-visitor services provided under the Healthy Families America banner are designed to begin intensive and to taper off as families grow more stable, more autonomous, and more responsive to their children’s needs. Since families participate in HFA for up to five years, the services are the least intensive just prior to school entry. As a result, a critical element of the HFA program is to help enroll families in Head Start or other school readiness programs. Models such as HIPPY (the Home Instruction Program for Preschool Youngsters) utilize paraprofessional home visitors to work with parents of four- or five-year-olds during the critical transition between preschool and kindergarten. NCPCA and HIPPY hope to build the HIPPY Program into one or more existing HFA sites to demonstrate how the two efforts can work together.

Finally, there are a multitude of center-based family resource and support programs, often with multiple foci, that can be important resources for families. In addition to general support, these centers offer specific services such as English as a Second Language classes, clothing exchanges, childcare, and literacy education; they are an integral part of a comprehensive array of family support services. And, these centers remain accessible to families after their participation at an HFA site ends.

How to Get Involved

The vision of Healthy Families America is to help all adults develop their capacity as parents so that their children can in turn achieve their potential. It is a vision that will only be realized if all HFA efforts are collaborative. Only through a coordinated educational and support system can we assure that families receive what they need while we secure a stronger and more stable funding base. Clearly, we have only just begun.

For further information on how you can get involved in HFA efforts in your community, please write: Healthy Families America, National Committee to Prevent Child Abuse 332 South Michigan, Suite 1600, Chicago, IL 60604.

Leslie Mitchel, M.Ed. is the Project Director of Healthy Families America at the National Committee to Prevent Child Abuse (NCPCA) and has been with the NCPCA since 1986. She received her master’s degree from the Erikson Institute for Advanced Study in Child Development.
New Mexico’s Family Development Program & The Crucial Three Steps to Parent Involvement

Parents are usually busy people and at the Family Development Program in Albuquerque, New Mexico, parents are very busy. On any given day, two or three of them can be found in each of the program’s four Escuelita Alegre preschool classrooms—teaching children, helping teachers, presenting curricular activities they have created. Others are meeting nearby to discuss program policies, interview potential staff, or plan fundraising campaigns. Parents of newborns host staff visitors in their homes, while those whose children have graduated to elementary school are setting the agenda for a PTA meeting. Some may be meeting to plan a legislative lobbying effort, a community down-with-drugs march, or a presentation for a local workshop. A few are visiting their neighbors to recruit new program participants and to provide support.

In short, on a given day, most of the parents enrolled in the Family Development Program are participating in some kind of program activity. The question asked most frequently of the staff is, “How do you get these people involved?” The answer lies in three deceptively simple principles.

Parent Ownership

Probably the primary reason that parents are committed to FDP is that it is genuinely their program. All of FDP’s projects were designed and developed by community residents, working in concert with program staff. When FDP began its work in Albuquerque’s destitute South Broadway community in 1985, local school personnel told the staff: “You’ll never get these parents to participate. Parents here really don’t care about education. They have too many problems of their own to get involved in school.”

On the surface, this seemed to be a reasonable assessment of the community. South Broadway was Albuquerque’s ghetto. Ninety-four percent of the population was minority, and 79% lived below the federal poverty level. Sixty-nine percent of South Broadway adults (over age 25) did not have high school diplomas, and their children’s achievement test scores ranged in the teens and 20s as compared with the 80s and 90s in more affluent parts of the city. Local PTAs had been dropped by the schools due to low attendance. The neighborhood’s ramshackle houses, apartments, and abandoned businesses were scarred with gang graffiti. Crack houses and drug dealers flourished, along with a pervasive attitude of resignation to the status quo.

As residents of a ghetto community, the people of South Broadway had long been the “guinea pigs” of social research projects, as well as the recipients of remedial services targeting their many documented social problems. South Broadway programs, conforming to the traditional American social service model, were founded on the beliefs that: 1) poor communities are hotbeds of risk factors (domestic violence, dysfunctional parenting, cultural deprivation) which must be individually identified and remediated; and 2) academic researchers and professional service providers are the best experts on the assessment of community needs and the development of appropriate remediation programs.

