

Family Resource, Support, and Parent Education Programs: The Power of a Preventive Approach

The Policy Institute for Family Impact Seminars



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Family Resource, Support, and Parent Education Programs: The Power of a Preventive Approach

Background Briefing Report

by Jana Staton, Theodora Ooms, and Todd Owen

and highlights of the Seminar held on October 25, 1991,
at the Rayburn House Office Building, Room 2261, Washington, DC

- Panelists:**
- | | |
|------------------------------|---|
| Barbara Gimperling | Parent Founder and Executive Director, Parents and Children Together (PACT), MD |
| Rosalie Streett | Former Founder/Director, Friends of the Family, MD, and Director, Parent Action |
| Douglas Powell, Ph.D. | Head of the Department of Child Development and Family Studies, Purdue University, IN |
| Lois Engstrom | Supervisor of Family and Adult Education, Minnesota Department of Education |
- Moderator:** **Theodora Ooms** Director, Family Impact Seminar

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Highlights of the Seminar

Held on October 25, 1991 in the Rayburn House Office Building, Room 2261

In her introductory remarks **Theodora Ooms**, the moderator, pointed out that a new federal program was authorized last year to establish a National Resource Center for Family Support Programs and provide grants for demonstration programs, but many remain unclear about what family support programs are. Thus, she explained, the panelists at the seminar would clarify why family support programs are needed, who benefits from them, and what services they provide.

Barbara Gimperling, the first panelist, is parent founder and executive director of Parents and Children Together (PACT) in Crofton, Maryland. Gimperling began by contrasting the realities families face today with the situation she and many of her peers experienced growing up in which they were surrounded by extended family. The only child care they had was provided by family members. But more important than child care was the sharing of ideas and particular methods of parenting within the family. Society today is more mobile and these informal sources of information and support are no longer there to help parents. To prove her point she asked for a show of hands from those in the audience whose parents or extended family were living within a half-hour of them. [Only six (out of over 100) raised their hands.] This increased residential mobility and breakdown of stable neighborhoods in part explains the tremendous growth of the family support program movement over the last ten years.

Another reason for their growth, Gimperling added, is the programs' role in addressing the widening information gap. In the past twenty years there has been a tremendous amount of valuable research-based information about child development and parenting which has not reached parents. Family support centers can be the organization that bridges the information gap. An example is the studies providing evidence of the temperamental differences of infants. "When our center staff talk about the implications of this research with parents, I see major (positive) changes occurring in the families, just from this one bit of information," she said.

Gimperling said that there are many family support programs around the country and they differ a good deal from each other. But by sharing the story of the program she directs she hoped to give a flavor of what they were like.

While at a community meeting in 1980, Gimperling met a young mother who had just moved to the area and was feeling isolated and disconnected. She was having problems in her family because she wasn't getting the support she was used to. The two women decided to start a parent group that would meet weekly to discuss parenting issues. The response was overwhelming. "We quickly had a waiting list and had to start more groups. We had obviously touched a nerve—there were many others who felt just as isolated. It soon became evident that there was a need for more groups to meet the demand in the community."

In 1985 PACT was incorporated as a non-profit organization. The program offers parenting groups, parent-child activities, and most importantly, connections to other needed services in the area. Participation increased 100% in each of the first four years. They invited Dr. Barry Brazelton to talk about stresses on families and 900 parents showed up! They now have a second program located in Annapolis, and there is interest in opening a third in the southern, rural area of the county.

PACT serves 200-300 families a year. Because families tend to stay involved over a period of time, Gimperling said they really get to know their families, in contrast with other systems in which a professional sees only a part of the family infrequently, for a short period of time. PACT is funded through United Way, private contributions, and through parent participation fees. There is a tremendous volunteer commitment—almost 80% of the budget comes from volunteer support, pro bono services, etc. Low-income families can participate in exchange for volunteer time. No one is ever turned away.

Gimperling said that there are two critically important components that have made PACT so successful.

1. PACT is community-based. There is no one right model. They do not use cookie-cutter curricula. The programs are designed with the parents in the immediate area and are based on their needs, strengths, and interests and each one is different.
2. PACT focuses on family strengths and considers parents as partners in the programs. Gimperling noted that anyone can trot out a litany of family problems but it is much harder for most of us to identify **family strengths**. PACT has many parents call up listing all their problems and sources of stress. One of the first things PACT does is to explore with them what they are doing right, and then to build on the strengths they have.

Gimperling proceeded to list the strengths of strong families (built upon research). These include: commitment to the well-being of the family, good communication, spending time together, clear expectations and values, flexibility and adaptability, variety of coping strategies, and the ability to see the positives and the humor in a situation. Gimperling said it was important to note that none of these qualities are based on income.

In her experience, Gimperling added, unless they are in a crisis parents tend to stay away from programs which focus on problems or that have a rescue mentality and tell the parent “how to fix” what is wrong with the family. In this type of program the helper is in a powerful position and the parent is in a helpless position. Focusing on strengths, by contrast, helps to empower parents. Parent empowerment “is a process that enables parents to take action on their own behalf to get their needs and the needs of their family met.” While empowerment by definition comes from within, many family resource programs can, and do, facilitate parent empowerment Gimperling said.

As mentioned, family support programs are used by a wide variety of families in many different kinds of neighborhoods. But all these programs have some common characteristics.

- The belief that all families need support at some time. (This reduces stigmas, separateness, and isolation that happens when we put people in categories that come from deficit models.)
- Staff in programs recognize the strengths in parents and families and facilitate opportunities for parents to use their strengths.
- Parents are seen as partners. Parent input and feedback is built into every aspect of the program.
- Mutual respect between parents and program staff. The staff listen to parents and use non-judgmental feedback.

- A caring atmosphere which is shown by fitting a program to the people.
- Valuing diversity through encouraging the sharing of different ways parents handle similar issues.

Gimperling concluded by saying, “to strengthen families, public policy needs to support the development of community-based family resource centers throughout our country. Just as there is a public library in every community, there needs to be a family support program in every community.”

The second panelist, **Rosalie Streett**, who until October 1991 was founder and executive director of Maryland’s statewide family support programs, Friends of the Family, is now executive director of Parent Action. (Ooms explained that fortunately Streett was able to come at the last minute to take the place of Bernice Weissbourd, president of the Family Resource Coalition who was unable to be on the panel due to illness.)

Streett opened with a Chinese proverb which says that “‘if you don’t change your direction you will end up where you are headed.’ Family support is a new direction. We have all been very critical about where we’ve been going. Something had to change.”

Historically, family support is the outgrowth of the effective work of the settlement houses, Head Start, and the self-help groups that popped up in the 1960s. It is also an outgrowth of concern about the fact that we have been delivering traditional services to non-traditional families. Many feel that family support is a refreshing, respectful, and effective way to work with families while allowing them to empower themselves. “We can’t empower families,” Streett noted. “Families can only empower themselves.” Family support also works to help assure the healthy growth and development of children from very early stages.

Family support is appropriate for rich, middle class, and poor families. In Maryland, the state supported family support centers target poor families. Centers are developed in cooperation with the community, community agencies, and with participants themselves. Streett emphasized that the family support language is very different from standard programs: “recipients receive, participants participate.” Parents participate in policy decisions and a real partnership is established, which may sound quite radical. The programs are open during hours the people want them open and when they can get to them. They offer services that the participants planned, want, and need. They all focus on child development in an effort to combat abuse, neglect, and poor health and nutrition.

Streett continued that another hallmark of family support programs is their relationship with the families; the mutuality, partnership, and respect. No one is called a “case.” “When you start thinking of people as ‘cases’ you stop thinking of people as people,” Streett said. She then referred to a handout that listed the key principles of family support programs and strongly emphasized the fact that they were preventive in nature. Streett noted that the National Commission on Children made a very strong recommendation in its report that family support programs be expanded throughout the country.

Some question whether family support works or not, “unquestionably these programs work,” responded Streett. She pointed to several kinds of evidence. First, last November Maryland surveyed everyone participating in the family support centers programs for the first time. Ten months later 77% were still participating. This is unusual—this is a very impoverished population, and the program is all voluntary. Second, keeping families together—family preservation—is very a important goal of the centers. Streett noted that in five years Maryland’s family support programs have had only six children removed from their families. The centers also serve as a bridge to other services for families.

Third, the Maryland centers have made a special effort to focus on teenage and other young mothers. As a result, the Family Support Centers are experiencing a repeat teen birth rate (7-8%) that is about half of what one would expect in a similar population.

Streett then moved on to talk about Maryland's state supported network of family support programs which had recently won an Innovations in State and Local Government Award from Harvard University and the Ford Foundation. (There were 1,900 applications for ten awards.)

Maryland uses an intermediary, Friends of the Family, so that it isn't a totally public program. The state funds 56% and the rest comes from other public sources, foundations, corporations, and private contributions. There are thirteen centers around the state. Streett noted that they were the only human service program that hasn't had its budget cut during the state's recent budget crisis. Why? She believed the reason was that the Governor and the legislature recognize the importance and effectiveness of family support for families.

In Maryland each center offers on-site, temporary, drop-in child care for children three years old or younger while parents are on site. A Head Start bus picks up the four year olds at the center. A child development specialist is on staff at each center and each child is brought in with the parents for an assessment and early intervention services if they are needed. This allows the centers to be totally linked with programs funded by P.L. 99-457. They teach child development to parents in all kinds of ways—they even have non-competitive Baby Olympics!

All of the centers have some limited kinds of adult education and employability services are offered on site. They have a capacity for home-visiting, through funds from Children's Mental Health, to provide outreach to more isolated families. Transportation is offered to help parents get to the services they need. The centers offer both formal and informal parent education, as well as many parent-child activities.

Friends of the Family is also a grantee of DHHS and has two Comprehensive Child Development Program (CCDP) Grants. These are really the "ultimate" family support programs, according to Streett. The CCDP is a well-funded and carefully monitored program and should provide some interesting data on what can be accomplished and how families can help themselves (see Hubbell et al., 1991).

Streett concluded by addressing her reasons for leaving the "most perfect job in America" to become executive director of **Parent Action**. She said she realized that there is another job to be done. "We need to get together as a force to start taking care of ourselves and our communities. Parent Action is a new national membership organization founded by Dr. Barry Brazelton, Bernice Weissbourd, and Susan DeConcini. It aims to mobilize parents to take action on behalf of their own family and all families to ensure that our country's services support and strengthen families. We hope to become to parents what AARP is to the elderly," concluded Streett.

Douglas Powell, the third panelist, is head of the Department of Child and Family Studies at Purdue University, and is both a hard-nosed researcher and an advocate of these programs said Ooms in her introduction. Powell began by outlining some of the history and evolution of parent education and family support programs. The field of parent education has changed in scope and practice a great deal over the past 30 years and has become blended into the family support movement.

Parent education has a long and rich history and strong set of traditions going back into the late nineteenth century. However, until the late 1960s, parent education tended to be provided in a didactic, lecture format, largely to a middle class audience. As it began to reach out to low-income families and parents of color the educators began to realize these traditional methods and curricula didn't work. Moreover, even some middle class populations began to lose interest in traditional lecture formats.

Over the next twenty years the evolution of the field centered around three trends. First, the program's scope broadened from a focus on the parent-child relationship to include the social context of parenthood—parents needing access to health, social services, and employment. The whole issue of parents' need for social support became central.

Second, there was a realignment of the power balance between program staff and families. The relationship shifted from that of an authoritarian (expert, paternalistic) relationship to one of collaboration. This shift in philosophy is reflected in the federal early intervention legislation, Part H and its Individual Family Services Plan.

Third, parent education programs increasingly responded to the diversity of family circumstances. This diversity made it difficult and inappropriate to replicate a single program model. New models, incorporating these trends have been developed and include Head Start, the Child Care Development Programs, and the family literacy programs. Currently, the broad field of family resource, support, and education programs includes all these diverse models.

Donning his research hat, Powell then addressed the question of what we can say about the results of research and evaluation of these programs? What do we know about their effectiveness?

The first thing to note, he said, is that the strongest evidence we have of their positive effect comes from an earlier generation of programs (such as the Parent Child Development Centers, the Mother-Child Home Program, and many of the parent-focused programs represented in the Consortium for Longitudinal Studies) which do not really resemble those in the field today. Nevertheless, these flagship studies did indicate that comprehensive, long-term programs focusing on child development and parent education and involvement can have strong, positive effects on parent and child outcomes. Another important fact to note is that most of these studies were conducted on a low-income, black population and thus, are not generalizable to the population as a whole.

There is no doubt that we now need to construct a new data base and carefully evaluate these new programs. However, recognizing their diversity, we should not attempt to make simplistic comparisons across programs. The kinds of studies we need to do now must ask: What types of program strategies work with what kinds of families under what circumstances?

The fourth panelist, **Lois Engstrom**, talked about the statewide parent education program in Minnesota, of which she is the coordinator—the Early Childhood and Family Education program (ECFE). Engstrom noted her support of many of the major themes outlined by the previous panelists. The goal of all parent education and family support programs is “to strengthen families by enhancing parents’ ability to provide the best possible learning environment for their children.”

In Minnesota, she said, “we believe that the need is so universal that we must target the entire population of children ages 0-5. Early in the development of the program, we realized that we couldn’t just focus on helping the child. That would do no good if we kept sending the child back to the same environment s/he came from when that environment, for a whole host of reasons, does not support the child’s learning and development. Thus, we reached out to the parents.”

The programs offer a great diversity of services in a wide variety of sites. Parents generally come for a combination of parent discussion groups and parent-child interaction activities. With more stable funding the program staff are now able to do more outreach to special populations. Thus, although the program is universal, special strategies are used to serve parents in special need. A major strength of the Minnesota ECFE program is its long history of support from the top and the bottom—from the very top echelons of the legislature and Department of Education and from the grassroots in communities throughout the state. This broad support is reflected in its funding. The program began in 1975 with funding for six pilot programs from the Department of Education’s Council on Quality Education. These gradually expanded in number until 1984 when the Legislature approved a funding formula and the program went statewide.

Although percentages vary according to the local tax base, collectively, 40% of programs' funding is from state aids and 60% from local tax levies. There are no federal dollars except for grants acquired by individual communities for specific purposes. The program is now offered in nearly 100% of the school districts. The program currently reaches over one-third of all eligible children and their parents in the state.

The ECFE program has recently implemented a substantial, multi-tiered evaluation. Engstrom summarized the initial findings of a short-term parent outcome study based on interviews with parents upon entering the program and then a year later. They found:

- An improved sense of support from other parents.
- Increased sense of confidence and self esteem as a parent.
- Increased understanding of child development.
- Changed expectations and perceptions.
- Actual changes in parent behavior.

