

THE PREVENTION REPORT

The National Resource Center on Family Based Services [Spring 1992]

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We welcome articles related to family-based services from practitioners, administrators and other interested readers. Legislation, research, practice methods, new materials in the field, upcoming prevention conferences, as well as responses to articles appearing in this publication, are all welcome. Address inquiries or submissions to *The Prevention Report*, National Resource Center on Family Based Services.

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FAMILY SYSTEMS AND POVERTY PROGRAMS

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INTRODUCTION

I would like to share some thoughts about the application of systemic theory to poverty programs. First I would like to briefly map a field of what are increasingly called "family-based" or "family-centered services." Within these large parameters, I would like then to enlarge the scale so we can look at one corner of the field and focus on an anti-poverty program whose transformation illustrates well, I think, some of the effects that can occur in an agency when the administration and staff adopt a family systems framework. I'd like then to look at the lines through this corner of the field charted by the family systems training the NRC has developed for these programs, and the philosophical assumptions on which the training is based. Finally, I want to return to my original small map and suggest some of the things the family systems map may make it hard to see.

MAPPING THE FIELD

As a general set of principles, family-centered programs identify family strengths, follow the family's lead in setting goals, enhance inner and outer resources, focus on the family as a whole rather than on any single "problem" person, and offer a comprehensive and well-coordinated mix of concrete and therapeutic assistance.

Imagine a continuum along which we could locate three types of family-based programs. On the far left we would place programs that fall under the rubric of family support. This movement, which emerged in the 1970's and built on the self-help, parent education, and settlement house movements, now includes thousands of grass-root family support and education programs around the world. These programs are characteristically available to all families. They are most frequently located in community resource centers. And they offer new parent groups, community bulletin boards, child care registries, development checks or health screening for infants and children, and information and referral to other community services. To promote the development of all children and families, family support programs attempt to empower and strengthen adults as parents, providers, and nurturers.

To the right on our continuum we could locate preventative family-centered services. These programs for families at risk

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often target unemployed and low-income families who voluntarily request assistance in a number of areas. I will come back to these programs in my case study, but let me mention here that "family development" programs may be housed in county extension programs—working, for example, with distressed farm families or youth at risk—in JTPA or Employment Services, in schools or in Community Action agencies. Rather than simply distributing concrete resources, they help families develop skills they need to become economically independent and emotionally more resilient. Rigorous family development training programs encourage staff to think systemically about families, to provide integrative case management services, and to develop ongoing personal relationships in which families create their own self-sufficiency plans.

Finally, at the far right of the family-centered continuum we can place what are commonly called **intensive, crisis intervention, family-based or family preservation programs**. Created in public and private child welfare, mental health and juvenile justice agencies following the passage in 1980 of the Adoption Assistance and Child Welfare Act, these programs are designed to prevent the unnecessary out-of-home placement of children from seriously dysfunctional families, in most of which there has been some form of abuse or neglect. Often referred to as "multi-problem" or "multi-need," many of these families are involved with drugs, many have a child who is handicapped or has special health care needs, and most are poor and receive AFDC assistance. Overall, family preservation programs have been highly effective, preventing out-of-home placement for 70 to 80% of the families they see; they provide short-term, intensive services, usually in the family's own home, using a range of concrete and therapeutic services designed both to remediate problems and strengthen the whole family and its network.

ONE CORNER OF THE FIELD: A CASE STUDY OF MID-IOWA COMMUNITY ACTION AGENCY'S FAMILY DEVELOPMENT PROGRAM

In 1984, after many years of serving families throughout a five county area in mid-eastern Iowa, the board and administration of the Mid-Iowa Community Action Agency decided to find out just how many of the families they had served were actually out of poverty five years after their contact with the agency's services. They were disillusioned to find that less than 25% had moved out of poverty. And of the 25% who had been successful, over 70% became so by marrying someone else with a job. "We would have been better off putting all our resources into a dating service," quipped Executive Director Gary Stokes.

Based on these startling findings, the organization made a commitment to change its mission: instead of providing emergency assistance through various forms of services and handouts, they would begin helping families climb the ladder

out of poverty through ongoing, developmental relationships between families and family development workers. Staff people were trained in family systems theories and practices by the National Resource Center on Family Based Services, the organization assessed how it might be restructured to support these new practices, and a tremendous enthusiasm began to build as people started to reconceptualize their agency as a learning laboratory about families. Families who used MICA's services began to make greater use of community resources; they were able to significantly reduce serious risks to their well-being, both concrete and interpersonal; and as they began to achieve the goals they had set for themselves, many found themselves no longer needing public assistance.