Father Gerard Pantin expressed the message sent by well-meaning social service agencies: “Whenever we “help” people by doing something for them we are telling these people explicitly or implicitly: ‘You are weak, ignorant people. You do not even know what is good for you; so we the intelligent, the powerful, will do it for you.’”

The Family Development Program, however, did not conform to the traditional model. The professional staff was committed to working with community members as equal partners in determining community needs and creating services to meet those needs. They believed that South Broadway families were the experts on the needs of their children and their community. So, the staff began by knocking on doors, asking parents what they wanted for their children.

Although many residents were suspicious of this unorthodox approach, a few young parents began to respond. By Fall, 1985, these parents were meeting with program staff to talk about their fears and aspirations for their children and how best to meet the community’s most urgent needs. Education was their greatest concern: most of the initial group blamed their own straitened circumstances on a lack of schooling, and they worried that their children would also fail in school and thus be doomed to a similar life. They decided that they wanted a preschool for the children—a school where parents could also feel at home while they learned the intricacies of the educational system. Thus FDP’s Escuelita Alegre Preschool was born.

Eight years later, the four Escuelitas, serving eighty-three- to five-year-olds each year, remain the core of the Family Development Program. The parents collaborate with the staff to develop and present the curriculum, establish policies, and manage the day-to-day routines. Over the years, families’ evaluations of their own needs have led the program to extend services to prenatal, infant, and toddler services through the Baby Amigo project; to elementary school through the My True Colors After-School project; and to parents through a range of adult education, peer support, and leadership development activities collectively termed the Family Support Project. All of these branches share common roots in the self-identified needs of South Broadway families.

Thus, the first response to the question of involvement should be parent ownership. Parents are involved in FDP because it is their program, growing from their needs.

A Focus on Strengths

In addition to the issue of ownership, traditional approaches to service delivery tend to focus attention on the negative aspects of people’s lives. One parent described her experiences in accessing income support services: “I hate getting services. I have to get up early, dress the children, and...”
walk ten blocks to get my services. I have to carry the two little ones. And then we wait for three hours. The kids are tired, and they're crying. And then, when we get in to see the caseworker, she asks me all the same questions, and she doesn't believe anything I say. And I feel so bad."

Like many South Broadway residents, this young parent spent a great deal of time and energy seeking services from a variety of unrelated agencies and programs. Each visit to each agency required a major effort and another recitation of the everyday problems and past tragedies of her life: the early pregnancy that had forced her to drop out of school, the abuse and eventual abandonment by her alcoholic husband, the lack of job skills and childcare that made employment impossible. Each repetition of the story made the problems loom larger, reinforcing her negative self-image. The more help she obtained, the more helpless she became.

FDP quickly learned the power of focusing families' attention on their strengths. Deficit-based services send the message to participants: "You are dysfunctional. Let's concentrate on your problems. If you can prove to us that you are truly incapable of fulfilling your needs, we will reward you by providing our service." Simply by inviting South Broadway parents to collaborate with professionals in needs assessment and program design, FDP was sending a very different message: "We see you as an intelligent and knowledgeable. Your expertise is equal in value to our own. Let's concentrate on all of your strengths, and use them to develop, implement, and manage a quality educational program. Working together, we can create something much better for our community than either of us could accomplish by ourselves."

As a group, the parents of South Broadway shared one very significant strength: their intense love and concern for their children. This strength became the foundation for the preschool and the other projects. On an individual level, staff members note parents' special abilities and small successes in different program contexts, and encourage them to use their skills by assigning them relevant tasks. Parents develop their strengths in the preschool classroom and parent organization. As they solve problems and implement new ideas, they begin to believe in themselves.

Focusing on strengths, like parent ownership, is a deceptively simple concept that can yield dramatic results. In the program of the program's second year, two-thirds of the parent organization members returned to school—to take English or literacy classes, obtain a GED, learn new job skills, or enroll in the state university. Parents of preschool graduates have formed and continue to lead active PTA groups in their children's elementary schools (the same schools that had informed FDP staff that South Broadway parents had no interest in education). Many parents have become activists on behalf of their community, speaking out to state legislators and city officials and forming anti-drug campaigns. They have accomplished these things because they now see themselves as strong, capable people, people with power, not as collections of problems for others to solve.