Engstrom closed by saying that she felt our society was paying an extreme price, in both human and financial costs, for not investing in prevention programs such as these.

Points Raised During Discussion

- Before the discussion began **Mary Elena Orrego**, who was in the audience, was asked to briefly describe the **Family Place**. The Family Place is a family support program in Washington, DC which she directs. Orrego said Family Place was founded in 1981 in the Adams Morgan community, an ethnically diverse community with a large Hispanic immigrant population which has no access to entitlement programs. Their work has focused on helping newly arrived Central Americans and becoming, for them, “a home away from home, a community of support.” They have an early intervention program which follows families from pregnancy until the child is three. There is a 3.3% low birth weight rate among program participants as opposed to the District’s rate of 14%. They are currently planning to establish a second center in the predominantly African American Shaw community. The program is funded entirely from private sources to date.
- A participant noted that from his own experience, “parenting young kids was a breeze, but even if you have a successful early experience as a parent you can also have great stress later on. Were similar family support programs being offered to parents of older children?”

In response, both **Streett** and **Engstrom** agreed that parents of teenagers also need information and support. Indeed, in response to pressures from parents, many parent education programs and family support programs are beginning to extend their services to the parents of older elementary and high school students. Parents have noted that they especially needed help at transition stages such as entry to junior high and senior high.

Powell remarked that this trend presents us with a challenge: if we see the value of a continuum, “life-span” approach to parenting then we have to adjust our rhetoric about “inoculation,” that is the belief that intensive intervention in early childhood is **all** that is necessary.

- The next questioner opened up the discussion of the federal role. He pointed out that President Bush would look at the family support movement and say that it proves his point about the limitations of the federal role since it has basically grown and flourished solely through local and state initiative funding. What then is the rationale for federal support?

Streett first referred to the enactment in 1990 of a program authorizing federal grants to family resource and support centers and noted that it had not yet received any appropriations. She then said she sees a clear role for federal dollars. What they have achieved so far without federal dollars, in Maryland for example, meets only a fraction of the need. Any federal funds, however, should be provided in a manner that would permit the programs to remain diverse, flexible, and non-bureaucratic.

Engstrom said they had been lucky in Minnesota to have the level of state investment they have received. Other states are not so lucky. A strong argument for federal support is to help communities mount family support programs to meet the needs of special populations, such as in St. Paul where there is a disproportionate number of South East Asian refugee families and very intensive programs such as family literacy are needed. St. Paul isn’t wealthy enough to do that with local resources. Federal support is important to get some equity around the country.

Gimperling added that while parent volunteering has been a hallmark of these programs, in the neediest communities parents are not available to volunteer and be strong advocates.

- Another participant raised a question about the relationship between family support programs and child care and Head Start programs where the providers see parents every day. She asked what this relationship is and what it should be?

Each panelist agreed that this was an important issue. Some programs have worked out solid, collaborative relationships with Head Start and other child care programs but in general this issue needs much more attention.

- The next question, from a father of three children under five, focused on the goals of Parent Action. How can you get parents broadly involved in the politics of parents? He found the analogy to AARP interesting but thought that the aging were well mobilized around the central issue of social security, a universal benefit affecting everyone. What kind of similar hook or benefit, in the policy sense, would draw the interest of parents into the political arena?

Streett said she was enormously encouraged by the breadth of support Friends of the Family had received in only five short years. She was optimistic but didn't yet know the answer to his question. However, we do know what the problem is. She cited the fact that most parents who face being late for work due to a baby sitter problem are still more likely to call in and claim a "flat tire" as the excuse for their lateness. Streett then asked, "why is the most important thing to you (your family) not as important to your employer as is your car?" Our families and children are common interests which are not valued by the government, workplace, or community.

- An official from the Navy pointed out that the Navy has 75 family service centers around the world, some of which have been in existence for 10 or 12 years. He then commented that one of the missing ingredients in the family resource movement may be the recognition of the need to work to strengthen the marriage relationship or the relationship between non-married parents. We do little to strengthen couples' relationships. A child's well-being depends a great deal on the quality of the relationship between the parents, and there is very little focus on this in the family support movement.

A discussion following this point focused a lot on the importance of getting fathers to participate in these programs and successful strategies for doing so. Engstrom said that they realized that if only one parent participated and returned home claiming to be the "expert" on raising the children, this could exacerbate marital conflict. They had found some success in running fathers groups, led by fathers. They also work through businesses and have working parent resource centers in downtown areas. Sometimes fathers will stop in during lunch and then they may come to other sites with their children. She acknowledged that it is much more difficult to bring in fathers.

The Fatherhood Project (James Levine, director) at the Families and Work Institute in New York City was mentioned as a useful resource. It is documenting good practices in family support and early childhood programs with male involvement. They are looking particularly at the differences in cultural styles involving men.

Other questions addressed the need for more evaluation, involving the participants themselves in evaluation, and examining the issue of how programs can become more culturally sensitive.

Family Resource, Support, and Parent Education Programs: The Power of a Preventive Approach

A Background Briefing Report

by Jana Staton, Theodora Ooms, and Todd Owen

Introduction

(Sources: Bruner & Carter, 1991; Farrow et al., 1990; Powell, 1990; Weiss & Halpern, 1991)

Family resource, support, and education programs are proliferating across the nation. Initially established as small, community-based demonstration programs, often grassroots in origin, they are growing in number, size, and complexity. In several states these programs are now being replicated statewide and are receiving substantial state financial support. Collectively, they are assuming the shape of a social and programmatic movement in its early, formative stage of development.

In many ways the programs are very different from one another but they share in common certain core concepts and assumptions which have broad appeal across the political spectrum. In their emphasis on helping parents fulfill their responsibilities they appeal to those who are concerned that traditional social programs take over too much from families and foster family dependency and irresponsibility. The programs' unique blend of flexible, non-categorical services appeals to those concerned that the present system of categorical, fragmented, crisis-oriented, services fail to meet families' needs for basic ongoing information and support. The programs' focus on helping parents promote child development, especially in families from disadvantaged backgrounds, underscores the first of the President's new educational goals for the year 2000, namely that "All children in America will start school ready to learn" (US Department of Education, 1991, p. 19). Lastly, the family resource, support, and education programs' emphasis on prevention and timely early intervention is applauded by those who hope to curtail rising program costs incurred by serious family dysfunction and breakdown. The bipartisan National Commission on Children recommended in its final report that:

...federal, state, and local governments, in partnership with private community organizations, develop and expand community-based family support programs to provide parents with the knowledge, skills, and support they need to raise their children (NCC, 1991, p. 277).

Family support is taking on the aura of becoming a "motherhood and apple pie" issue. Yet, in many states and communities, these programs are patched together with unstable sources of funding. They are often isolated and are not well known, nor are they generally coordinated with, or integrated into, the existing service systems. Nevertheless, a small but growing number of states have made a serious funding commitment to supporting statewide programs. The federal government, which funded much of the research driving this movement, is now beginning to take note and consider what an appropriate federal role should be.

For all the support and good will these programs are calling forth, there remains a good deal of confusion about what the terms "family support" and "parent education" mean and why they need policymakers'

support. This background briefing report aims to provide answers to the following questions:

- What are family resource, support, and education programs? How do they differ from other kinds of services to families?
- Why are these programs needed? What are their goals? Whom do they serve?
- What services do they offer that are not currently being provided? Who is providing them and in what kinds of settings? How are they funded?
- What do we know about the effects of family support programs? How well do they achieve their goals?
- What degree of interest and support are these programs receiving from state and federal policymakers? What kinds of support are needed from government in the future?

Definitions. One reason for the confusion about these programs is that the term “family support” is used in several different ways. Most commonly it refers to the growing number of community-based family resource, support, and education programs serving families with young children. It is these programs that are the subject of this report. However, “family support” is also used to refer to a set of broad guiding principles for policy and services reform. Fueled in part by the family support program movement, but also by several other family-centered trends, family support goals and principles are being espoused broadly by a growing number of policymakers and program administrators. As a result, these principles are being applied at local, state, and federal levels to help reform child welfare and children’s mental health services, in federal welfare reform legislation, the Family Support Act, and federal policy towards children with special health care needs in the Part H, handicapped education legislation (see Ooms & Owen, September and December, 1991).

Third, “family supports” is also the term often given in the policy arena to a set of public and private sector work-related policies, such as parental leave, child care benefits, part-time work and flexible job schedules provided to young working families to help them balance their work and family responsibilities.

Finally, the term “family support” has become firmly embedded in the service literature on adults with developmental disabilities and to some extent in the area of aging services. In both fields there are growing efforts to provide information, resources, and supports to relatives of the disabled adult or frail elderly to help sustain and relieve family caregiving. For example, 39 states now have family support initiatives for persons with developmental disabilities, spurred in part by the passage of the Developmental Disabilities Assistance and Bill of Rights Act of 1987 (see Dunst, et al., 1991).

Family Resource, Support, and Education programs (FRSEPs). In the growing body of writing on this subject different authors choose to include a somewhat different set of programs under the umbrella of family resource, support, and education programs. However, the field is developing fast and distinctions that once made sense are rapidly disappearing. More and more, in the literature and the field, the umbrella term “family support” is used to include various types of support, education, and family literacy activities that share many of the same goals and basic assumptions.

This background briefing report describes the wide array of programs that are generally agreed to fall under the umbrella term of family resource, support, and education programs (henceforth, FRSEPs). Although there is growing awareness that such programs are needed by parents of children of all ages, in this report we concentrate on those programs that aim to serve families with young children. This is because it is from the early childhood field that the major impetus and stimulus for FRSEPs originated and has largely concentrated to date.

The report begins with a general discussion of the needs of parents of young children today, highlighting those not met by traditional services and that are being responded to by FRSEPs. Several typologies of FRSEPs have been developed to date. Building on these we present our own version in this report to help the policy-oriented reader understand this extremely diverse set of programs. We have chosen to group the programs into three categories: (i) family resource and support programs, (ii) parent education programs, and (iii) family literacy programs. In the policy arena these three streams have somewhat distinctive theoretical and programmatic origins, and obtain their financial support from somewhat different funding streams. However all typologies are somewhat arbitrary. In current reality, especially at the local service delivery level, each program stream is evolving rapidly and adding new dimensions of activity so that distinctions that once made some sense are now much less important.

After describing the evolution of each of these three categories, including illustrative program vignettes, the report addresses the important but often neglected issues of staff training and program evaluation. We then identify and discuss several key, cross-cutting issues which pose challenges and dilemmas for program design, implementation, and policy development. We summarize several statewide FRSEP programs and a small number of important initiatives at the federal level. Finally, we close with a listing of national organizational resources and selected references.

I. Parents' Needs and Programs' Response

What Do Parents Today Need?

(Sources: Rapoport & Strelitz, 1977; Coleman, 1987 and 1991; Hareven, 1982)

In order to raise their children all parents need emotional support and practical help. They also need specific information, advice, and feedback about child health and development, basic child rearing practices, and information about where to go for special kinds of assistance when crises or problems occur. Parents usually get this help from various informal sources—relatives, other parents, neighbors, friends, and neighborhood-based organizations. Less often they seek help from more formal sources such as health care professionals, educators, and social workers.

Parents' need for support and information cuts across socioeconomic and educational lines. Some groups of parents are especially in need of strong support systems, for example, immigrant parents, single parents, parents of children born with severe disabilities, teenage parents, and very poor parents, especially those living in dangerous and socially disorganized neighborhoods. These are the families that are most often the direct concern of policymakers.

There is a growing perception that parents are having a much more difficult time nowadays getting the help they need from both informal and formal sources. It is also true that for a variety of reasons their needs for help and support have escalated, changed in nature, and become more intense in recent decades.

Growing unavailability of sources of informal social support. One of the major explanations of the recent dramatic growth of family support and education programs is that they reflect a grassroots effort to reconstitute access to the informal networks and social resources which all families need but have become so much less available in many communities. Traditionally, family support and education was provided through extended families and informal networks of friends, other older parents in the neighborhood, village elders, and churches. In the American tradition, when immigrant families came to America in such large numbers a century ago and were overwhelmed and isolated, the acclaimed settlement houses were started to provide, in part, what we now call family support and education.

While many families still find informal systems of assistance available to them, a growing number of families no longer have access to these systems, and are left feeling isolated and uncertain. Several social, economic, and demographic changes—increased mobility, more families with both parents working outside the home, more single-parent households, and smaller families—have increased the stress on families while at the same time reduced the level of support traditionally available. At both the neighborhood and societal level there seems to be a diminishing sense of collective responsibility for other people's children.

The guiding assumption of the family support movement—the universality of need for social support—is underscored by the recent analysis of the loss of “social capital” in modern industrialized society offered by James Coleman in recent articles (1987, 1991). He argues that widespread social changes in industrialized cultures have the cumulative effect of removing the traditional social supports necessary for children's healthy development. He calls this a net loss of the “social capital” which children must draw on in order to become adults—the physical availability of parents and other caretakers who are competent members of the culture and can instill in a child the functional activities, motivations, values, and belief systems each child needs to become a competent adult. Family support programs can be viewed then as an attempt to help parents and communities restore the “social capital” which Coleman identified as so critical to children's educational achievement.

Increased knowledge, confusions, and expectations of parenthood. Several contradictory trends in recent decades are making parenthood a much more difficult profession to perform well, or even adequately. On the one hand, there is a wealth of new research on children, child development, and parenting. Parenting is no longer primarily an intuitive job, many aspects must now be learned. Whereas this development should be regarded as a valuable new resource, too often parents are bewildered by all the information available to them. They realize that they can no longer simply repeat the patterns of their parents' generation. There are few resources available to synthesize, translate, and broker this new information in a way that makes it available for parents to make use of constructively. And, to make it even more confusing, collectively, the experts have changed their minds over time and often disagree with each other about desirable child rearing practices.

This growing body of expertise, as translated through the media and through their contacts with various professionals, now sets higher standards for parenting. Yet, paradoxically, many parents nowadays spend less time with their children. Increasingly, they share much of the job of raising preschool children with others. Moreover, societal values are changing so rapidly that parents are often left very confused about what values to impart to their children, especially their adolescents. Finally, the role of parents is given little recognition and often devalued, especially now that so many mothers have entered the workplace.

The combined result of these trends is that parents too often are made to feel inadequate, guilty, and incompetent.