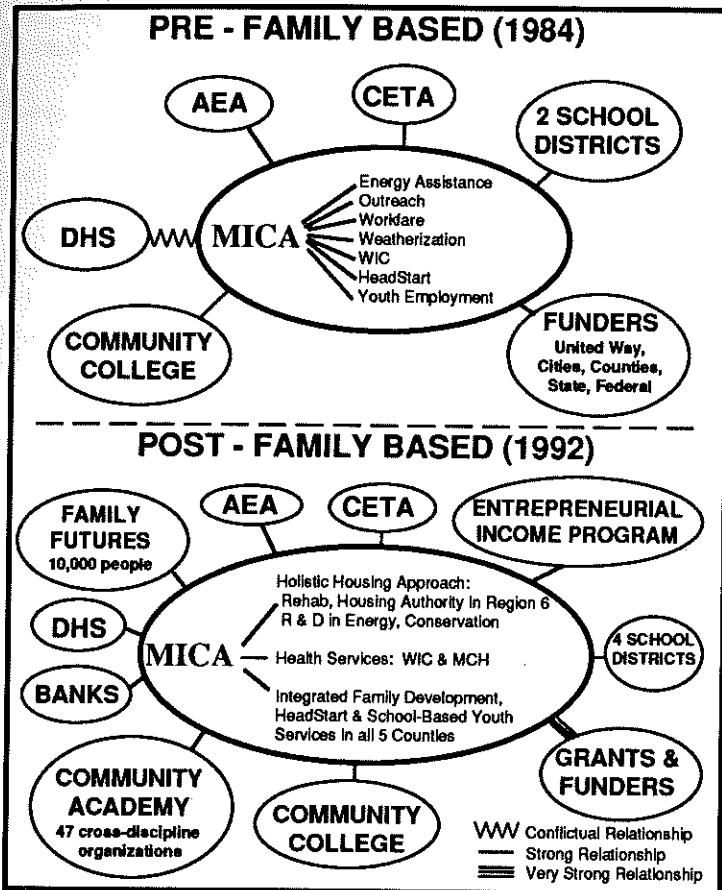
BEFORE AND AFTER: THE MICA ECOMAP

"In 1984," MICA Associate Director Arlene McAtee recalled, "we tended to be rather self-righteous. 'Nobody is helping families like we are,' we thought. 'We're the only ones who really care.'" Of course, when the condition of the head of household didn't change, agency staff realized that neither they nor their colleagues in other agencies were actually providing avenues for families' growth and development. The agency's Executive Director also remarked how vulnerable their findings made them feel: "Public policy wasn't working," he explained, "we hadn't recognized the inability of fragmented services to help people change their socio-economic status."

"Since the adoption of a family-systems approach," the Associate Director observed,

we understand where families' problems are coming from and where to go with them. We've also refocused our energy on developing a strategy with other agencies in which we can move toward common goals together. Our model has become more and more sophisticated: in addition to working with individual families, family development staff have discovered the power of working with groups of families. From families, we've extended our work to facilitating partnerships within the larger system of other community agencies, something most clearly seen in the 47 cross-disciplinary member organization meetings called the "Community Academy." Most recently, in a project called Family Futures that starts on April 21, 1992, we will be facilitating a massive conversation among ten thousand people in five counties that will assess the state of families in our area, how they can function better, how services can be improved to bring this about and how the whole community, including the service community, can make this happen.

In the diagram below, we can see how the agency's ecomap has changed since the adoption of a family-systems approach:



Internally, this approach has transformed an agency once organized around categorical programs and funding streams directed at the head of household—a situation which results in an array of fragmented services that treat isolated problems—to an agency organized around integrated services designed to respond to the needs and situations of the entire family. I haven't included an organizational chart of the agency here, but it is fascinating to see the parallel changes there, too: in a notable realignment, staff people are organized not according to funding source but according to function, a shift that allows people to focus on the needs of families rather than on the issues of grants management. The role of the Executive Director has been transformed as a result of this paradigm shift as well: no longer focused on monitoring programs, this person now facilitates family, organization and community development and disseminates the knowledge gained in this learning laboratory.

Externally, MICA has formed and continues to strengthen a whole web of interacting relationships: there are more alliances, the problematic ones have been strengthened, and the support from local, state and federal monies has doubled. It is critical to note that within this web, interactions center not

on negotiating this service or that one for a family, as might traditionally be the case, but on addressing together the question of how to better serve families in the community. If before 1984 MICA's partnerships were characterized by networking and coordinating, now, in the post-family systems era, these relationships have achieved a higher level marked by collaboration and, in some cases, the movement toward strategic alliances.