The Steps to Empowerment

The reason for establishing community ownership and building on strengths can be summed up in the overworked term, empowerment. The meaning of empowerment is implicit in FDP's mission statement: to promote opportunities for low-income families to recognize their strengths, set their own agendas, and make constructive changes in their lives. Empowerment is the primary program goal; professionals must be willing to relinquish the power that they have traditionally held in disenfranchised communities. They must slowly work themselves out of a job.

In FDP's thriving parent organization, this process recurs on an annual basis. At the beginning of each year, as new families enter the program, the staff set the rules and agendas and require that parents participate in specific ways. By the end of the year, it is the parents who run the show. This progression is the result of the staff's realization that empowerment is a process with distinct stages, and that it takes time to develop.

The first necessary step in facilitating parent empowerment is the establishment of a non-hierarchical relationship between parents and staff. The staff begins during the initial registration and orientation meetings by befriending parents and gaining their trust. The next task is to get the parents talking. The first meetings are directed by staff. Ice-breaking activities (like asking all participants to introduce the person next to them) and small discussion groups help parents feel comfortable expressing their views.

As dialogue grows, the group begins to develop an identity as a group. A common purpose and an agenda for action slowly emerge. Some parents begin to plan and carry out activities on their own initiative—small activities like bake sales for fundraising or field trips for the children, and large activities like lobbying efforts around community issues. They learn to identify needs, set goals, plan and carry out strategies, and evaluate the results of their work. The staff reverts slowly to a supportive role as the parents take on more and more.

Eventually, parents begin to apply the new skills, ideas, and self-concepts developed in the program to other areas of their lives. Through their experiences in the program they know that they are capable of carrying out complex tasks and activities, and they have developed a set of "mental tools" for planning and carrying out new initiatives. What they choose to do with these tools and experiences depends on the individual parent: they may decide to return to school, or to begin a new career, or to make their community a better place to live. What is important is that they choose to act, rather than to be acted upon.

Together, these three principles—parent ownership, a focus on strengths, and a mission of empowerment—are the most important elements not only in gaining active parental involvement, but also in promoting lasting effects within the community.

Notes


"Edith Menning is the manager and evaluator of the Family Development Program. For more information about the program contact her at: Family Development Program, Ohate Hall, Room 213, University of New Mexico, Albuquerque, NM 505/277-6943."
Please Be Brilliant!: An Alternative Way to View Staff Development and Your Organization

I have come to the conclusion that everyone in our organization is a genius and further, that almost everyone in the entire human service and education systems is a genius. This essay is a personal account of how I came to this startling conclusion and how the idea of universal brilliance has influenced the leadership of our organization.

As the leader of our organization for nearly twenty years, I have had the opportunity to watch the genius of my colleagues surface. (I use the word “surface” because neither they nor I was aware of their brilliance in the beginning). For example, when we first met, one of my colleagues was a bookkeeper working at minimum wage in our agency. The daughter of a dairy farmer, she had a high school diploma, the highest degree she holds to this day. She always claimed that she was not a creative person, even though her frequent promotions over the years gave her confidence in her managerial abilities. Today, as an associate director of our agency, she is a national leader in her area of work and currently leads the development of a national training institute. She is, I realize now, a brilliantly creative person.

Another long-time colleague was originally hired through a public employment program for an un budgeted position in public information. Today, she has written a book about family development, trained in twenty states and leads the design and implementation of several major research projects. Everyone who works with her recognizes her as brilliant.

Line staff in our agency seem brilliant to me. As I listen to them talk about solving problems with the low-income families served by our agency, I hear their genius at work. Last week one of our family-development specialists gave us a detailed look at how she worked with a family threatened by legal problems. As I listened to her tell how she had integrated her personal relationships with attorney friends, her experience as a school board member, her training in our agency, one day’s careful study of relevant legal sources, and her fiery determination to make the system work for a family in trouble, I saw—once again—genius at work.