Failure of the formal support systems to meet parents' needs. The existing categorical, formal service system is well acknowledged to be highly fragmented and crisis-oriented. The systems are implicitly or explicitly designed to limit access, serving only those individuals who meet certain eligibility requirements, and often for quite limited time periods. They are characterized by many bureaucratic barriers which again create access difficulties and discourage effective use. Due to their categorical focus, their emphasis is on diagnosing and treating specific types of dysfunction and they are not able to provide services that meet a range of interconnected needs. Services are usually not available until the problem is quite severe and the services need to be intensive and often institutionally based. Services that provide basic information and education or the types of community-based support that can often prevent a crisis or family breakdown are generally not available.

These existing service systems have come under severe criticism as they have clearly failed to respond to families' and children's needs, as evidenced by the rising rates of children entering the foster care system and other institutional care, high rates of adolescent childbearing, drug use, and so forth. The FRSEPs have evolved to address many of these gaps and inadequacies in existing services.

Needs of poor families. In the FRSEP literature there is increasing discussion about the growing numbers of young families in economic distress and their needs for economic support (see especially Weiss Halpern, 1991). Community-based programs can do little to alleviate the underlying economic and structural conditions that contribute to the rising rates of family poverty. Moreover, poor families are increasingly encountering in their neighborhoods a number of new sources of serious environmental stress such as drugs, violence, etc. However, in many of the FRSEPs which primarily serve poor families, much of the staff effort is involved in helping to empower families to cope with these various dimensions of economic and environmental stress.

How Do Family Resource, Support, and Education Programs Meet These Needs?

(Sources: Farrow, et al., 1990; Goodson, et al., 1991; Kagan et al., 1987; Weiss & Halpern, 1991).

Currently, the core, distinctive characteristics of effective FRSEPs are the following.

- They provide the chief elements of social support—information, guidance, feedback, practical assistance, and emotional and peer support.
- Services are provided without stringent eligibility requirements and elaborate intake procedures.
- They focus not on problems but on enhancing child development and reinforcing family competence and strengths.
- Programs share a strong orientation towards prevention rather than remediation or treatment.
- They may provide support to young families over a sustained period of time, or on and off for a number of years.
- They are usually easily available, often on a drop-in basis, and provide an informal, comfortable setting. Often program staff come to parents in their own homes.
- Programs are community-based and tailored to respond to the culture(s) of the families living in that community. Program staff consciously strive to respect parents' own preferences, values, and attitudes. This is especially true for families from a cultural, and/or linguistic, minority background.
- They involve other parents in determining the design of the program and in helping provide some of the services.
- Programs' principal methods to help parents include group activities for parents at the center, home visits, and activities involving parents and children together.
- Participation in these programs is nearly always voluntary.
- The program staff do not relate to the parent from a hierarchical, expert stance but rather seek to work with parents in partnership. They function as consultants to parents who determine their own needs. They aim to enable and empower parents to keep, or reassume, control of their own life and find their own solutions to problems.

Services with these characteristics are virtually unavailable from the formal service system, even for those with the ability to pay for them. For many parents, such services may be all the help they need to do a good job of raising their children. For them FRSEPs are a very valuable complement and supplement to existing services.

Other families, however, will need additional services, which the FRSEP cannot provide directly but can help steer them to. This is especially true for poor families who face constant struggles to get sufficient income, access to housing, health care, and so forth. Although a few family support programs do offer a variety of intensive services, more and more FRSEPs function as **gatekeepers**, or a **single point of entry** helping parents find access to more specialized services provided by the formal, categorical system of publicly funded services.

Different Roots, Common Assumptions, Converging Practice

(Sources: Bruner & Carter, 1991; Laosa & Sigel, eds., 1982; Powell, 1989; Weissbourd, 1987)

As noted a highly diverse set of programs has grown up in the past 10-15 years to respond to these trends and meet the needs of families with infants and preschool children for information and support on various aspects of parenting and family life. From a policy perspective, these programs can be categorized into three broad streams: **family resource and support** programs, **parent education** programs which are increasingly sponsored by local school systems, and a newer, smaller group of **family literacy** programs. This categorization is somewhat artificial in practice but it may be useful conceptually. The distinctive philosophical roots of the three program streams are as follows.

Family resource and support programs primarily offer a network of social support and information for young families based in their community. Providing parents with information on child development is one component of these programs but they are less sharply focused on affecting child development outcomes. Family support programs are concerned with strengthening families in a more systemic, ecological way. They provide families with assistance in meeting a range of family needs as each family may define them, based on the general premise that a healthy, functioning, stable family is essential for a child's long-term emotional, social, and academic success in the world. These programs are usually free-standing, based in the community. The statewide programs, generally, are sponsored and partially funded by human resources and social services agencies. Although, philosophically, family support programs believe that all families need the kinds of services they provide, they are, for various historical and administrative reasons, more likely to be targeted, at least initially, on populations with special needs.

Parent education programs are most often focused on teaching or sharing with parents the information and skills they need to promote the child's cognitive, language, and socio-emotional development. They believe that assisting parents in the early childhood years will help ensure children's readiness for school and, thereby, later school success. They are usually universal in eligibility. Statewide programs are sponsored and partly funded by state education agencies.

Family literacy programs, which have sprung up more recently and are still small in number, are primarily interested in improving the literacy and related development and well-being of **both** parent(s) and child(ren). They are based on the premise that the cycle of illiteracy can be broken if two generations are helped at the same time. They target their efforts on families in which both adults and children are having difficulty with practicing reading and arithmetic skills in the English language (they may be literate in another language). Their sponsorship is often connected with adult literacy and employment and training efforts.

Underlying common assumptions. Although they have many differences, it is important to underscore some of the underlying premises that are shared by all these programs.

- The first is that all families need information and social support, but not all families need the same level of support.
- The first few years of a child's life are of critical importance in later intellectual achievement and social development.
- Parents constitute, by far, the most important influence on a young child's life and when parents are stressed it undermines their capacity to protect, nurture, and guide their children.

- Most parents can and want to help their children develop into responsible, competent adults.
- Parents go through stages of adult development and especially need support at critical transition stages, such as the birth of a child.
- Parents' sense of self-esteem and competence has a major influence on the development and well-being of their children.
- Deliberately engineered social support which these programs represent, when provided at this critical stage of early family formation, can buffer the child and family from some of the negative effects of isolation, anxiety, and being overwhelmed, which can exist in all families but are especially common in the lives of very poor families (Weiss and Halpern, 1990). These programs can both improve the interaction between parents and the child and help parents deal more effectively with their environment.
- Providing young families with education, resources, and support is the best approach to strengthening families and preventing serious child and family problems.

Converging practice. At this point in time, what is most striking about these three program strands is that they appear to be converging in terms of the actual services and activities they provide. In each category, the more effective programs are beginning to overlap with the other categories through expanding their services in new directions as they respond to the actual needs of families with whom they work. Programs from all three streams are not only intermingling their service components, but have moved toward a focus on the larger social environment of the family and assisting families to change their relationship with the social system or community. Increasingly, especially when targeting low-income and immigrant families, they focus on helping parents themselves with schooling or getting jobs.

Programs vary a great deal in the intensity of services provided, ranging from a two hour a week core program provided by the Minnesota Early Childhood and Family Education program to the full day, three day a week program of Kentucky's family literacy and support, PACE program.

The various programs that fall under the broad FRSEP umbrella practice a wide array of service strategies to achieve their two basic goals of strengthening families and preventing child and family-related problems. Some question whether these two goals are necessarily linked. They point out that the absence of family problems does not necessarily mean the presence of positive parental or "strong" family functioning. Indeed, the absence of problems is not documented in research as one of the characteristics of successful families (Dunst, et al., 1990). All families have problems at some point in time, the important issue is how well they are able to cope with them, whether they know when and where to go for help, and know how to use help appropriately. A family's ability to cope with problems and crises has been found in numerous studies to be an essential characteristic of "strong, well-functioning families" (Walsh, ed., 1982).

From a public policy viewpoint, it does seem appropriate to consider the FRSEPs as a major preventive strategy, though many urge that the expectations of these programs effects need to be modest. Family support programs cannot be expected to prevent the emergence of major family problems. However, if families are strengthened so that they can cope better with the problems they will often have to face, then it is reasonable to expect that public services will be needed somewhat less frequently, for shorter periods of time, less intensively, and, more importantly, interventions will be more effective.

We now describe in a little more detail the somewhat separate origins, history, and growth of these three program strands, and then focus on dimensions and issues that cut across them.

II. Family Resource and Support Programs

(Sources: Farrow et al., 1990; Carter, 1991; Colloquium, 1990; Weiss, 1987 and 1991; Weissbourd, 1987)

The twin goals of family support programs are to build parents' capacity to support and nurture their children, and to connect families with other services and assistance available within the community. This community-based approach encompasses both "universal" programs, i.e. those open to all families with young children living in the general vicinity, and programs designed to meet the needs of specific, yet fairly broad, target populations. For these target groups, programs have added particular goals such as economic self-sufficiency for welfare families and preventing a second pregnancy for teen parents.

What all these programs share in common is the goal of creating social networks within communities which can compensate for the isolation and vulnerability of many families with young children through linking families with each other and with other sources of information and help. But there is no particular "model" blue print for family resource and support programs.

An important aspect of family support programs is that parents themselves determine what services or information the program should offer and the individual parents who come to the program determine which ones they want to use. These may include information, feedback, and guidance on child-rearing, help with securing publicly entitled benefits and other services, encouragement and emotional support from peer group, paraprofessional and professional staff, babysitting or "respite" care, transportation assistance, health and developmental screening, and referrals for adult education, job training, and employment.

Home visits are often a central component of these programs, both as outreach to encourage enrollment and to provide ongoing support to families who are reluctant or may find it difficult to come to the program facility.

Family support programs were originally local, grassroots initiatives that obtained funding from many local sources including community institutions, individuals, corporations, and foundations. Increasingly, they start up or expand through a community's response to state or federal grant announcements. Some programs charge modest fees on a sliding income scale.

History of the Family Support Movement

The roots of family support can be found in the charitable efforts to help poor families in the mid-to-late nineteenth century through friendly visitor programs and in the settlement house movement. Voluntary self-help associations were formed by many new settlers and immigrants to provide mutual assistance to families. Settlement house workers conducted parent education classes for immigrants, undertook class advocacy to improve services, provided practical assistance with child care, housing, legal, and other problems, and attempted to restore a sense of community in the rapidly growing slums of large cities. Young professionals worked in settlement houses as Jane Adams said, "not to uplift the masses, but to be neighbors to the poor and restore communications between various parts of society" (quoted in Weissbourd, 1987, p. 44).

From the twenties onwards, social work turned in a different direction and became much more highly professionalized and clinical in focus. The emergence of psychiatric casework, based in institutional settings, led to the demise of home visiting and community social work. The tradition of home visiting was maintained somewhat longer by visiting nurses sustained by new federal public health programs. The advent of the depression shifted the emphasis onto constructing broader, national systems of income security and support.

Family support and education reemerged in the sixties as a result of trends in research, program development, and broader social forces. Several streams of research provided the catalyst. First, there were the findings from studies of some of the early childhood intervention programs launched by the Office of Economic Opportunity which found that parent involvement in, for example, Head Start, was one of the primary components of successful programs. Second was the emergence of ecological theory in psychology and child development which emphasized the importance of the various, nested contexts—families, neighborhoods, and society—on children’s development and well-being. And third was the emerging social support literature that highlighted the importance of networks of informal support in buffering stress and promoting mental health.

Finally, a number social and environmental trends also contributed to the emergency of family support programs. The social turbulence of the 1960s and dramatic changes in basic social and community values, the increased out-of-home employment of mothers, the mobility of families from neighborhood to neighborhood, and the increasing diversity of family structure, has meant that “...for most families, there are no clear-cut paths through the maze that life presents to them. The traditional ways in which many of today’s parents were brought up simply do not fit” (Weissbourd, p. 47, 1987).

Program Growth and Current Status

Family support programs emerged initially from grass-roots organizing efforts by parents, often triggered by a particular kind of need (i.e., the birth of a severely handicapped child), which graphically demonstrated the lack of support available to families in similar situations. Such grassroots family support programs have often drawn on local resources made available by community institutions such as churches, community centers, and schools.

In the 1970s, a few pioneer programs such as Parents’ Place in San Francisco, the Parents Resource Center in Orlando, Florida, Family Focus in Illinois, AVANCE of San Antonio, and CEDEN in Austin, all began to meet the void parents were experiencing. Interestingly, each had developed quite spontaneously. Initially these programs were funded with quite modest resources from a variety of sources and staffed substantially by volunteers. (A survey conducted in the early years of the movement found that program budgets averaged around \$50,000.) This rather haphazard funding base led to a good deal of instability initially. Many programs could not sustain themselves and closed down.

Since that time, these local, grassroots projects have grown into much larger, complex programs funded by a variety of public and private sources—state and local taxes, foundations, and corporate sponsors. “The settings for family resource programs have changed, moving from church basements and kitchen tables to worksites, schools, health centers, social service agencies, and community gathering places” (Carter, 1991). A recent survey conducted by the Family Resource Coalition found that the program budgets now ranged between \$140,000 at the lowest end to over \$2 million.

In 1981, 300 representatives of such local programs met for the first time to establish the Family Resource Coalition, which has become the national organization nurturing this growing movement (see *Organizational Resources*, p. 39). By 1990 the FRC membership had grown to over 2000 programs and individuals.

State recognition and funding. In the early 1980s, Farrow writes, “most state officials would not have recognized the term “family resource and support” services. Today, some of the strongest leadership for these programs is found among state administrators, state legislators, and state-level advocates” (Farrow, 1991, p. 12). In a number of states a network of family support programs have received state funding. Some, like Minnesota’s Early Childhood and Family Education Program and Parents as Teachers in

Missouri, have a universal basis and are offered throughout the state. Others, such as Connecticut's Parent Education Support Centers serve all parents in a few targeted communities although priority is given to special population groups such as teen-age, first-time, low-income, or minority parents. (An unusual feature of Connecticut's program is that the centers are designed to offer families assistance until their children reach 17 years.) Most other statewide programs are targeted to high-risk populations, such as the Ounce of Prevention Fund in Illinois and Maryland's Family Support Centers, both of which primarily serve teenage parents. (For additional information on statewide programs see p. 29-36.)