According to the vertical organizational partnership continuum conceptualized by MICA administrators, networking involves partner organizations in a low-risk exchange of information, usually carried out by line staff and mid-managers, but not by top management. The next level of organizational partnership, coordination, involves an agreement between organizations to cooperate programmatically, again at the level of line staff and mid-management. Benefits here are continued low risk, exchange of information, more efficient programming and modestly more harmonious services. At the level of collaborative partnerships, organizations plan a program or project together, involve top management, and may share some resources. At this level the risks become greater, as organizations expose to each other their ability to complete the project at a high level of performance. Greater, too, are the benefits to be gained: exchange of information, more effective programming, more effective use of resources, and greater impact on the problem being addressed. Finally, at the highest level of organizational partnership, there are the strategic alliances. Rarely found in human services and education, though somewhat more common in business, say MICA administrators, these partnerships involve both high-risk and high-reward. Here, at the highest levels, two organizations (or more, in theory) plan their organizational futures together: they have considerable overlap, both knowledge and resources flow back and forth between them, and they bet their futures on their partner's ability to fulfill their end of the alliance. The high reward for this type of partnership, in addition to those cited above, is a stronger financial stability for both organizations since in joining resources and people, the organizations now present a more powerful and effective package to funders. "It's clear for us now," explained the Executive Director, "that strengthening these partnerships is one of the central strategies for MICA's continued organizational development."

"The basic fuel and product of the organization have become one and the same now," the MICA Family Services manager explained in concluding our interview. "It's a matter of adding to the store-house of knowledge about families by learning what families teach us about themselves, ourselves, and the community we are building together." We can also see, based on a definition of empowerment developed by L. M. Gutierrez in her essay "Working with Women of Color: An Empowerment Perspective" *Social Work*, March, 1990: 149-153), how MICA's projects develop "critical consciousness," reduce self-blame, encourage personal responsibility

and enhance self-efficacy among family and community members alike. Innovative projects like "Family Futures" that organize a thousand groups of ten family and community members each to answer the questions—"What do we want for all children in our community?" "What do families in our community need to rear children successfully?" and "How can we do a better job supporting families?"—develop people's sense of group consciousness, reduce their isolation, and encourage the perception that one's problems are part of a larger societal structure, not just the result of individual inadequacies. At the same time, by encouraging families and communities to clarify their values, assess their experiences and set new goals, family development projects underscore family and community members' ability to take responsibility for themselves. Supporting families and communities as they develop their skills and resources only further enhances their experience of self-efficacy, the sense that we can influence the outcome of our lives.

**THE LINES IN THE FIELD:
NRC'S FAMILY DEVELOPMENT TRAINING**

When we were approached by The Iowa Association of Community Action Directors to develop a family systems training program for line staff and supervisors, we brought together an array of people throughout the state who knew about poverty in Iowa: people from DHS and poverty lawyers, academics and women on AFDC from the Welfare Answering Service, community action agency staff, domestic violence people, and labor activists. Their lively debates, along with family systems theory, helped articulate the philosophical and political assumptions that would underlie the curriculum we would develop.

Principles of Family Development

1. The purpose of Family Development work is to support and empower families. This means to work collaboratively with the family to identify 1) their goals, 2) the barriers to reaching them and 3) realistic means for achieving them.
2. Behind people's inability to be self-sufficient in today's society are structural problems in our society and consequently, on an individual level, a lack of resources and skills.
3. The psychological, emotional or interpersonal dysfunctions we may find in families are directly related to these insufficiencies.
4. Problem behavior is often a misguided and costly attempt to solve one's own problems (e.g., alcohol use as self-medication, child acting out to get an outside person to help the family). They are coping strategies.
5. Even those families who seem to be in the most trouble have strengths and ways of coping which are the necessary foundations for any further development.

6. Therefore, problem solving or case planning with families must identify strengths, identify missing skills and resources, and involve the deliberate plan for their acquisition. Problem solving also involves the identification of oppressive policies, processes and structures and the advocacy and community organizing efforts to change them.

Developing a training program that would put these systemic assumptions into pedagogic practice was our next task and the following 8 day agenda outlines the systemic topics as they progress from family through organizational to community systems issues. Whether the topic focuses on family dynamics, interviewing techniques, assessment, case planning, empowerment strategies, inter-agency dilemmas, or community development, each one reflects a point of view that is interactional, holistic, adaptive and contextual:

FAMILY DEVELOPMENT SPECIALIST TRAINING

DAY 1 - Mapping the Terrain: Family, Development, Specialist

- ◊ Family Structure, Dynamics, and Life Cycle
- ◊ The Nature of Poverty: Cultural Baggage
- ◊ The Rescue Triangle
- ◊ Principles of Family Development Work

DAY 2 - Becoming an Ally

- ◊ Interviewing
- ◊ Joining
- ◊ Gender and Multi-Cultural Awareness

DAY 3 - Assessing Family Strengths and Challenges

- ◊ The Ecomap
- ◊ The Genogram
- ◊ The Time-Line
- ◊ Discovering Family Strengths: Relabeling

DAY 4 - Naming the Pain (I)

- ◊ Introduction to Dysfunction
- ◊ Family Roles and Codependency
- ◊ Depression and Suicide
- ◊ Chemical Dependency
- ◊ Violence Against Women

DAY 5 A.M. - Naming the Pain (II)