Then there are our bookkeepers, who have been able to adjust to the computer age and who seem brilliant to me, as they work more and more in realms almost completely mysterious to me.

Our grants managers, working in an agency which has doubled in size and then doubled again, have learned how to collect and integrate mountains of data, handle dozens of complicated relationships in federal, state and local government, design and implement innovation, recruit and develop a high-performing staff—and do it all with grace and humor.

There are the geniuses of our housing program, mostly men who were blue collar workers before they joined us. Now, working in innovation teams, they have developed new knowledge in their field. They train workers in other agencies. One team is about to launch a for-profit business; another team has written a how-to book.

It seems to me that, for all practical purposes, my colleagues are so brilliant that we leaders can never quite anticipate all of their potential. In other words, our main mistake is likely to be underestimating what our colleagues can learn and do.

Leadership Implications

The first implication for leadership, once we realize that we are leading geniuses, is that hierarchical organizational relationships are completely antithetical to discovering the brilliance of our colleagues and to encour-
feel underemployéd, underrecognized, and underestimated in all hierarchical organizations—however benign they may be.

New workplace relationships are created when we realize we are leading geniuses. First we must come to every person with respect, as we would with any genius. We feel privileged to work with brilliant people—even if they haven’t realized their brilliance yet—so we come to them with a spirit of collaboration. In our agency, we call this new way of relating to each other the learning relationship. We believe that this is the highest level of relationship possible. The learning relationship is characterized by trust, open communication, honesty, enthusiasm, and reciprocity. It requires the willingness and ability to listen, desire for change and growth, commitment, ability to give and receive feedback (this one takes the heart of a lion, we find), mutual support, and love. We respect each other as fellow human beings, seekers in the world, equals differentiated by our responsibilities.

Team Leader Priorities

In our agency, learning relationships are built into work structures. Everyone in our agency is a member of a team, and every team has a team leader, trained in the facilitation of learning. Team leaders have two priorities:

1) Enter into a learning relationship with each team member. Discover the genius in each person and create endless opportunities for the expression of that genius.

2) Structure learning relationships between all of the members of the team, so that learning is maximized and so that the team is creating new knowledge as a unit. Ten brilliant people can almost always achieve more than one brilliant person.

Learning Relationships and Meaning in Our Lives

We have discovered that learning relationships inevitably lead us deeper and deeper toward the meaning of our lives. Our learning relationships help us discover our personal values and visions. Peter Senge, in his wonderful book, The Fifth Discipline: The Art and Practice of the Learning Organization, calls this pursuit of the meaning of our lives “the discipline of personal mastery.” Personal mastery, he says, is not encouraged in traditional, hierarchical organizations, but is increasingly a central theme of learning organizations:

‘Learning’ in this context does not mean acquiring more information, but expanding the ability to produce the results we truly want in life. It is lifelong generative learning. And learning organizations are not possible unless they have people at every level who are willing to practice learning.

Senge notes a profound change in the nature of work as a social institution as leaders begin to integrate their understandings of our higher aspirations for self-realization. We are moving away from the notion of the worker as an instrument of the organization, he believes, toward the view that work is sacred, a way of discovering our personal values and visions.

Shared Visions

Once the men and women of an organization become clear about their own values and visions, they can create a shared vision for their organization. Organizations with a shared vision are rare. I recently asked a group of 80 educators if any of them had ever worked in an organization whose employees had created a shared vision: None of them had.

We are currently in a process of creating a shared vision with our 160 colleagues and board members and other stakeholders. Tapping the brilliance of such a large group of geniuses has already produced the outline of a new vision, a vision so ambitious that we will need the leadership of every man and woman in our organization to pursue it.

We will need to link each individual’s personal values, vision, and learning to the values, vision, and learning of the organization. Peter Drucker understands the central role the individual’s commitment plays in the modern knowledge organization: “The individual must shoulder the burden of defining what his or her own contribution will be. We have to demand—and “demand” is the word, nothing permissive—that people think through what constitutes the greatest contribution that they can make. Then they have to make sure that contribution is accepted and understood by the people they work with and for.”