Recent program trends. As family support programs grow in number and gain experience working with more diverse populations, and as the cultural diversity of American communities has blossomed, there has been a tendency toward emphasizing "cultural competence" in the design of the programs. "Cultural competence" can be defined as the need to respect and utilize the diversity of families' cultural heritage, and to include in the program staff and volunteers who know the language, values, and childrearing practices of the specific cultures represented. In addition, there is a growing awareness that parents of teenage children are often in serious need of information, support, and preventive programming. Increasingly, programs are beginning to be established that meet the needs of families with teenagers (Small, 1990).

Spread of family support principles and philosophy in public policy. Perhaps the most important effect nationally of the family support movement has been its influence on the design and delivery of public social services. This was highlighted at a colloquium on Public Policy and Family Support held in 1990. "As public agencies carry out mandates in the areas of welfare reform, early childhood education, teen pregnancy prevention and assistance, child health, and child welfare, there is more and more willingness to promote local family support and education as key components of new strategies in these areas" (Colloquium Report, Foreword p. 2). In the first chapter, Frank Farrow outlined the challenges for public policy. States becoming interested in family support, he wrote, are moving away from the idea of creating new independent programs for family support, and toward broadening their entire system to include family support principles and practices.

Evaluation

Most of the research rationale for family support programs thus far is based on the evaluations of earlier childhood intervention programs which had strong parent education components. Family support programs are new, and for this reason there have been few rigorous evaluations of their success in terms of outcomes, though there are numerous summative (process) evaluations. Indeed there are complex methodological problems in designing and carrying out impact evaluations of programs with such flexible, diverse programming (see p. 23).

Weiss, however, does review one well-designed study with random assignment of families, the Prenatal and Early Infancy Project (PEIP), in which two-generational effects have been demonstrated. This demonstration project in a rural Appalachian area of New York provided home visits during infancy to poor, unmarried mothers. In this study an intensive family support and education program had a positive impact on a wide range of parent variables as well as children's outcomes. Not only were more positive parenting skills observed, and less child abuse/neglect, but two years after the home visits ended, in comparison with mothers who had not received home visits, mothers in the program returned to school more rapidly, had been employed longer, felt they had more help with child care, and had fewer subsequent pregnancies (Olds, 1988). Weiss concludes that "the possibility of producing multi-generational effects makes these programs worthy of consideration by those crafting welfare reform strategies for single mothers with young children" (Weiss, 1990, p. 188).

Program Vignette

Family Focus Our Place, Evanston, Illinois

Family Focus Our Place was founded by Bernice Weissbourd and is one of the best known, pioneer family resource and support programs. It currently operates five centers located in the Chicago area. The first center in Lawndale, Evanston, opened in 1976 in the local high school. It currently operates two nearby centers serving as drop-in centers for pregnant and parenting teens, their children, other family members, and other teens at risk of pregnancy. The program in Lawndale is located in a primarily black, low-income area. Other Family Focus centers, situated in West Town, Chicago, Aurora, and School District 65, Skokie, serve somewhat more diverse populations including many Hispanics and some middle-income families.

Among the wide range of services offered to local teens, teen parents, their children, and their families through the Family Focus programs are:

- Partners Program, which matches teen mothers with women who themselves were teen mothers and have successfully raised their children and achieved their own personal goals.
- Discussion groups for teenage mothers and peers.
- Child development programs and parent-child activities.
- Tutoring for school success.
- Discussion groups for teen fathers, along with instruction in child care skills.
- Developmental child care provided while the parents participate in other program activities.
- Crisis intervention counseling.

In addition, centers tailor their services to the particular needs of their population. For example, ESL and GED classes are offered to Hispanic parents and work/family seminars for dual paycheck families. A hallmark of all the programs is their focus on promoting a sense of neighborhood belonging. Centers work to build bridges to other neighborhood organizations and agencies and aim to link the participants to other needed services in the community.

Family Focus staff have had a major interest in promoting replication of their model around the country and, in 1990, launched a training division to enhance their capacity to provide technical assistance. Plans are underway to conduct long-range program evaluations with the University of Chicago School of Social Services Administration and the University of Illinois.

The total annual budget is currently approximately \$2.6 million, with major support from the State of Illinois, and additional support from the city of Chicago, private foundations, and corporate gifts. Centers serving middle-income communities may charge fees.

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III. Parent Education Programs

(Sources: Haskins & Adams, 1983; Powell, 1988 (a) and 1989; Wandersman, 1987; Weiss, 1990; Zigler & Freedman, 1987)

Parent education can be defined to include everything from reading Dr. Spock's book on baby care to intensive training programs for parents of young children with special needs. Our focus here is on programs designed to provide parents of infants and toddlers with knowledge of basic parenting skills and age-appropriate child development, in order to ensure that their children develop the cognitive, social, and other skills necessary for school and later life success.

Parent education programs are intended to help parents do their job more effectively, through acquiring new child development knowledge and parenting skills. Within these broad goals there is a significant diversity of program design and approach. At one end of the continuum of parent education are highly structured, time limited efforts using a clearly defined, prescribed curriculum, and often a targeted population of families who enroll in the program. Such efforts are likely to be offered by schools or preschool programs and operate separately from social services.

At the other end of the continuum are informal support networks and discussion groups for parents, which parents may use as they wish, whose focus is determined by the parents themselves. These types of parent education activities are frequently sponsored by family resource and support programs. These may focus on encouraging parents to become informed decisionmakers in the use of child development information rather than providing specific instruction. Programs also vary in their use of program staff. In some, staff serve as child development experts, while other programs follow a self-help model, use parent volunteers, and the staff function essentially as facilitators. Such efforts are more likely to be connected to larger programs of social services for families.

Roots/History of Parent Education

Published tracts on child rearing have existed for centuries. But the roots of current public parent education efforts go back to the early part of this century, with efforts through the US Department of Agriculture Extension Service to reach families with scientific information about child rearing and better nutrition, and with the founding of the National Congress of Mothers in 1898, which in the twenties became the National Parent-Teacher Association. The focus of information and education efforts for parents of preschool children throughout this first half century was on personality development and social skills, and was designed for, and primarily reached, mostly middle-class, second generation parents.

Both the goals and the target population changed dramatically during the early 1960s when research on cognitive development was picked up by the War on Poverty. A core assumption of the 1960s was that children growing up in poverty were likely to be "cognitively deficient" because the home environment was assumed to be very much like that of severely deprived institutionalized children who lacked "cognitive stimulation." With the advent of Hunts' widely read book, *Intelligence and Experience* (1961), it became an article of faith that intelligence was largely set by age 4, and therefore it was concluded, based on a very slim research base, that children of poverty did poorly in school largely because of early deprivations, not because of the school's inadequacies. This view helped fund the first Head Start programs as well as a number of research projects on early childhood intervention. These projects were to explore the best means of intervening in early childhood with economically disadvantaged families, and many included direct home intervention and mother-focused education components.

These early intervention efforts were clearly more child-focused than family-focused, and with parent involvement activities targeted only on the mother. Most carried an obvious, if well-intentioned, bias toward teaching white middle-class childrearing practices to poor or uneducated parents.

From this early period of the War on Poverty, there developed a continuing interest among policymakers at the federal level in parent education in early childhood as one solution to improving later school achievement. Head Start has always built in substantial parent outreach and education and mandates parent involvement. (Eighty-one percent of Head Start parents reported a home visit, which is much higher than other preschool programs serving disadvantaged populations.)

Head Start created several major demonstration projects which included a parent education/involvement component during the period of 1965-1970. These have contributed much to our understanding of how to develop effective parent education efforts. These projects moved from a more didactic, information-giving approach to parents, toward a less didactic approach responding to parents other needs as well. The Parent-Child Development Centers focused on birth through three, with the goal of preventing later problems. Home Start was a home-based program using Head Start materials and providing services to parents, especially in rural areas. The Child and Family Resources Programs, which were then followed by the current wave of Comprehensive Child Development Centers, illustrate the movement of the field toward a more ecological approach, providing support for the entire family in order to aid children's development.

Recently, a new resurgence of interest in parent education and support has led to the setting up of major parent education programs in several states focusing directly on the needs of the parent as well as the child. Well known examples of these programs are Minnesota's Early Childhood Family Education program (ECFE) and Missouri's Parents as Teachers (PAT) program (see state programs p. 29-36) and the Home Instruction Program for Pre-school Youngsters, HIPPPY, which although not statewide in any state, currently has programs operating in 16 states (see p. 40).

We can summarize the history of early childhood intervention since the sixties by noting that there has been a significant shift from an exclusive focus on children going to educational centers, thereby "removing" them from a deficient, unstimulating home environment, toward a more ecological, systems approach which emphasizes and affirms the roles of parents, other family members, and the community in child development.

Research

(Sources: Lazar, 1988; Powell, ed., 1987 and 1988 (a) and (b); Powell 1990)

As noted, parent education programs have built upon a research base in the field of early education and child development. The 1960s and 1970s saw a large number of studies which attempted to find the causes of poor school achievement in the behavior and interactions of the mother with her child. These studies were often laboratory observations of mother-child play, and typically, researchers found that middle-class mothers' language and "teaching style" were different from those of mothers with less education or from different socioeconomic classes. The more researchers controlled for class and income levels, the more the mothers' educational level emerged as positively associated with the child's immediate gains and later performance. As this body of small-scale but impressive studies grew, the efforts to provide education for low-income parents most often focused on developing child-rearing practices which would be more like those of educated middle-class parents.

There are a small number of convincing, high quality studies which show that the most effective child development programs are those that involve parents and family. And while there is strong agreement about the importance of the home environment in early childhood education, there is less certainty about what needs to be changed, and about how much to assist parents in order to make that environment optimal, especially when the families' culture and traditions differ markedly from mainstream America.

Among the many questions programs and policymakers have, and which research is still trying to answer are: What differences between home and school really matter and what, if any, changes should families be asked to make? The answers to that question have changed radically since the early 1960s when poor families, and especially black families, were seen as cognitively depriving their children.

Emerging Program Trends

There are at least three emerging trends in the parent education field. First is the idea of matching program content and methods to the needs and characteristics of the parents in the program, for example for Hispanic or Hmong parents. This is a major shift in a field which originally believed in a unitary curriculum applicable for all parents and in various sacrosanct teaching methods. Second, is what Powell describes as a realignment of parent professional relations away from the deficit model in which parents were clients who needed improving and program staff were the "experts" [1988 (b)]. Since the late sixties, when parents began to be placed in some limited advisory decision making roles and parents were hired in the classroom, the concept of parent input into education programs has gained some acceptance. More recently there has emerged a clear trend in a more radical direction, towards collaborative, co-equal relationships where the model is one of partnership. Third, there has been much more interest in the social context of parent education and of the family in general. This has led many parent education programs to expand to incorporate more family support types of activities.

Funding

Early funding of parent education demonstration programs came most often from federal sources—NICHD, Children's Bureau, Head Start—and from foundations. Many had strong university links to early childhood departments and researchers, the Syracuse University Family Development Research Program and the Yale Child Welfare Program for example. Now, states and localities are initiating parent education programs and the trend seems to be toward more and more state financial support with, in some states, local districts providing additional funding.

The Missouri Parents as Teachers program is a good example of how many of these emerging programs are successful in blending state and local, and public and private funds. Funding for the pilot project was from the state, using federal Chapter II funds, and from the Danforth Foundation. Now, basic state and local education funding is being augmented by major corporations who are interested in parent education components in their child care centers (see p. 30-31).

Program Vignette

Early Childhood Family Education Program (ECFE) in Winona, MN

The three major program components in an Early Childhood Family Education are early childhood education, parent-child activity, and parent education. In the Winona ECFE program, like most of the Minnesota programs, these occur most commonly through families attending one-and-a-half to two hour

“classes” at a local school or neighborhood site once a week. Parents and young children come together to meet with other parents and children of the same age. Parents and children are together in joint activities for part of the time, then trained early childhood educators continue to work with the children, while parents join a discussion group of other parents facilitated by a licensed parent educator. Classes are offered during both the day and evening, and a special “Daddy and Me” group reaches out to fathers.

For many of these children, the weekly sessions and the activities parents learn to do at home will be the only early childhood education they will receive prior to kindergarten. Parents know they are playing a major role in their preschool child’s education, and many come to help their children learn to play with others and develop social skills.

To meet the needs of families with special needs, parent educators work in high schools with teens who are also parents; recruit older parents to provide support through telephone “care lines,” home visits, and emergency supplies; and develop special classes for parents with histories of abusive or addictive behaviors in their own families of origin. For these families, involvement with the program may be up to 14 hours or more a week.

Parent discussion groups and classes may focus on child development, family relationships, parents’ roles and needs, and on other topics which parents bring up. Newsletters and the joint activities help parents learn how to repeat age-appropriate activities at home.

Not only is the program responsive to the needs of parents in each group, but parents form a majority of members on the local advisory council, which by state statute determines the services the local program will offer. Other council members include clergy, day care providers, school and Head Start administrators, and health care, human service, and law enforcement professionals. Thus, the local program is able to coordinate its services and avoid duplication of effort. For example, a pediatrician refers many children and their parents to Early Childhood Family Education because he believes it strengthens and supports families.

Basic funding comes from the state, through Community Education, and is supplemented by funding from the local school district through a levy. The local program may charge a reasonable fee, but must waive fees for those unable to pay.

Winona is in southeastern Minnesota, and the program serves the city and smaller towns along the Mississippi River. The program is open to all parents in the Winona School District, and the program population is actually quite diverse, including single- and two-parent families, teen-age mothers, low-income families, and parents with literacy needs and substance abuse problems. (For further information about ECFE see p. 31-32.)

IV. Family Literacy Programs

(Sources: Freeman, 1990, FRC #3; Freeman, 1991; Goodson et al., 1991; Gadsden, 1991; Kenan Trust, 1989; Nickse, 1989; Weinstein-Shr, 1990)

Family literacy programs attempt to break the cycle of illiteracy and poverty by simultaneously addressing the needs of both the adults and children within the context of the family unit. In addition to focusing on the literacy skills of two generations, programs focus on the home environment where messages, values, customs, patterns, cultures, and skills are learned and practiced.

Over 300 programs across the country now identify themselves as family literacy programs (Nickse, 1989). This number encompasses a variety of programs with affinities to both parent education and family support, and again, there appears to be much overlap in actual practice.

Unlike the family support programs which grew from small grassroots programs over the last decade, there has been great national interest in funding family literacy. The US Department of Education has funded **Even Start**, a program to provide grants for family-oriented literacy projects, with a budget of \$24 million in FY 1990 and \$60 million in FY 1991.

The Kenan Charitable Trust has developed a family literacy model with seven programs in North Carolina and Kentucky, and has now supported a National Center for Family Literacy to provide technical support and training to burgeoning projects elsewhere. In addition, the Barbara Bush Foundation for Family Literacy is now in its second year of awarding grants (see Organizational Resources, p. 39).