- ◊ Child Abuse
- ◊ Survivors

DAY 5 P.M. - Envisioning and Finding the Way (I)

- ◊ Exception, Miracle, and Coping Questions
- ◊ Setting Objectives

DAY 6 A.M. - Envisioning and Finding the Way (II)

- ◊ Case Planning as Problem-Solving
- ◊ Plan Implementation
- ◊ Agency Triangles

DAY 6 P.M. - Claiming Power (I)

- ◊ Assertiveness
- ◊ Negotiation

DAY 7 - Claiming Power (II)

- ◊ Empowering Families in Groups
- ◊ Community Development

DAY 8 - Saying Good-bye and Taking Care of Ourselves

- ◊ Nurturing and Self-Esteem
- ◊ Saying Good-bye and Celebrating Successes
- ◊ Taking Care of Ourselves

THE FAMILY SYSTEMS MAP: ASPECTS OF THE TERRAIN THAT ARE HARD TO SEE

It's certainly true, if you're a hiker, that a trail map helps you find your direction, even though it cannot capture the beauty of the colors, the smell as you brush against the herbs with your pack, or the gnats that make you wonder if it's time to turn back. But the danger of any map is that in charting one set of trails it blinds us to other, equally viable ways of crossing the terrain.

What are the limits of the application of family systems theory to poverty programs? First, I think, is the danger of thinking of poverty as primarily or even exclusively a family problem. This point of view is not far from the blame-the-victim "culture of poverty" school that holds that it is people's own deficiencies that create and maintain their poverty. It follows, from such a view, that we can realistically expect to get a family out of poverty by "fixing" it and, further, that this task can be accomplished by well-trained, family systems anti-poverty staff working with one family at a time. Now I don't mean to suggest that we cannot help people in a family develop their employment and interpersonal skills. The question is the link between working with families on these issues and their access to mainstream society, good paying jobs, jobs with benefits. For example, we can work with an African American family and maximize their intra-familial dynamics, but we can't prevent the fact that people in Dubuque, Iowa, will burn crosses on their lawns. The question is: How far can an agency go, once they've adopted a family systems approach, in changing the basic conditions that poor families face?

Let us say that poverty is not primarily a family issue. It has family effects, which our programs are designed to overcome, but really it's an issue created at a meta-level, at the level of society as a whole. It then follows that family-based anti-poverty programs must go beyond the family to act as activists and advocates, community developers and community organizers. One can in fact see some of this happening in the example of MICA's developmental process.

Yet here is where the trail seems to meet a dead-end. How can we read poverty from a systems point of view? I would suggest that, like any problematic behavior of an individual, or any cultural practice of a sub-culture, poverty must be made to make sense in its context. Like any symptom, poverty must be understood as playing a function in a larger system. And what would that function be? Doesn't systems theory point us necessarily to the awareness that certain levels of poverty and unemployment meet certain needs for our current economic system (needs that might well be met otherwise)? If poverty is indeed functional in the context of our economic system, what does that mean for poverty programs and what social workers can do? In the short term, families need help, they need family-based services, and we are in a position to provide them. In the long term, however, we may need another map to help us see how our economic system is constructed and the ways it can be changed.

For more information about Family Development Training, see page 17 or contact:

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The NRC in Idaho

The National Resource Center on Family Based Services is pleased to have been part of the development of family-centered services in Idaho described in the article on page 6 by Ken Patterson, Administrator of Family Services, Idaho Department of Health and Welfare.

In the mid 1980's, the Idaho Department of Health and Welfare was selected to be a targeted project state for the Center. As one of these states, Idaho received focused consultation, technical assistance, and training from the Center for the development of a family-centered social services system. Staff from the Resource Center met with regional services managers, regional program supervisors, child welfare supervisors and the Bureau of Social Services Director and staff in Idaho to kick off the state's new family-centered services initiative. As a result of this meeting, the Bureau created a task force, with representatives from each region, to develop a plan for the implementation of family-based services. The Family-Based Services Task Force recommended a family-centered service design for *all* programs, including child welfare, adult protective services, youth rehabilitation, and mental health.

The Center continued its work with the Bureau by reviewing and making suggested revisions in the *Idaho Rules and Regulations Governing Social Services*, providing ongoing technical assistance to the Task Force, and conducting training for supervisors and line workers statewide. The training covered an orientation to family-centered practice and family systems theory as well as caseload management, team building, family-centered supervision, and training of trainers.

The Center believes that the Department of Health and Welfare is close to achieving its goal of a truly integrated and responsive family-based social services system.

INVESTING IN AN AGENCY'S "WORK FAMILY"

Idaho's Experience in Implementing a Family-Centered Practice Model

by Ken Patterson, Administrator
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In 1985, after near failure of a Health and Human Services audit regarding compliance with Public Law 96-272, the Idaho Department of Health and Welfare did some soul-searching. The self review found a mature and seasoned field staff who operated a "rescue" based child protection and juvenile justice program. The principal strategy seemed to be to assess and place. Between forty and fifty percent of the available program dollars were expended for alternate care.