Notice that the role of leadership in Drucker’s view is to require people to think, to define their commitment, and to communicate their commitment. Drucker, of course, recognizes that people are capable of responding to those demands. When we recognize the tremendous potential of individuals to pursue their own enlightened interests at the same time that they contribute to the common good, we can make such demands of them.

Our Untapped National Resource

The leaders of our nation’s human capital development system—all of the publicly funded human service agencies and education institutions—want more resources to do the job than they have been given. But we are not likely, most of us agree, to receive substantially new investments from government in the next few years.

This dilemma may produce the creative tension we need to seek new solutions. Our society urgently needs system leaders to find ways to increase the productivity of our national investment in human capital. The millions of men and women who currently work in the system represent a great national treasure of experience, wisdom, and commitment. To the degree t are the potential of these people is locked up by the restraints and controls of the hierarchical set of relationships which characterize our system, they cannot help us develop the potential of our society.

As more and more of us in leadership recognize that we are stewards of a great national wealth—the genius of our system’s employees—we will increasingly ask our colleagues to be brilliant. And we will begin to release a new brilliance into our society.

Leaders, please, be brilliant!

References


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Databases

There are three related tools central to telecommunication technology: (1) electronic mail, (2) electronic bulletin boards, and (3) database storage and retrieval of information. This is the second in a series of articles that describes each of these tools and ways to access them at the local level and through the National Resource Center. This article focuses on databases. (See Vol. 11, Number 3, Winter '92-93 for information on e-mail and electronic bulletin boards.)

What Is a Database?

Database storage of information is a much more formal type of information system than electronic mail or electronic bulletin boards. Essentially, a database is a collection of records with the same data structure. Each record consists of a group of fields, each of which holds the same type of information for every record in the database. One database that most of us have been exposed to—at least those of us over 30—is the card catalog we used at the library when we were growing up. Each card in the catalog is a record. Every record contains the same fields, such as author, title, subject, publisher, etc. Using a computer database instead of cards in a drawer enable us to search more field headings faster and more efficiently.

Types of Databases

There are several types of databases. The most common type is a bibliographic database. It contains citations to books, periodicals, reports, and other printed material. These databases can help you find information based on a particular criterion such as author, subject, or publisher. A second type of database is the full-text database. We are seeing more of these as they begin to replace the bibliographic database. In addition to containing citations to printed material, they provide a copy of the material as one of the fields in the record, so you don’t have to find the printed copy at a library. Another useful type of database is a statistical database. In these databases the fields are for specific types of numeric information, for example, census data. A final type of database of interest to family support professionals are directories. Directory databases contain names, addresses, and other strategic information on groups of people or institutions. We will list several directory databases relevant to the family support field later in this article.

Database Searches

Why would a family support professional need to search a database? One common goal for database searches is to review the literature on a certain topic. For example, if a program is considering adding a service or preparing a grant proposal, it might be useful to search the family resources or sociology databases to find others who have offered that service and what their experience has been. Alternately, a family support professional might search the foundation database to find basic information about foundations, including names, addresses, guidelines for grant applications, and information about which foundations have funded programs for children and families. Searching a database involves using the correct language, and understanding the “grammar” or structure of the language. Family support professionals do not need to learn database search methodology. However, a basic understanding of that methodology will help you know what a database search could do for you. An experienced searcher will be able to choose “key words” that best identify the type of information being sought. They have many specialized manuals, thesauri, and on-line systems to identify the specific key words used in each database. Once these words have been selected, the database can be searched based on the physical or the logical relationship of these words. Suppose we want information on the attitudes of Latino families about college education. After selecting an appropriate database, we find that we will have to use both the terms “Latino” and “Hispanic”. We also find that we have to use the term “higher education” instead of college. We will tell the computer to look for records that have the words “Higher”, “Education” “Hispanic” and “Latino”. The words “Higher” and “Education” will have a physical relationship. If they are not immediately together, we do not want them. “Hispanic” and “Latino” have a logical relationship. If either word occurs we want the record. We can also tell the database in which field to look for the words. For example, we might tell the computer that we want the terms “Higher” and “Education” only if they are in the subject field. This will make the citations very specific. We might look for “Latino” or “Hispanic” in any field, to make sure that our search is comprehensive. The database searcher will know all of the possible relationships and the proper commands for each database.