Another measure of the degree of federal interest in the issue of family literacy is the funding of a National Research Center for Adult Literacy, awarded to a consortium led by researchers at the University of Pennsylvania, and an Information Clearinghouse on Literacy Education, with a special focus on second language learners, at the Center for Applied Linguistics in Washington, DC. Both centers include family literacy as a major focus.

Program Goals, Assumptions, and Activities

The term family literacy is used to describe various kinds of intergenerational programs that target adults and children in the same families who need reading and writing skills. Most often, the programs seek out adults who are illiterate (or illiterate in English) or whose reading and writing skills are far below the level required for functional competence in society, and then work with them and their children in some coordinated fashion. Programs are enormously diverse in their activities and settings, but most seek to do one or more of the following.

- Increase literacy skills of adults and children.
- Influence parent-child relationships.
- Help family members develop positive attitudes toward reading and writing.
- Influence how families view literacy as part of daily life activities.

Many of the programs' primary emphasis is on helping improve parents' employability. Some, however, such as the PACE program in Kentucky, also strongly emphasize providing family support. Nickse has provided a very useful conceptual model that classifies the programs surveyed according to who is involved, and how directly (1989). The programs may include parents and children, grandparents or other

members of extended families, or foster parents. The programs can range from intensive parent-child learning experiences to informal parent-child book reading projects. Some projects focus directly on the family system by enrolling both parents and children in the same program. Others target one member, either parent or child (or grandparent), and attempt to influence other family members through that individual.

Family literacy is based on a somewhat different set of assumptions than parent education. The family is viewed as an educative community in which shared learning and reading experiences occur. One of the problems the programs are designed to address is the discontinuities in values, attitudes, and learning behaviors between the family and school environment. These discontinuities can either result from mismatches or from misunderstandings.

In a family whose earlier generations have not experienced literacy as positive or functional (or in the case of immigrant families, even available), their children are likely to learn early on that they too are expected to fail, and the cycle of failure is continued. Thus, there is an emphasis in many programs on reaching families with preschool children, so that children entering school and their parents begin to experience success together. An underlying theory of family literacy is that cognitive competencies like reading and writing are acquired most readily through the family, not the school. Families are systems of influence, and values are transmitted through the family.

There are two distinct approaches within this universe, however. Some programs assume a deficit model and see low-literate families as empty, needing to be filled up with skills and school-like practices. Others, with a more participatory model, recognize the literacy skills even low-literate families already have (such as Bible reading), even if school-like literacy is underdeveloped. These programs tend to begin with families' definitions and practices related to literacy, to build a family-based educational program.

Evaluation

(Sources: Kenan Trust, 1989)

Family literacy programs, with the assumptions and approach outlined here, are recent developments and major evaluation studies are few. The Kenan Trust Model Family Literacy Program has just completed a follow-up study of 14 programs whose families were involved when children were in preschool, examining the school performance of the children (now in grades K-4). Only 25% of the children were receiving Chapter I or special education services, less than predicted for the population. When rated by their current elementary school teachers, 90% of the children who had participated in family literacy programs were not considered at risk for school failure and were rated as motivated to learn. None of the children had been retained in grade. Teachers also rated the parents as being supportive of their children's education. Another indicator of the impact of these programs on parents was that well over half of the parents currently serve as volunteers in their children's elementary schools.

Program Vignettes

Because family literacy program models are becoming quite sensitive to cultural differences in the meaning of literacy and to parents' lifestyles, we have included brief descriptions of two different types of programs, the first serving poor white families in rural Appalachia, and the second and third, Hispanic families.

The Kenan Trust Model Family Literacy Programs

(Source: Kenan Trust, 1989)

The Kenan Model has been implemented in several states, including North Carolina and Kentucky, and

the model is also one of the components of the new Kentucky PACE program (see p. 33). In a typical program, preschool children and parents (or grandparents or other primary caregivers) with low literacy skills attend school together three days a week, at a neighborhood school building. In the morning, the parents work on basic academic skills and also learn about child development and parenting skills in adult education classes. These classes are small, and quickly become parent support groups as well. One mother reported that when she became discouraged and wanted to drop out three times, the others in her group “wouldn’t let me quit. I was in shock that they cared that much.”

During this morning period, children attend a preschool program using the High/Scope curriculum. Then, children and parents come together to participate in activities which draw on the skills both are learning. Later in the day, children play outdoors while parents work as volunteers in the school. They use their new literacy skills in functional capacities, tutoring elementary school children or working in the library or office.

Families are recruited for the program through local ads in grocery stores, on television and radio, and by referral from schools, ministers, and others who may know a particular family’s needs. A local telephone number is advertised where people can call for more information, and a home visit is scheduled to explain the program and identify the family’s needs and goals. This home visit can be used to suggest other community resources the family may also need.

AVANCE, San Antonio, Texas

AVANCE began 15 years ago, working with Hispanic, third-generation, public housing families. It provides programs focusing on two-generation learning: a basic nine-month parent training class which meets weekly, using hands-on learning, discussion with parent leaders, and videotapes of parent-child interaction. Home visits twice monthly teach parents to use toys made at the parent sessions, and also videotape mother and child playing with the toys. Completion of this parent education course leads to the major literacy program, Basic Literacy and Advanced Education, which includes GED classes, ESL, job readiness, and college courses.

Participation is encouraged by an twice-yearly outreach campaign and word of mouth. Child abuse and neglect families are referred to the program by the Department of Social Services, with ongoing case management provided.

Staffing in 1988 included 7 professionals, 13 paraprofessionals from the community, 7 support staff, and volunteers. All staff are residents of the communities served by the three centers. Funding in 1988 was \$475,000, with support from federal, state, and local governments, foundations, the United Way, and fundraising events.

S.E.R. Family Learning Centers, Dallas Texas

This national literacy training program, whose headquarters are based in Dallas, Texas, targets Spanish speaking, first generation families and has locations in 36 sites and 12 states. It features a strong family focus and provides services to all members of the family affected by illiteracy. At the Family Learning Centers, literacy classes are accompanied by day care services staffed largely by community grandparents. There are also meetings for parents of high school students who are at risk of dropping out, and basic job skills programs. The program’s success rests on a large cadre of Hispanic volunteers who recruit other parents, and overcome traditional reluctance to get involved in schools or education.

V. Staffing and Training

(Sources: Bailey et al., in press; Powell, 1991, FRC; Harvard, 1988; Goodson, et al., 1991)

Everyone agrees that staff qualifications, characteristics, and attitudes are critical to high-quality programs. As the field of family support and education grows, issues related to staffing and training will become more and more salient. Statewide pioneering programs are already identifying training as a crucial area.

“(A) very important lesson has been the critical role of staff training and the necessity for a team approach between the adult and early childhood educators. They must be trained simultaneously in the principles of early childhood and adult and parent education in order to plan and work as a team” (Jean Heberle, Director, PACE, KY, in Harvard, 1988, p. 7).

“An issue we face routinely is the difficulty of finding the right people to work in our centers. We need people who understand the philosophy of family support, feel comfortable in this different way of relating to people, and have adequate formal training in infant development. The colleges and universities must come to recognize that we are creating a new job market” (Rosalie Streett, Director, Friends of the Family, MD, quoted in Harvard, 1988, p. 12).

Early programs simply “borrowed” professionals with relevant training from social work, education, psychology, health care, and early childhood education and then recruited community members, often parents, to provide the requisite knowledge of the community and cultural styles of parenting.

Now the field has reached the point where it has begun to address its own staffing and training needs for programs which cut across disciplinary boundaries. For example both the Minnesota ECFE program and the Missouri PAT program conduct special training programs for their key staff. In recognition of the urgency of addressing issues of quality, the Family Resource Coalition (FRC) began a Task Force six years ago to study training issues. This fall, FRC held a Wingspread conference to set forth an agenda for achieving quality in personnel and training, including curriculum content, training strategies, and systems of delivery. FRC is providing training and technical assistance for the state of Kentucky’s school-based Family Resource Center program.

Community-based family support and education programs face particular difficulties in the area of staff selection, training, and development. First, the content, skills, and actual strategies to work effectively with families are not yet commonly taught in the preservice and inservice training for the professions. A similar lack has been found to exist in the training of the professionals who are implementing family-centered early intervention services for infants and toddlers with special health care needs. Bailey has called the needed changes in preservice preparation for these professionals “a change of such magnitude that its implementation will likely be a difficult and sometimes arduous process” (Bailey, et al., in press). Given the current lack of preservice training for family-centered interactions across professional disciplines, more resources must be devoted to inservice training of staff.

An important project making contributions to this area in the early intervention field is the TASK project (Training Approaches for Skills and Knowledge) of the National Center for Clinical Infant Programs. This project identifies key elements of training necessary for individuals to become competent infant/family practitioners. The TASK report (Fenichel and Eggbeer, 1990) stresses that the effectiveness of new and ongoing initiatives to support the development of infants, toddlers, and their parents *depends heavily on the competence of front-line and supervisory staff* (1990, p. 1). The TASK framework encompasses

paraprofessional and professional training and is applicable to training home visitors working with parents and infants. Many of the concepts in this emerging curriculum should be adaptable, more generally, to the fields of family support and education.

There is a new concern in the family support and education movement about how the increasing professionalism of the field can be reconciled with its community-based philosophy. Minnesota has begun requiring all parent educators to be licensed, with special training beyond the B.A. in child and family development and adult education. It then relies on community volunteers as partners for parents who need home visits and social support. Other states have not yet developed a statewide approach to standards and licensure, delegating that task to local school districts.

One great strength of the grassroots, minimally funded nature of many family support programs has been their reliance on paraprofessional staff. Many home visitors in these programs are recruited from the community and among former program participants. As programs grow and receive more stable funding from local and state sources, a critical challenge will be to retain the community connection and sensitivity which paraprofessional staff offer, while providing better opportunities for career advancement. Given the slowness with which university programs are likely to incorporate the wealth of knowledge about cultural values and parenting styles, programs will need to rely on paraprofessional staff for practical, grounded knowledge about the communities they serve.

Finally, there is an inherent tension between the collaborative, non-domineering, non-deficit approach of family support and education programs and the traditions of professions, such as education, health, and social work that tend to promote a more authoritative, we-know-best approach particularly toward poor and culturally different families.

VI. Program Evaluation

(Sources: Dunst, 1990; Jacobs, 1988; Lazar, 1988; Olds, 1988; Powell, 1988 (b); Salomon, 1991; Weiss, 1987; Weiss & Halpern, 1990; Zigler & Freedman, 1987)

Everyone wants to have an answer to the question “Do these programs work?” But in the real world of social programs, evaluators and policymakers alike have learned that such simple questions don’t lead to useful answers. Instead, the questions that need to be asked now are “what programs work best for whom, when, and for how long must they exist, how do they work, and ultimately, why are they effective?”

Many states and localities are clearly impressed by the record of family support and education programs. Program administrators say these programs work, can multiply scarce resources, and hold promise of reducing later school problems. Weiss and Halpern (1991) and Dunst (1990) caution that our expectations for these programs must be modest. The goal of preventing later problems may well be beyond the resources of many programs to achieve, particularly those in which families are free to choose their level of involvement and which offer only supportive services. Instead, they recommend that evaluations need to describe short-term behavioral outcomes for families (such as their ability to cope with a difficult child with special needs) rather than judging programs only on broad, long-run preventive goals, such as reducing the numbers of children in special education classes.

The research and program evaluation base isn’t very strong yet—in large part because few well-designed, intensive evaluations have been conducted—although trends are encouraging. There is no evidence that a lack of research should hold back program development, but it is important as programs go forward, and especially as policymakers and administrators look toward program evaluations, that the right questions are asked, and the very real difficulties and expense of conducting evaluations of these programs are acknowledged.

Much of the research base supporting current family support and education programs comes from careful, longitudinal studies of a few early intervention programs for low-income families, which included different kinds of parent education efforts. The longitudinal studies have consistently shown that children’s later school performance is improved significantly when programs are intensive, occur over a long period of time, and when parents and children are both involved during preschool years. These longitudinal studies are notable for using performance outcomes rather than simply IQ tests—outcomes such as retention in grade, assignment to special education classes, unemployment, school dropout, teenage pregnancy, and juvenile delinquency. While IQ differences between treatment and controls did not persist over time, differences on these other, real-life school performance measures favored the early intervention, family-focused programs.

Of three early intervention programs which have shown significant differences between treatment and control children—the Perry Preschool Project, Yale Child Welfare Research Project, and the Brookline Early Education Project—all had some degree of parent involvement. A fourth, a home visiting program, the Mother Child Home Program developed by Levenstein, also showed significant effects. But when the program was replicated in Bermuda with a larger population and random assignment to either the home visiting or a control group, few effects were found for either children or mothers (discussed in Powell, 1989, p. 104).

These positive findings, however, are based on a relative handful of fairly intensive programs which were usually not replicated on a wider basis. Although children from these programs had markedly improved school performance and behaviors 5 or 10 years later, we cannot be certain what aspects of the program were responsible. Thus, the results of earlier studies do not provide sufficient guidance for policy makers today.

Challenges for Program Evaluation

(Sources: Halpern & Weiss 1990; Jacobs, 1988; Laosa, 1984; Powell, 1983, 1987, and 1989; Salomon, 1991; Weiss, 1987; Weiss & Halpern, 1991; Zigler, 1987)

It remains extraordinarily difficult to conduct impact or outcome evaluations on programs with such broad goals and highly variable treatments. Powell has called the use of conventional research methods with these programs a classic case of putting a square peg in a round hole. The new generation of evaluations needed by family support and parent education programs has an opportunity to learn from previous studies about the difficulties of evaluation, and to fashion new approaches which will fit the programs being studied and address the needs of policymakers.

Broad goals and individualized services. Not only are family support and education programs focused on very broad goals of promoting family health and preventing future dysfunctions, but the most effective programs individualize their services to meet each family's needs and preferences. This makes it difficult to identify a set of outcomes that are common across families in the program and across different programs. In addition, the most important discernible effects of these programs may be several years away.

While research using experimental designs and random assignment can be useful on a small scale project to answer very focused research questions, the use of experimental methods and random assignment in large scale evaluations of complex programs, especially multi-site, is often viewed as inappropriate. Over time, experimental designs experience too many threats to internal validity—attrition, unavoidable nonequivalence of control and treatment groups on unforeseen but very crucial characteristics, and an inability to control for the effects of outside services for “untreated” control groups (Weiss & Halpern, 1991).