After obtaining consultation from the National Center for Family Based Services (which later was also involved in training), Idaho resolved to organize its future around making true "reasonable efforts" to preserve children in their homes and communities.

IMPLEMENTING CHANGE

While many states and agencies have chosen to "preserve" families through special units that focus intensive services on high risk populations, Idaho has chosen to involve its entire field staff of nearly four hundred in an agency-wide adaptation to principles of "family centered practice." Currently the service areas of Child Protection, Juvenile Justice, Child Mental Health, JOBS, Adoptions, and Substance Abuse Treatment are integrated into a single practice model with common administration.

Federal site reviews of the JOBS and CWS aspects of Idaho's program express positive regard for the way in which services are organized and delivered. Perhaps the most dramatic indicator of change, however, is the reduction of out-of-home placements—from 2613 in 1985 to 823 in 1991, or an almost 70% reduction in removals.

Clearly the resources available to the state have been reorganized to meet family needs. However, nearly everyone working in the Idaho system stresses the developmental nature of the agency change. Every day each region and work team struggles with capacity and risk dilemmas. Idahoans are quick to point out that, while the direction "feels right," written policy to guide family centered practice was slow to develop, as was broad community acceptance of preservation instead of placement.

THE CHANGE PROCESS

Engaging agency staff—a "work family"—in a change process is similar to engaging a family in a change process. In addition, staff and teams who feel empowered by their agencies will reflect and share the empowerment in their work with client families.

The leaders in Idaho assert that agencies seeking to shift from a traditional service model to one of family focus can successfully re-train and re-direct staff who have been accustomed to working in rule and policy driven programs. They recommend against creating special units whose job becomes "family preservation," because to do so would risk creating a schism between units, with inevitably some feeling left out or undervalued in the "new" direction.

From its six-year journey into the uncharted territory of systems change, Idaho offers five observations about its experience. These observations represent levels of understanding that were not present when the journey began. They may hold value for the next agency which contemplates change or for those who find themselves in the midst of change.

1. Parallel Process

Idaho is struck by the parallel nature of actions taken by both families and agencies toward improving the environments in which they live and work. When a father seeks to stop his son's drug abuse, when a case manager seeks to stabilize and preserve a multi-problem family, and when an administrator seeks to re-orient his or her agency toward a new practice model, each is confronted with the constraints of skill, initiative and history. Traditional models have emphasized that these deficits be detected and studied.

Individuals are members of multiple systems simultaneously. We believe that individuals and groups carry their experiences across system boundaries and thus carry the traits, experiences and behaviors from one system into another. In this manner parallel trends move from management, to direct service staff, to parents, to children. Management policies that focus on weaknesses in the delivery system, as in the traditional models, will inadvertently convey that focus to families. Management policies that convey trust in the judgment of case managers will empower the case managers to convey that same trust to the family members with whom they work.

2. Enlarging the System

Systems that encounter trouble are those that "shut down" during crisis and rigidify their boundaries. For example, families frequently present the identified "problem person" to the agency and request that this person be removed so that the system can stabilize. Our experience tells us that enlarging the system—i.e., bringing in more perspectives, ideas, and supports—during crisis is helpful. The assessment tools of Eco-Map and Genogram are designed to assist both the family and intervenor in gaining this enlarged perspective.

Agencies should consider enlarging their own systems on two levels. First, direct service staff should work in a "team" environment where the risks associated with preserving abusive, neglectful, delinquent, and chemically dependent families are shared by a group instead of placed on the head and shoulders of an individual. Clinical skills, innovations, and successes that are unavailable in the traditional individual supervision model can be encouraged and shared in this "team" context.

Second, agencies should not assume that they alone can complete the task of family preservation. Joining with schools, police, churches, other agencies, and natural helping systems is essential. Idaho created several problems by developing the concepts of their Family Centered Practice Model internally, without marketing the change in agency direction to the community. In some communities the changes were perceived as an abrogation of the agency's responsibility to protect children.

3. Training

Sustained, multi-level training is required to support staff skill and comfort development as an agency changes its practice model. In Idaho this included: a two-week orientation to management in the Family Centered Practice Model, a two-week academy for all supervisory staff, a fifty-hour course in family systems for all direct service and supervisory staff, and a four-week academy program for all newly hired direct service staff. Additionally, contracts for clinical consultation were established in all areas of the state.

4. Infrastructure Rebuilding

As agencies shift practice models, staff members will experience increasing dissatisfaction with the rules, policies and management systems that have been the backbone of their traditional operation. For example, they will encounter policies that allow spending \$400 to clothe a child at the time he or she enters foster care, and yet do not allow purchasing a winter coat for a child who remains in his or her own home. They will question the value of an automated payment system that routinely cranks out checks for foster care and yet does not have the flexibility to give a case manager the cash with which to pay a delinquent utility bill that threatens family safety. They will express frustration at funding sources that are driven by the diagnosis of the problems of an individual, when the staff are striving to arrange resources around the known strengths of a family.