A trained database searcher is familiar with the various available databases, their structures, and the correct search techniques for each database. Almost all college and university libraries and all but the smallest public libraries employ experienced database searching brokers are also available to help search databases; these can be found in your local Yellow Pages. Alternatively, anyone with a computer, a modem, and some inexpensive communications software has the ability to be connected with databases. The procedure is to contract with a database “library” such as Dialog or Lexis. For approximately $50, you can sign up and receive manuals, training, and a password. From there, you log-in to their computer via modem, enter your password, choose the database you’d like to search, search, and log-out. You are...
charged for the time you are connected to the database (the duration of the phone call) and for the number of records you receive; prices vary.

Resources
The following are a sample of the hundreds of databases available to family support professionals.

Family Resources
File 291 (Dialog). The Family Resources database is a bibliographic database covering psychosocial literature related to the family. It contains references from over 1,800 journals and books from 1970 to the present. It is updated every two months. FAMILY RESOURCES is available as a special service at many public, academic, and special libraries.

ERIC
File 1 (Dialog). The ERIC database is a bibliographic database covering the literature of education from more than 700 periodicals and the Educational Resources Information Centers collection of reports, monographs, and other materials. ERIC is updated monthly. ERIC indexes the FRC Report and many other FRC publications. It is widely available in all types of libraries.

Donnelley Demographics
File 575 (Dialog). The Donnelley Demographics database provides statistical data from the 1990 census as well as proprietary estimates and projections of the Donnelley Marketing Information Services. Data covers age, sex race, families, housing, education, income and other topics. It is updated annually. Donnelley is available at many public, academic and special libraries as a special service.

Foundation Grants Index
File 27 (Dialog). The Foundation Grants Index contains records describing grants awarded to nonprofit organizations by the larger private foundations of the U.S. Approximately 20,000 new grants are added each year. Updates are quarterly. Foundation Grants Index is available at many public, academic and special libraries as a special service.

LEGIS and EXEC
(LEXIS). LEGIS and EXEC are complementary databases that are available as one large full-text database. This database contains proposed federal and state legislation. It also contains notices of RFP’s, grants, and regulations from the Federal Register and the 50 states. This database is updated daily. Lexis and Nexis (the database “libraries” through which you can access LEGIS and EXEC) are more expensive to subscribe to than Dialog; they are available at a limited number of academic libraries and at many legal firms.

FRC Programs Database
(National Resource Center for Family Support Programs). The FRC Program Database is a directory database which contains information on family support and school-linked programs. For each program, it lists types of services offered and the populations served, along with other descriptive information. The database is currently being loaded with information from about 500 family support programs that have returned surveys. School-linked program surveys were sent out in June. The FRC Programs Database is available free of charge by calling the National Resource Center for Family Support Programs at the Family Resource Coalition, 312/341-0900.

Paul Deane is Director of Information Services for the National Resource Center for Family Support Programs at the Family Resource Coalition. Contact him there by writing 200 S. Michigan Ave., Suite 1520, Chicago, IL 60604, or calling 312/341-0900, or faxing 312/341-9715.
Family support in the '90s is taking on a whole new look. More and more grassroots programs are becoming the central point for integrating human services in their communities. Family support principles are being embraced by state systems and professionals who work with families in many different ways are finding each other and forming innovative collaborations.

In the midst of all this change, how can you stay on the cutting edge of what's working in family support programs across the country? What's the best way to keep up with federal and state policy initiatives which may affect your community and your program? Where can you meet other professionals who share your commitment to building more realistic, responsive services for families?

You can find it all at the Family Resource Coalition's National Conference, Joining Forces for Change: Family Support in the '90s. join us at this conference, and you'll find opportunities for skill building, networking, and inspiration.

This is the only national conference which brings together leading family support practitioners, policymakers, and scholars to share the latest in family support, and it only happens once every two years. Don't miss this chance to join forces with hundreds of your colleagues as we chart the course for meaningful change.

Mark your calendar and plan your budget now for May 4-7, 1994 in Chicago. Watch for more details in the mail.