Systemic evaluations. Given the difficulties of pure outcome research when program goals are broad and the impact is likely to be long-term rather than immediate, there is a clear need for more sophisticated, systemic evaluation designs which use a correspondingly broad range of process and outcome measures to detect actual program effects. Systemic approaches to research assume that elements in a program are interdependent and even define each other, so that a change in one element changes everything else. Systemic approaches require the study of patterns across many variables instead of discrete changes in single variables (Salomon, 1991).

The assumptions of systemic, as opposed to experimental, analytic research, are better suited to the study of what actually does happen when a complex social process is initiated in a community and allowed to develop over time in response to local needs and conditional. For FRSEPs which are based on an interactive, reciprocal relationship with the families served, the assumptions of experimental research about controlling extraneous factors and manipulating a single treatment variable to produce a result are impossible to meet.

Minnesota's Early Childhood Family Education program has adopted a systemic, five-tiered approach to evaluation developed by Jacobs (1988). The approach begins with gathering extensive baseline data, conducts careful program descriptions, assesses the delivery of services, and uses specific effectiveness measures to document changes in parents' attitudes, behavior, and support. Only at the fifth level, or “tier,” is there an assessment of whether enduring changes in program participants, both parents and children, have occurred. The virtue of such an approach is that observed outcomes can more readily be connected to actual services or involvement in the program, rather than relying solely on statistical inferences about control group/experimental group differences.

The national impact evaluation of the Comprehensive Child Development Program (CCDP), now being conducted by Abt Associates with funding from HHS/ACYF, exemplifies the careful collection of data on the child, parent, and parent-child behaviors and attitudes over an extended period of time at multiple sites. Abt will collect data from 1991 through 1995, interviewing and assessing both parents and child(ren) in the CCDP programs every six months. The impact study is using a wide array of the best available child development measures and ratings on cognitive and socio-economic growth. It conducts close, culturally-sensitive observations of parent-child interactions and employs a wide range of measures of parent growth and functioning. It will compare these results of the child and family outcome measures administered to families in both treatment and control groups. The Abt study exemplifies the high cost and extensive effort necessary to systematically assess program impact.

When there are more defined interventions and specific goals, such as particular parenting skills that parents can learn, evaluation is easier. The more focused Missouri program has found that parent knowledge of child development significantly increased for all types of families after three years' participation, and that poor parental coping skills and family stress were lessened or resolved for half of the families.

Documenting and understanding the chain of events. The actual links between changes or growth in parenting skills and knowledge, actual subsequent change in parents' interactions with their own children, and then changes in their child's behavior has not been thoroughly studied, and most research relies on a theoretical chain of inference. The pathways of influence are simply not well-defined as yet. Much more careful, systemic observational studies need to be done, especially of how family support affects family functioning, and how that in turn affects child growth. Weiss and Halpern point out the value of ethnographically-oriented studies of program processes, especially paying attention to motivation and attitudes of staff.

The current research and evaluation base also lacks a good understanding of the processes of change in parents—what program practices enable parents to change their belief systems and behaviors? What role do social support networks play in behavior change? Evaluations which have followed a more ecological, systemic approach have provided much better data, particularly the work of Olds and his colleagues with the PEIP program (Olds, 1988). Their model includes treating attitudes and belief systems of families as important mediators of child-rearing behavior, and allows for reciprocal influences of child on parent as well as parent on child. Such research answers basic questions about how the environment of low-income families affects parenting and child development, as well as providing data about effectiveness of family-oriented services.

Replicability and generalizability. Much of the research on FRSEP has been on “flagship” model programs at a single site, where there could be careful documentation of services. The results of such studies may or may not generalize to community-based, service-oriented programs which provide highly variable services depending on family needs. In contrast, the statewide programs in Missouri and other states which have replicated well-tested pilot projects offer policy-makers the first, good opportunity to study the actual effectiveness of widespread replication. These statewide programs deserve substantial evaluation support for an extended period of time, as they provide the best possible basis for making judgments about program value in the “real world.”

Some Guidelines for Evaluation of Family Resource, Support, and Education Programs

(Sources: Powell, 1988 and 1990; Weiss & Halpern, 1991)

From this literature, we can find general agreement about what the goals and design of future evaluations

need to be. Since policy at both state and federal levels is being increasingly driven by evaluation findings, it is important for policymakers to understand the kind of evaluations which are needed to provide valid answers about these programs. Among the approaches recommended are the following.

1. Ecological, systemic descriptions of program activities, of families as systemic wholes, and of both in relation to a larger environment.
2. Broad, two-generational focus, in terms of the outcomes being assessed.
3. A focus on evaluating which approaches are likely to be effective with different populations.
4. Describing and evaluating needed levels of involvement with program services, especially for families with multiple stresses.
5. Documenting reciprocal processes of change and growth among parents, children, and other family members.
6. Conducting outcome evaluations only on those programs which are well-implemented and ready for complex, longitudinal evaluation.
7. Moving from cross-sectional, one-time evaluations toward longitudinal and follow-up studies to see if effects are robust 5 or 10 years out.

VII. Program Dimensions and Emerging Issues

(Sources: Laosa, 1984; Powell, 1991; Weiss & Halpern, 1990; FRC, 1991)

The field we have just attempted to describe is in a process of continual and rapid development. Our review of the literature has identified a number of crosscutting issues which concern policymakers and program administrators, especially as they move to establish new family resource, support, and education programs. Most notably, at the program or local community level, programs must make decisions about a number of dimensions along which programs of family support and education may vary. There is little or no evaluation data to guide them. As noted, the important areas of evaluation and training will need much attention in the years ahead. In addition we briefly present in this section, a number of other issues and dilemmas that the field is currently grappling with concerning programs' scope and focus. We then raise a series of questions and issues that are surprisingly absent from the literature but which we believe are growing in importance.

Universal versus targeted eligibility. There is considerable debate and some tension about whether programs should be targeted on a specially vulnerable population of families or universally available to all living in a certain area. Philosophically, almost all proponents would agree that most of the kinds of services provided are needed by all families and that one of the great appeals of this movement, in contrast to the formal, categorical system, is that programs do not require families to identify themselves as “problematic or dysfunctional” to get services. Yet for various pragmatic reasons, many programs are targeted on “at-risk” families.

Powell (1988) has suggested that there is a basic philosophical incongruity between the non-deficit model (which implies universal eligibility) and the targeted model (which implies a label of dysfunction). Others point out that there are non-deficit approaches to working with clearly troubled and labeled families, for instance, family preservation services and family systems therapy which both focus on identifying and promoting strengths and competence.

The arguments for universality are numerous and include the belief that the public commitment to provide tax supported services to all school children should be extended downwards to the preschool years, that only universal programs will gain a solid basis of public support, and that some studies have shown that attempts to target “at-risk” children are imperfect and often miss children with developmental delays or families with serious relationship problems who are members of the supposedly non-risk population.

The arguments for targeting special sub-groups of families who are deemed to be more “at-risk” are that these families need more and different types of services than others and usually do not have the economic resources to buy these services on the open market. Moreover, since resources are limited, it is easier to justify spending funds on families who are the most needy and who are more likely to utilize public remedial services if they do not get preventive, supportive services.

Programs are trying a number of ways of resolving this dilemma. In some statewide programs, Kentucky for example, although the eventual goal is universal coverage, the program is being implemented in stages. The schools chosen as sites for family resource centers are located in areas with high proportions of low-income families, but within the area all families are eligible for the service, independent of income. A second approach, used to some extent by Connecticut and Minnesota, is that although the basic services are universally available, special services are tailored to the needs of sub groups of the population with special needs. A third approach, addressing the issue of limited resources, is to offer the programs universally, but on a fee for service basis for those who can afford to pay.

Breadth of services offered versus single point of entry. As noted, increasingly there is a convergence in the type of services offered. Programs may grow out of either the parent education, family support, or family literacy fields, but more and more appear in practice to have overlapping services and similar philosophies. This expansion of scope raises a number of questions. Are there going to be sufficient staff, trained in the variety of skills needed to offer such a wide variety of services? Does expansion imply the programs will become so large that they will lose the informality and flexibility that has traditionally been one of their greatest assets?

There is a growing emphasis in many of these programs to curtail the temptation to add additional services and focus instead on strengthening the linkage and referral role of program staff. This implies that programs need to build much stronger bridges to the existing service structures than they have done heretofore so that each program can have an up to date community resource directory and have worked out ways to make successful referrals to other services.

Family diversity. Although the commitment to cultural sensitivity has always been present, the literature on FRSEP is beginning to reflect a stronger focus on the need to make their programs more sensitive to the particular needs, values, and traditions of different racial and cultural groups and find ways of providing effective services to, population groups that are harder to reach. There is also an emerging interest in expanding the programs to meet the needs of parents of older children, especially young and older adolescents in various kinds of prevention-oriented programs, most notably in the substance abuse prevention area (see Small, 1990). Indeed, a few of the growing number of multi-service, school-linked centers for youth—especially those in New Jersey—are beginning to reach out to provide information and support to parents (see Ooms & Owen, July 1991). Some believe that the rationale for providing families with adolescents with information, guidance, and opportunities for peer support and assistance is even stronger than for families with very young children.

Emerging Issues

From our discussions and a few hints in the literature there appear to be a number of new issues emerging that we can expect will be studied and discussed in the near future.

Recruitment problems. Programs often have difficulty reaching the families in most need of them. Since most of the programs are free-standing, parents either have to seek them out or find out about their existence from some other source. Parents who are actively out in the community, who see notices about the programs in the public library, and who are well connected with other parents will typically learn about the program. Other parents, especially low-income, disadvantaged parents, do not know that such programs exist. They live more isolated lives, have fewer friends, and are unlikely to learn about the existence of the FRSEP programs in their community.

New York state, in response to this problem has decided that a sensible strategy is to take the programs to the locations where parents and their children regularly go. Thus, the strategy is to “infuse” existing service systems, to bring the FRSEPs into existing programs, for example into prenatal health care programs, WIC programs, child care centers, and adult employment and training programs (see New York Council, 1991).

The needs of employed parents. Surprisingly absent in the literature is explicit discussion about how programs should meet the needs of employed parents. Clearly many of the parents who attend the parent education programs or use the family support centers are employed and programs need to design their services to meet their special needs. Compared with parents who remain caring for their children full-time at home, employed parents experience stresses through attempting to balance their work and family responsibilities. Many have needs for practical kinds of assistance (e.g. with respect to child care, baby sitting, and transportation). They are often short of time and can only attend programs in the evenings or on weekends, if at all.

In response to these pressures, some programs have experimented with offering brown-bag lunch discussion groups for parents at the workplace or holding some activities in the evenings or weekends. (New York state, for example, is beginning a major initiative to encourage parent education services at the workplace, see p. 35.) Some child care programs are beginning to incorporate parent education and support components into their programs. And family support principles of working in partnership with parents are beginning to be promoted in the child care community (see Weissbourd & Galinsky, in press; and Powell, 1987).

Definition of family membership. Another issue that has received little discussion in the FRSEP literature is how programs in practice define “parent” and “family.” The original models in the early twentieth century were developed in an era which assumed the two-parent, one-earner, nuclear family model and, thus, it was natural to target only the mother for services. By the seventies it became clear that this model was outdated. Many of the programs’ clients are single parents, some living in three-generation households. Programs needed to address the fact that raising children as a single parent presents some unique challenges and stresses. In two-parent families, it could no longer be assumed that the mother was the sole, and sometimes not even the major, influence on a young child’s life. Thus, there is a growing interest in involving fathers more actively in parenting young children.

Questions some programs are already addressing include to what extent can FRSEP reach out to fathers, whether married or not, and succeed in bringing them into the programs? What are the most effective strategies for doing so? To what extent do and can program staff and volunteers involve the extended family—for example, grandmothers who are often such powerful players in single-parent families, especially teen parents—or work with older siblings?

Family strengths. One of the recurrent themes in the family support literature is the emphasis on working with family **strengths** and the conviction that all families have strengths if only you look for them. The building on competencies model is clearly sound educational and clinical strategy. However, family strengths are not, for the most part, clearly defined or identified in the family support literature but somewhat taken for granted. It would be useful to know what is the movement’s concept of a well-functioning, strong family? What are its various components?

It is unclear to what extent the emerging research on “family strengths” is being drawn upon by the family support movement. The research on family strengths identifies at least nine critical characteristics of “strong” families. (For reviews see Dunst, et al., 1988; Krysan, et al., 1990; Morgan, 1987; Walsh, ed., 1982.) Several of these are clearly the focus of family support programs’ efforts, for example, “social connectedness to others in the community.” Other “strengths” appear to be incorporated in the educational components designed to strengthen parent-child relationships, such as “time spent together,” “communication,” and “expressing appreciation.” However, the programs apparently are less likely to focus on such strengths in the relationships between the parent couple or other adults in the family.

Neglect of the marital/partner relationship. The FRSEPs’ major goal to date is clearly to help the parent/child relationship. There appears to be an absence of focus on the relationship between the parents (whether married or unmarried) or other adults in the family (such as parent/grandparent). Yet, anecdotal reports from the programs suggest that the topic of marital/partner/grandparent difficulties and conflicts are often a subject of discussion in parent support groups. There is a strong body of research that identified the quality of the relationship between the parents as having a critical influence on the development and well-being of their children. This suggests that programs should broaden their concern from the parent-child dyad to providing information and support for the marital dyad and other relationships within the family system. How staff can be oriented and trained in the appropriate skills to do so is another important issue for the movement to address in the future.

VIII. State Policy Initiatives

(Sources: Council on Chief State School Officers, 1989; Farrow et al., 1990; Harvard, 1988; Hughes, 1988; Weiss & Halpern, 1990)

A fundamental assumption then of the FRSEP movement is that basic information and educational and support services are needed by all families. If they are unavailable, children will not achieve their potential and in too many cases parents will falter, serious family problems may erupt, and children may be seriously harmed. This is why the family resource, support, and education movement argues that they should be regarded as the kingpin of a preventive social policy. Increasingly, state governments, not willing to wait for further evidence, are being persuaded that it does make sense to invest in these programs.

During the mid-eighties state governments in Minnesota, Missouri, Maryland, Kentucky, and Connecticut began to provide substantial support to FRSEPs. Four of these focused on families with preschool children. The Minnesota, Missouri, and Kentucky programs receive their funding from, and are administered by, the state education department, and they are universal, open to all families in the area. The Maryland and Connecticut programs are funded largely by the state human resources department. The Maryland programs were originally designed for teenage parents but are now gradually opening up to serve all families. The Connecticut program is open to all families in the site communities with children up to age 17 but priority is given to certain target groups.