To fully implement a model of Family Centered Practice requires that the "hardware" of past agency operation be abandoned or radically modified. This includes payment systems, caseload standards, work hours, and method of supervision. For a period the agency may find itself without the comfort (or encumbrance) of structure. The "manual" may become contradictory to the developing practice.

It will be necessary to re-build the infrastructure around the new practice model, once a period of relative homeostasis is reached. To establish policy in the midst of the model shift may be comparable to changing the tires on a moving car.

5. Developmental Nature

Perhaps most important is being aware that the changes the agency seeks will be developmental in nature. Individual workers will "get it" at differing times. Certain offices or work units will grasp and implement the desired directions immediately, while others will move at a slower pace. Persons at all levels in the organization will ask, "When will we be there?" or will ask for concrete indicators of Family Centered Practice.

After six years, Idaho sees clusters of indicators of progress toward the desired model—e.g., expressions of client/family satisfaction, how money is spent, staff turnover decline, and of course reduced dependence on out-of-home care. But no single indicator suggests that the system has developed to its maximum potential.

Continual threats are present which can arrest or even reverse agency movement toward Family Centered Practice. These threats include child death or injury in a family receiving preservation services, crimes against others perpetrated by an adolescent in a family receiving preservation services, and fiscal crisis. Top management must anticipate and strategically prepare for such threats. Such preparation would include handling media questions, supporting direct service staff to continue with the model, and prioritizing services nearest the client/family in time of cutbacks.

As workers and work units develop skill and confidence in the model and successfully manage the inevitable threats, the acceptance of the "new" model by the organization and by the community seems to reach a point of critical mass. At this point, support for the practice model becomes self generating on the part of the direct service staff, the consumer families and the community.

CONCLUSION

In the process of implementing the Family Centered Practice Model—in order to realize the goal of family empowerment—Idaho was also challenged to search for management strategies which would empower its workers. It found that in order to move families, it also needed to move organizations. Agency personnel hope that other agencies will be able to build upon what Idaho has learned and will benefit from Idaho's experience.

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THE RIVER OF CULTURE: A Strategy for Organizational Assessment and Intervention

By Tamara Cordova, Idaho Department of Health and Welfare
Kathryn Morris, Ph.D., Idaho Department of Health and Welfare
and Don Probasco, Oregon Children's Services Division

REDIRECTING AN ORGANIZATION'S FOCUS

An organization which chooses to embrace a family-based practice philosophy must create a climate which encourages and then reinforces staff commitment to the philosophy and which also facilitates changes in practice. Redirecting an organization's focus to become family-based often requires radical shifts in the thinking and behavior of individuals who joined the organization under earlier, child-focused philosophies. If organizations do not acknowledge and build on the very strengths that made their staff valued workers during an earlier era, experienced staff will feel devalued and will resist change. Family-based practice is founded on principles of family empowerment, of building on strengths, and of genuinely valuing the participation of each family member; therefore, leaders of organizations are challenged to employ management strategies which seek to empower, strengthen, and value staff.

It is unlikely that a family-based practitioner would intervene with a family without first understanding the family's perceptions of their issues, needs, and solutions through an assessment process. Interventions to bring about change in organizations are often initiated based on accurate data and on sound philosophy or good intentions, and yet they omit an assessment of the members' perceptions of issues, needs and solutions. Intervening without member participation may seem expedient, but it rarely results in lasting change.

Lasting change is usually facilitated by a collective commitment to a clear vision, based on a consistent set of values which are embedded throughout the organization. Just as behavior of family members is often based on their values, so behavior in organizations flows from the values of its members. When change is approached without consideration for the deeply held values and beliefs which may support or undermine any change effort, lasting change is difficult to achieve.

AN ORGANIZATION'S CULTURE

It is useful to think about an organization as having a distinct culture which evolves over time. Every organization has a culture shaped by the experiences, values, and vision of its collective membership. The culture is impacted by factors such as past and present members, community values, and the organization's policies and leadership. We have applied family-based principles—including ideas about family assessment, and the ritual of storytelling—to the idea that an organization has a culture, and have developed an organizational assessment and intervention tool known as The River of Culture.

The River of Culture is a process to examine an organization's culture—its traditions, oral history, myths, heroes, slogans, and practice. The River is organized around principles of empowerment, valuing strength and diversity, and is based on the assumption that every member has value. It is also a process which allows individuals to join together, look at the past, and focus on strengths to build upon for the future.

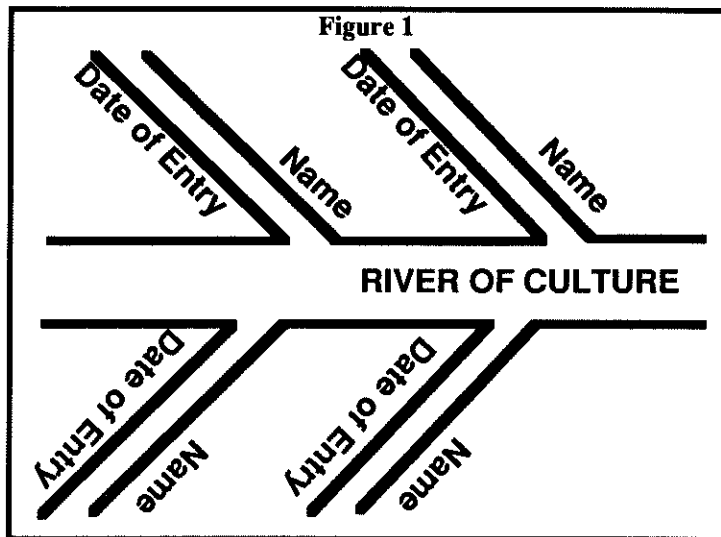
The River of Culture uses symbolism throughout the intervention which metaphorically compares an organization's history to a river—ever moving, changing, and taking twists and turns, with churning rapids and calm shallow pools. Each individual involved in the organization is likened to a tributary which flows into the River. As each tributary impacts the water downstream and becomes part of the whole, so each member of an organization influences the organizational culture and is impacted by it.

CREATING A RECORD OF THE RIVER

The process begins by bringing a group together and having members arrange themselves in order of organizational longevity. Beginning with the elders, the members—individually or in small groups—tell the agency story by talking about what the organization was like when they joined. They address such issues as:

- What were the priorities of the agency?
- Who was the leader and what was his or her agenda?
- What issues were addressed and not addressed?
- How were staff members trained and oriented?
- Who were the clients and how were services provided?
- What was the image of the agency?
- What was the political climate?
- Who were the heroes?

A scribe enters the person's name and date of entry on a tributary of the River, which is drawn on a length of butcher paper on a wall or table (see Figure 1). The scribe then writes or draws to reflect the comments expressed by the person talking. This discussion of the culture continues until everyone tells his or her story and is added to the River. Often there are gaps in the River which were not completed during the process because no one entered during that time period. It is useful to ask the group to fill in the gaps and bring the River up to the present. There is often a great deal of creativity during this process, as participants add symbols to the river—such as dams, sharks, or rapids—to reflect turbulent times.



Participants are then asked to identify themes they have noticed during the process, and these themes are listed on flip charts or illustrated on the River. This should begin to identify some of the issues the organization needs to address, both positive and negative. It is especially critical for organizations contemplating change initiatives.

MOVING FORWARD

Depending upon the purpose for doing the River, the size of the group, and the time available, any of the following may be done following the construction of the River. Participants have described each of these as useful.

Futuring: The River can be used to continue the metaphor in planning for the future. The present is identified as a point in time on the river with the balance of the river continuing on into the future. The facilitator passes out pieces of paper (sails for a ship) and asks each person or group to draw a picture or symbol of their vision in five or ten years. The facilitator places a ship on the River with an empty mast. Participants are asked to share their "vision sail" and briefly describe it as they add it to the ship. Following the addition of sails, the facilitator places a blank flag, symbolic of the mission, at the top of the tallest mast and asks, "What flag will the ship fly to move it in one direction while utilizing the strengths of each diverse sail?" While agencies often have mission statements, this process gives members an opportunity to examine their own visions in the context of the agency's mission, generally resulting in a stronger commitment to the mission and an increased willingness to move forward.

Leaving Behind: After identifying themes apparent in the River, individuals are asked to identify and draw a picture of something they want to leave behind as they move forward into the future. They are then asked to let it go symbolically by first sharing it with the group and then throwing it away in a wastebasket, fireplace, or bonfire. This is particularly helpful when members have old hurts or practices which have prevented them from making changes.

Creating Rituals: Rituals in families provide belonging and continuity for its members, most often through celebration of meaningful events. This is also true for organizations and is especially important during times of great change or when turnover

is an issue of concern. One ritual which can be developed as part of the River process is a Victory Log. The Victory Log is the celebration of individual or group victories by recording these events. Group gatherings can begin by making additions to the log. This provides a way of celebrating the group's history and accomplishments. Without this sort of record, groups are often unaware of how fast they are moving, or on what a broad basis.

Many groups find it helpful to designate a historian to maintain a written and pictorial history of the group's progress. These records are useful in the orientation of new staff.

BENEFITS

The benefits of using the River as a starting point for assessment and intervention include the following:

- It is a visual process.
- It is an energizing process which moves people forward with purpose.
- It is a healing process when change has been painful.
- It allows individuals to see themselves as part of the larger whole.
- It results in a lasting record which can be displayed and maintained through the addition of new members.