The advent of state funding marked a new stage in a steady process of FRSEP capacity building. Each state program built on several years of experience with pilot demonstration programs in the state, which then began to be replicated in several communities. In all five states the programs are set up through a grant proposal process. In each case the programs' organizational structure represents a balance between top-down and bottom-up strategies. The state government issues a general state directive and framework which leaves considerable room for local flexibility and creativity.

As Weiss and Halpern, Farrow, and others have pointed out, these five states, and any which seek to follow in their path, will face a number of challenges and issues in the years ahead including the following.

- There are many vicissitudes to be overcome when expanding the number of sites in a time of fiscal contraction. Sites and states may find they have assumed responsibilities which they do not have the resources to fulfill.
- As the programs expand at the state level, they may become more of a competitive threat to other agencies that have jurisdiction over aspects of children's and families' lives.
- States will need to address issues of coordination between various programs which are currently fragmented and isolated.
- States should consider how to integrate FRSEP programs more fully into existing service systems in order to reach parents and family members who are not motivated or able to identify and seek out programs which are independently situated in the community.
- States will have to face continuing problems of recruiting and training new staff for a new profession that is not yet clearly defined or credentialed.
- States are beginning to struggle with the broad issue of program evaluation—how to assess the implementation, costs, and effectiveness of the emerging state FRSEP systems. In addition, although legislators frequently talk about the importance of evaluation, they seldom provide the necessary resources to carry it out.

We provide below a summary sketch of the central features of the five best known statewide FRSEPs—in **Missouri, Minnesota, Maryland, Kentucky, and Connecticut**—drawing primarily on the case studies of these states being conducted by the Harvard Family Research Project. We also include a summary of an ambitious, new, comprehensive, coordinated statewide plan for parent education and support programs in **New York**, proposed in 1991 by the Council on Children and Families, an arm of state government. In addition, other statewide initiatives underway which are not described in this report include the **Illinois** Ounce of Prevention Fund, begun in 1982 with a major focus on programs for teenage parents; **Iowa**, which in 1988 authorized a program of demonstration grants for family development centers in seven communities; the **Vermont** Parent Child Centers; **Wisconsin's** Family Resource Center program begun in 1990 under the auspices of the Children's Trust Fund; and **Arkansas's** 33 site HIPPI program.

MISSOURI: Parents as Teachers Program

The Parents as Teachers (PAT) program, funded by the State of Missouri, captures much of the thinking and recent developments in the field of parent/family education, and is being replicated and adapted widely in 36 states and in Australia. In 1984, with the passage of the Early Childhood Development Act, Missouri became the only state in America with a statutory mandate to provide parent education and family support services in *every* school district. The program is based on the philosophy that parents are a child's first and most influential teachers. The school's role in the early years is to assist the family in giving their children a solid educational foundation during preschool years. All parents with children 0 to 3 are eligible for services. Although it is a universal program, special efforts are made to enroll at-risk families and parents of newborns.

The program began in 1981 with a three-year pilot project in four school districts and in 1985 the state legislature mandated parent education services statewide in 543 school districts. The program is currently expanding to serve parents through child care centers, special programs for teen parents, and a collaborative project with the follow-up team working with families of high-risk infants at the St. Louis Children's Hospital Neonatal Unit. The PAT model is also being adapted for diverse settings and special populations including:

- employed parents at the worksite;
- disadvantaged families in housing projects;
- Native Americans, by the Bureau of Indian Affairs;
- teen parents, military families, and those making the transition from homelessness.

Parents as Teachers offers the following basic services to parents during the first three years of childhood.

- Home visits by trained and certified parent educators, who offer specific information on child development and practical ways to encourage learning. During home visits, parent educators demonstrate the value of everyday activities with children, appropriate responses and coping skills, and bring in age-appropriate books and toys. They also model and encourage parents in reading aloud to very young children. Home visits are increased where observed risks and or developmental delays are noted, and parents request more help.
- Monthly group meetings for parents to share experiences and concerns.
- Monitoring and periodic screening to detect possible developmental delays in the infants or preschool children.
- Referral network that helps parents make connections in their community with needed services which PAT cannot provide.

PAT can include a variety of family support services but its primary goal is to support and enhance the parent's role in enhancing their children's language, cognitive, social-emotional, and motor development. Monthly home visits remain the major service delivery vehicle. 74% of the parents attended two group meetings per year. Parent educator staff are drawn from experienced preschool teachers, pediatric nurses, and others with professional backgrounds in early childhood and are carefully selected and trained to work effectively with parents. There is no particular emphasis on paraprofessional or community-based staff.

A pilot research project showed substantial gains in child outcomes for the seventy five participating families compared with a control group. After the program became state wide, a "second wave" evaluation began in 1989. From a total sample of 2,500 families, living in 37 school districts, with a child under 8 months of age who enrolled in the program an initial sample of 400 families was selected for study. The families were followed through the child's third birthday. Many more of these families, compared to the pilot study, came from backgrounds which placed their children at risk of poor school performance, e.g. low maternal education levels, poverty, minority status, one-parent family, and higher incidence of observed risk factors (poor communication between parent and child, developmental delays, etc.).

The study was conducted by Research and Training Associates (Overland Park, Kansas), with Ford Foundation funding, and investigated child, parent, and parent-child interaction outcomes for different types of families. Outcomes were compared with national norms (there were no control groups in the study). Among the key findings of the study were (i) PAT children performed significantly higher than national norms for child development at age 3. (ii) Between 15-20% of the PAT children with characteristics placing them "at risk" scored above the national norm. (iii) Poor parent-child communication and developmental delays were particularly responsive to intervention. (iv) 50% of the children with observed developmental delays overcame them by age 3. (v) Parent knowledge of child development significantly increased after three years' participation. Only the children in two-parent, low-education families where English was not the primary language were rated significantly below average on measure of social and adaptive behavior, and were lowest on every scale (Missouri Department of Education, September 1991).

Worldwide interest in the PAT program led to the establishment in 1987 of the Parent as Teachers National Center (see p. 40).

Funding. State funding was \$11.4 million in FY 1988 and grew to \$13 million in FY 1991. The state reimburses local school districts for 30% of eligible families (average participation ranges from 15 to 60% of eligible families). Local districts can levy additional funds. Danforth, Ford, and other foundations have contributed in excess of \$1 million from 1981-1991.

Contact: Mildred Winter, Executive Director, Parents as Teachers National Center, University of Missouri-St. Louis, Marillac Hall, Room 307, 8001 Natural Bridge Road, St. Louis, MO 63121-4799. (314)533-5738.

MINNESOTA: Early Childhood Family Education Program (ECFE)

(See p. 15 for Program Vignette.)

Minnesota's Early Childhood Family Education programs are available to all families with children age birth to kindergarten who live in the ECFE school district. However, special efforts are made to recruit low-income families and those experiencing stress. This statewide program goes back to the mid-seventies when Senator Jerome Hughes, an influential champion of early childhood programs, got the legislature to fund an initial set of six pilot programs. This number was gradually expanded to 36 programs operating in 29 districts by 1980, and in 1991 programs were operating in 365 school districts covering 98% of the 0-4 population in the state.

There are various levels of types and intensity of services offered at these sites. Most typically a family will attend a weekly, two hour session for children which includes parent-child interaction time and additional early learning opportunities for the children while parents are involved in a parent discussion group. Families needing more or different services may receive home visits for outreach and education/support, special events, access to toys and books, newsletters, sibling care, and special services for particular populations such as Southeast Asian immigrants, single parents, and teen parents. Some of the more intensive strategies involve families in activities for 14 or more hours per week. Programs take place in a great variety of sites including low-income housing projects, homeless shelters, store fronts, shopping malls, and apartment complex laundry rooms, as well as schools, churches, and community centers.

ECFE program staff meet regularly with representatives of a wide range of health, early childhood, child protection, and other social services to discuss issues of mutual interest and concern. The legislation requires every ECFE program to have an advisory council on which participant parents constitute the majority. The council helps to shape the program and ensure community support. The staff generally includes a full- or part-time coordinator, parent educators, early childhood teachers, paraprofessionals, and volunteers.

Shortage of evaluation funds have prevented any extensive statewide evaluation of ECFE thus far, although several formative, process evaluations were conducted. The program is now making a more intensive effort to implement a five-tiered, long-term approach to evaluation, recommended by Weiss and Jacobs (1988). One component of this plan is to help the staff collect data, in a routine way, from parent participants prior to, and at the end of, their participation in the program. Initial results from the 28 sites piloting this parent outcome study will be available in early 1992.

Funding. Each ECFE program is funded through a combination of state Department of Education money and a local community education district levy determined by a legislated funding formula. In FY 1992 state funding is approximately \$12.3 million, matched by \$14.6 million of local property tax revenues. Local sites are free to seek private foundation funding.

Contact: Lois Engstrom, ECFE Supervisor, Minnesota Department of Education, Capitol Square, 550 Cedar Street, St. Paul, MN 55101. (612)297-2441.

MARYLAND: Friends of the Family and Maryland's Family Support Centers

In 1985, the Maryland State Department of Human Resources, the Morris Goldseker Foundation and the Aaron and Lillie Strauss Foundation formed a public/private partnership and allocated \$400,000 to fund four community-based drop-in centers for adolescent parents and their children. To ensure the optimal growth and development of the family support movement, Friends of the Family was established as an intermediary organization to administer, raise additional funds, and provide technical assistance and training to the fledgling community programs. By 1991, under the leadership of Rosalie Streett, its founding director, Friends of the Family had expanded Maryland's Family support center network to thirteen centers and the program's budget had grown to almost \$4 million. The role of Friends of the Family has been critical to the growth of the family support movement and has allowed the original concept of partnership to flourish, permitting each partner to make his unique contribution and receive credit for it, without sacrificing the integrity of the program.

The program's initial focus on teen parents reflects, in part, the strong interest of the Governor in this population. (His Task Force on Teen Pregnancy released its report in 1985 and one of its results was the establishment of an ongoing Governor's Council on Adolescent Pregnancy which has vigorously pursued

a pregnancy prevention agenda.) Prevention and early intervention services for young parents and their children 0-3 years is the major thrust of these programs. Each center designs programming to address the needs and interests of its community. Community ownership and involvement is key to the success of each program.

The centers are sponsored by many different community agencies, including schools, a housing authority, churches, a community development corporation, and private social service organizations and agencies. Services provided include health care and family planning, diagnostic and assessment services, parenting skills, temporary child care, peer support, education, counseling and employment training activities, and pregnancy prevention programs for at-risk youth.

The initial formative and summative evaluations of the Maryland Family Support Centers have demonstrated some impressive results in reducing unwanted second pregnancies, helping teen mothers complete their education, and promoting good health care for their infants. The Regional Center for Infants and Young Children did an evaluation of the first two years of the program. More recently, the Ford Foundation funded the development and implementation of a model data collection system that has just completed its first full year of operation.

In September of 1991, Friends of the Family received one of only ten national Innovations in State and Local Government Awards from the Ford Foundation and Harvard University for its unique and cost effective programs.

Contact: Margaret Williams, Executive Director, Friends of the Family, Inc., 1001 Eastern Avenue, Second Floor, Baltimore, MD 21202. (410)659-7701.

KENTUCKY: Parent and Child Education Program (PACE) and Family Resource and Youth Service Centers

(Source: Devlin, 1991)

Kentucky currently offers two statewide FRSEPs which have a different history and focus.

Parent and Child Education Program (PACE) is a family support program that emphasizes family literacy. It was established in 1986 when the legislature created a \$1.2 million (over two years) pilot program in 6 school districts. In addition, the program has received monies from the Kenan Family Literacy Trust. It currently operates 35 classroom units in 32 school districts at a total cost of \$3.6 million over two years. This program is based in the Workforce Development Cabinet, Office of Adult Education Services. It was founded in response to the unusually high number of adults who failed to complete high school in the state and the resulting shortage of skilled labor. In 1986 Kentucky had the second highest school drop out rate in the nation. PACE aims to break the intergenerational cycle of undereducation by uniting parents and children in a positive educational experience.

Eligibility for the program is restricted to parents who do not have a high school diploma or equivalency certificate and who have a 3-4 year old child. The children participate in activities based on the High/Scope Educational Foundation developmental model. There is basic adult education and GED tutoring for the parents, joint parent/child activities with an emphasis on how children learn, and support groups for parents related to building self-esteem and competence. The parents participate for the equivalent of three full days (20 hours) a week. Most parents are not employed. Nearly all parents in the program are mothers, although it is open to fathers. A few participants are grandparents.

The Family Resource Coalition developed with, and for, the PACE program staff a family support curriculum to add as a central component of the program.

Initial results were very encouraging. At the end of the first year, three-quarters of the parents and children had completed the PACE program and nearly 50% of the participating parents passed the GED exam compared with only 15% of a control group.

PACE has received national recognition. Kentucky was the first state to have parents and their children attending classes simultaneously. The PACE model is now being adapted in other states including North Carolina, Connecticut and Hawaii.

Contact: Sara Callaway, Family Literacy Branch Manager, Office of Adult Education Services, Capital Plaza Tower, 3rd Floor, Frankfort, KY 40601. (502)564-3921.

Family Resource and Youth Service Centers. This new program represents one of the most ambitious new state FRSEP initiatives. In 1990, Kentucky's Education Reform Act promulgated a massive restructuring of the entire education system as a result of a court order. The law authorized support for family resource centers in elementary schools and for youth service centers in middle and high schools. These centers must be located in or near schools that have 20% or more of their student population at income levels below the qualifying levels for free or reduced price school lunches. Approximately 1100 schools were eligible to apply for these programs. One hundred thirteen centers received funding in the first wave of the program.

The family resource centers are designed to help build the family and community support that will enable a child to succeed in school. Core services include access to, or provision of, child care, health resources, substance abuse services, and job training programs for the older youth. All centers are required to involve parents in program design and governance. Among the core services to be offered by the youth service centers are family crisis and mental health counseling. After a year of planning, the program began operation in the summer of 1991. It is funded at approximately \$9 million for FY 1992; the statewide cost of the program is expected to rise to \$36 million at full funding.

The Family Resource Coalition headquarters office in Chicago is providing intensive training and technical assistance in the implementation of the Kentucky family resource centers program.

Contact: Ronnie Dunn, Coordinator, Family Resource and Youth Services Centers, 275 East Main Street, 4th Floor, Frankfort, KY 40621. (502)564-4986.

CONNECTICUT: Parent Education and Support Centers

The Department of Children and Youth Services is the first, and so far only, state comprehensive children's services agency to provide parent education services to a non-targeted population. In January 1987, the Department initiated a statewide network of ten pilot Parent Education Support Centers (PESC) which are located in many different community settings.

The centers are intended to serve all parents with children under the age of 17. Designated priority groups, however, include teenage, single, low-income, minority, and dual-career parents, parents with limited English proficiency, and parents of children in critical transition periods. The centers seek to involve both parents whenever possible. These centers provide training, support, and resource information to parents and

referral to other specialized services. Parents must constitute the majority of the members of each center's advisory group. The advisory group is involved in the planning, governing, and operating of the center.

Center staff are also required to act as resources for professionals and service providers in the community. This includes, for example, in-service training for teachers on how to foster parent-teacher communication and consultation with employers on how to develop more supportive workplace policies.

The Parent Centers have just completed an evaluation which was administered by the University of Southern Maine's Center for Research and Advanced Study. The results of the data collected for pre- and post-tests indicated that improved family management was reported by parents participating in the Parent Centers. These parents also reported an increase in confidence with regard to their own parenting skills, assigning appropriate consequences to their children's negative behavior, and a reduction in family conflicts.

Funding for these centers has been expanded from their initial start up grants of \$15,000 for the first six months to between \$42,700-88,000 each for FY 1991-92. There are currently 16 Parent Education and Support Centers being funded.

Contact: Carol LaLiberte, Primary Prevention Services Coordinator, Department of Children and Youth Services, Program Development Division, 170 Sigourney Street, Hartford, CT 06105. (203)566-2149.

NEW YORK: New York Parents' Initiative

The New York Council on Children and Families in 1990 conducted a comprehensive examination of parent education and support programs throughout the state in order to describe what programs were currently being offered and to make recommendations for state action. The study was requested by the Governor's Task Force on Child Abuse, whose honorary chair was Matilda Cuomo. To conduct the study the Council convened an interagency workgroup comprised of representatives from over a dozen offices, conducted site visits around the state, and held four regional hearings to learn from local providers. The Council is an independent agency within the state government whose members comprise the commissioners and directors of all major state human service agencies. It was formed in 1977 to promote the coordination and effectiveness of services to children and families throughout the state.

The Council's report, *New York Parents' Initiative: Strengthening Families Through Parent Education and Support*, published in October 1991, outlines detailed recommendations to increase the availability of parenting services, improve coordination at state and local levels, enhance the quality of services offered, and to promote public awareness.

The report noted that there has been a "steady growth of parent education and support programs (in New York State) representing a wide variety of program designs, service delivery methods, and funding sources. Many local communities, as well as eight major state health and human service agencies, are currently involved..." There was almost no discrete funding for parenting services, but these efforts were funded as a component of other efforts. The report notes, however, that these programs "have developed in isolation from one another and without the benefit of a comprehensive strategic plan to ensure an integrated statewide system of service." Parenting services were unevenly distributed and certain groups and communities were underserved, in some communities there was duplication of services, effective mechanisms for informing parents about these programs were scarce, and a shortage of training resources made it difficult for the parent education staff to improve the quality of their programs (Council on Children and Families, 1991).

The report spells out a vision for the coordinated planning and delivery of services that does not prescribe a single model but outlines a framework of structures and mechanisms to encourage and foster an array of diverse, flexible, and family-responsive programs. The Division for Women in the Governor's Executive Office is designated as the lead agency to work with other state and local agencies and the private sector to implement the plan. The plan's several innovative recommendations include a focus on expanding parent education and support services in the workplace; requiring all local school districts to offer pre-parenting education to students grades 6-12; and developing multi-year collaborative efforts to "infuse parent education and support services into existing and developing programs that serve children and families."

In Governor Cuomo's January 1991 State of the State message, he announced the New York Parents Program. By March 1992, although the state's budget crises had slowed implementation of the plan, the first major step of the "infusion" recommendation was well underway. The Governor had designated \$200,000 to be awarded in grants to five adult employment sites, ACCESS or CASSET centers, to include parent education and support services as an important compliment to the adult education, job training and placement, child care, and case management services in these sites. These pilot sites are expected to draw upon monies available from several federal programs such as Even Start and Chapter I to help support these services. The Division for Women has established interagency committees to implement other components of the plan.

Contact: Joanne Kelly, Project Director, State of New York, Council on Children and Families, Mayor Erastus Corning 2nd Tower, 28th Floor, Empire State Plaza, Albany, NY 12223. (518)473-3652.

IX. Federal Policy Initiatives

The federal government, primarily through the Children's Bureau and the National Institute for Child Health and Development, funded much of the child development research and program demonstrations and evaluations that were the research base and catalyst for the family resource, support, and education programs. Yet, apart from the funding of family literacy programs and a few other demonstration programs such as the Comprehensive Child Development Program, the federal government has not provided direct financial support for these kinds of preventive services.

Recently, as noted earlier, family support principles have begun to find their way into much new family-centered federal legislation, including most notably the P.L. 99-457, Part H, and to some extent in the current child welfare reform bills. With such an intense interest in the family support movement at local and state levels, it is clearly time to engage in a discussion and debate about how the federal government can best support and strengthen these initiatives.

Two recent federal demonstration programs particularly exemplify some of the principles of family resource and support programs, namely the Comprehensive Child Development Programs and Even Start. Together they represent substantial federal funding for the concept of FRSEPs. Both of these demonstrations are being evaluated by Abt Associates. Both programs are two-generational programs designed to help families attain economic self-sufficiency through education and job training while providing parenting education, child care, and other services designed to promote children's healthy development.

The Comprehensive Child Development Program, a national family support demonstration, was established by the Comprehensive Child Development Act of 1988 (P.L. 100-297). The program is administered under the Head Start program, in the Administration for Children, Youth and Families. The law authorized up to 25 innovative five year demonstration programs to (i) provide intensive, comprehensive, integrated, and continuous support services to children from low-income families from birth to entrance into elementary school and (ii) to provide needed support services to parents and other household families members to enhance their economic and social self-sufficiency. The basic design of the program built upon several earlier early childhood demonstrations including the Parent Child Centers and the Child and Family Resource Program.

Twenty-two CCDP projects were funded in 1989 and two additional projects in 1990. The 24 programs provide a wide range of mandated core services for the child and parent, including parent education, job and vocational training, counseling, and job placement, and for the children, infant and child health care screening, immunization, and treatment, developmentally oriented early childhood education, and early intervention services for children at risk of developmental delay. These services can either be provided by the program directly or by referral. Case managers must make weekly home visits.

The feasibility and process evaluation is being conducted by CSR Inc., which also provides technical assistance and training to grantees. Abt Associates is conducting the impact evaluation. The first annual report of the CCDP program describes the history of the program, characteristics of the over 2500 enrolled families, and the various issues encountered in starting up the programs (Hubbell, et al., 1992).

Even Start (Part B of the Elementary and Secondary School Improvement Amendments of 1988) is administered by the Department of Education. It is designed to improve the educational opportunities for children and adults by integrating early childhood education and adult education into what is essentially a family literacy program. It currently operates in 119 sites and serves low-income families with children. The proposed budget for FY 1991 was \$60 million, increased from \$24 million in 1990.

What has been called a milestone in the development of family resource programs was the passage of the Human Services Reauthorization Act of 1990 (H.R. 4151). The act authorized the funding, under a discretionary grants program, of a new **National Resource Center for Family Support Programs** which is designed to serve as a central location for information and training and to build a network of technical assistance experts to serve this rapidly growing program area. (The grant was awarded on October 1, 1991 to the Family Resource Coalition, see p. 39.)

Importantly, this legislation also authorized federal **Family Resource and Support Program Grants** to assist states to establish networks of local family resource and support programs. Grants would be awarded to states on a competitive basis. Funding would range from \$1.5 million per year for small states to \$6 million for large states. A lead agency in each state was to be designated to coordinate the distribution of grants to localities. Since one of the purposes of this program was to assure the community-based programs of some stable funding, at least 90% of the funds must be used to support local programs.

The program was authorized for \$30 million but has not yet received any appropriations. The language establishing this program was inserted at the last minute into the omnibus reconciliation bill by Senator Barbara Mikulski (D-MD) and agreed to in conference. No hearings were held in either chamber, thus, it can be argued that the rationale for this legislation has not yet been given an opportunity to be presented and debated in the US Congress.

An additional point to note is that there is language referring to family support programs in the **Stewart B. McKinney Homeless Assistance Act**. Title VI, subtitle F authorizes a demonstration program aimed at preventing homelessness by establishing family support centers at, or near, public housing. These programs would provide a very wide range of comprehensive services to children and their families at risk of becoming homeless. The program was authorized for FY 1992-93 but has not yet received appropriations. However, the Department of Health and Human Services is funding the demonstration program in FY 1992 at \$5.5 million under its discretionary grants program (to be announced in early May).

Rationale for increased federal support. Many of the leaders involved in the family support movement have suggested there are a number of reasons for increasing the levels of federal funding. These include:

- Federal investment in preventive and holistic strategies as represented by the FRSEPs will save federal dollars presently spent in more costly and fragmented remedial efforts.
- Although some states such as Minnesota and Missouri are able to support a basic, minimal level of FRSEP programs others have not been able to serve more than a fraction of those families in need.
- Certain populations need an intensive level of services, immigrant populations for example, and it is not feasible or equitable to expect the local or state tax base to meet all these needs without some federal funding.
- There is a clear role for increased federal investment in research and evaluation of FRSEP programs. A sterling example is the multi-layered sophisticated evaluation underway for the federally funded Child Care and Development Program—the “Cadillac” of family support programs. Similar studies should be launched for program models that are somewhat less intensive and costly.

There is a strong belief, however, that any federal service monies need to be provided through a flexible vehicle—such as in the form of block grants to states—that would clearly define the goals, purposes, and expected outcomes but permit local communities to design of the shape of the programs to meet their particular needs. These dollars could be used provide support services to meet the needs of underserved populations, populations with special needs (e.g. immigrants), and/or for coordination, training, and technical assistance activities.

Organizational Resources

The following organizations provide information, publications, training, and technical assistance related to family resource, support, and education programs.

Barbara Bush Foundation for Family Literacy

1002 Wisconsin Avenue NW
Washington, DC 20007
(202)338-2006
Benita Somerfield, Executive Director

Founded in 1989, the Foundation has six primary objectives. To identify successful programs; award grants to help establish successful family literacy efforts; provide seed money for community planning of interagency family literacy programs; support training and professional development for teachers; encourage recognition of volunteers, educators, students, and effective programs; and publish and distribute materials that document effective working programs. Since 1990 the Foundation has awarded 24 grants, totaling \$1,000,000.

Family Resource Coalition (FRC)

200 South Michigan Avenue
Suite 1520
Chicago, IL 60604
(312)341-0900
Judy Carter, Executive Director

The Coalition, founded in 1981, is a national federation of more than 2,000 organizations and individuals promoting the development of prevention-oriented, community-based programs to strengthen families. In 1991, FRC was awarded a federal grant to operate a National Resource Center for Family Support Programs which will strengthen its ability to serve as a clearinghouse for the field and provide training and technical assistance. It publishes a quarterly newsletter, the *FRC Report*, and in spring 1992 published a revised resource directory of programs (see Goertz, K., ed., 1992).

Harvard Family Research Project

Harvard Graduate School of Education
Longfellow Hall, Appian Way
Cambridge, MA 02138
(617)495-9108
Heather Weiss, Director

The Harvard Family Research Project was begun in 1983 to conduct research and disseminate information leading to the development of effective family support and education programs, practices, evaluations, and policies. It is presently conducting a series of case studies that examine state level policy, specifically in five pioneering states.

Home Instruction Program for Preschool Youngsters, HIPPY USA

HIPPY USA/NCJW

53, West 23rd Street, 6th Floor

New York, N.Y. 10010

(212)645-4048

Maria Diaz

The Home Instruction Program for Preschool Youngsters is a program originally developed and tested in Israel with disadvantaged children and their families by the National Council of Jewish Women in Israel. The first HIPPY programs began in the US in 1984 and as of 1991 there were 58 programs operating in 16 states. The program consists of a curriculum of home-teaching designed to help low-literate parents with the necessary structure to implement a school-readiness, home instruction program. Paraprofessionals visit each parent at home every other week. In alternative weeks parents meet with other parents in a group setting to review their progress and learn about available adult education programs and other parent services.

HIPPY USA supplies training and technical assistance to the national network of local HIPPY programs in the USA. The role of the national office includes developing program curriculum, disseminating information, coordinating research and evaluation, and developing regional capacity for training and technical assistance. In Arkansas, the Better Chance Act, 1991, provided state funding to 33 HIPPY programs across the state.

National Center for Family Literacy

One Riverfront Plaza, Suite 608

Louisville, KY 40202

(502)584-1133

Sharon Darling, President

The National Center for Family Literacy was established in July 1989 to promote family literacy and to see it implemented effectively across the nation. In its first year it assisted 59 cities and communities across the nation to replicate the Center's comprehensive family literacy program model. The Center has also provided planning seminars and implementation workshops for policymakers, administrators, and educators to help them develop their own family literacy policies and programs. The Center is sponsoring the first national conference on family literacy in April 1992 at the University of North Carolina, Chapel Hill.

Parents as Teachers National Training Center

University of Missouri-St Louis,

Marillac Hall, Room 307

8001 Natural Bridge Road

St Louis, MO 63121

(314)533-5738

Mildred Winter, executive director.

The Parents as Teachers program, which is now implemented statewide in Missouri, is being replicated in communities in 35 states and in Australia. The Center provides training, research, and curriculum development and promotes public policies that support early childhood family education. The Center has trained and certified more than 3,500 parent educators from across the United States and from several other countries.

Parent Action

2 Hopkins Plaza
Suite 2100
Baltimore, MD 21201
(410)752-1790

Rosalie Streett, executive director

Parent Action, the only national membership organization for all parents, is working to ensure that America's governments, workplaces, and communities have policies and services that support and strengthen families. The organization was founded by Dr. T. Berry Brazelton, Bernice Weissbourd, and Susan DeConcini.

Activities include public awareness to increase respect for the role of parents; promoting family-friendly legislation on health, education, income security, and child care; assisting states to form State Parent Action Networks (SPAN); and developing corporate partnerships to help employers implement family-friendly personnel policies. Parent Action members receive a quarterly newsletter, *Parent Post*, legislative alerts, and other services.

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