This tool has been used in a variety of contexts, including visioning, future planning, team building, defining goals to plan a conference, gaining consensus, and confirming commitment to the mission. It has been used to allow a new leader or new members to join with and understand the culture of the agency, and to undertake a change in overall direction. It has been used with groups as small as ten and as large as seventy. With large groups, each person is entered as an individual tributary, but the story is told in small groups to allow completion of the River in a time period which can maintain interest and still allow individual participation.

SUMMARY

The River of Culture was developed to assess the history of an organization, look at the current practices, and set the stage for moving forward toward goals for the future. It is a visual tool which begins as an assessment and can be adapted to be an intervention which is consistent with the goals of the organizational leadership. It is controlled through the structure of the process, which provides safety for the members to participate; staff are empowered through the very process, which depends on the input of all members in order to complete the record. The River of Culture mobilizes energy for change through a process of joining members together in a common understanding on which to base future action.

Note to readers: If you use this tool in your organization, we would like to hear about your experience. For further information, contact Tamara Cordova at:

Division of Family & Children's Services
 Department of Health and Welfare
 450 W. State, 3rd Floor
 Boise, ID 83720
 (208) 334-5700



PARTNERSHIPS BETWEEN HOME-BASED MENTAL HEALTH SERVICES AND MANAGED HEALTH CARE

By Vera O. Pina, MSW

Clients for the mental health programs of St. Charles Youth and Family Services—a not-for-profit child welfare and mental health agency in Milwaukee, Wisconsin—can be court-ordered children or youth. Alternatively, clients can be referred by new partnerships that we have developed with insurance companies—either directly, or through HMOs that are managing the mental health dollars for insurance companies. This article will explore our experience with these new partnerships.

BACKGROUND

In 1979, our agency initiated intensive in-home family-based services, beginning with a Home and Community Program model serving adjudicated delinquent youths and their families. In the next three years, the department expanded to include five additional program models: the IFDS (Intensive Family Development Services), Lauer Center (Educational Support Program), MPS (Monitoring Program Services), MPS II (Mentor Program Services), and SCIDS (Systemic Crisis Intervention and Diagnostic Services). In 1991 two of the models (IFDS and SCIDS) became the first intensive in-home family-based programs to be licensed by the State of Wisconsin Office of Mental Health specifically to provide mental health services in the home.

Because of the reputation that we had developed during the early 1980s, our agency was approached by a managed health care organization to explore the possibility of developing innovative continuum of care services in the mental health network. It helped that the leaders in the HMO were professionals who had been practitioners in mental health and who had educated themselves in business administration. We spent approximately three months meeting regularly for the purpose of getting to know each other. We spent most of our time learning to speak a common language. I had no idea what was meant by CPT codes. HMO leaders had no concept of indirect services. We explored our values and beliefs about human services, about what families needed in order to maintain strong stable mental health, about hospitalization of children and youth, and about escalating health care costs. The time we spent together was invaluable to the development of our partnership. We found that we had much in common and that our differences were the strengths that we were bringing to the partnership. Trust was established and we were then ready to make commitments. We were prepared to spend the first year learning and being patient with each other, and we were determined to provide the best quality care while maintaining cost efficiency.

EDUCATIVE ROLE OF FAMILY-BASED PROFESSIONALS

I cannot over-emphasize how important it is for family-based practitioners and managers to spend time helping the business community to understand the equal importance of direct and indirect costs. The business community is very familiar with a therapist's spending a direct service hour with a client—thus the fee-for-service concept.

However, the concept of networking with all other professionals and systems that are impacting on the family system is an idea and practice with which the business community may be unfamiliar, and we are uniquely positioned to explain it to them. It is this networking with other systems that best ensures that the family will not "fall through the cracks" and develop the often repeated pattern of floating from one therapist to another, continuously avoiding the resolution of family problems. Clearly these are the types of conditions that escalate mental health care costs.

Another major task that family-based mental health professionals must be ready to undertake is that of educating the medical community and other fellow professionals in the mental health field. You must be prepared for resistance. As Virginia Satir often stated, "All resistance is protection." You will find that child/adolescent hospital and clinic staffs are often genuinely not convinced that mental health work can be done in the home. Furthermore, they are often fearful that if you are successful, their jobs will be eliminated or, even worse, they will be expected to do their work in the home.

The other major issue is that traditional mental health professionals often see short-term treatment and long-term treatment as an either/or situation. Our job is to help our fellow professionals understand that both are part of a continuum. For example, we have found that "chronic" cases can be helped in the home with the understanding that "short-term" hospitalization must be available. After three years of working closely with child/adolescent hospitals and clinics, we have discovered that we really need each other. Mutual respect and trust have developed. We find ourselves joining forces to help others understand the new continuum of care that we are creating. We find ourselves gathering data in the home and in the hospitals and schools, sharing our knowledge to better understand and treat such problems as cocaine addicted children.

SUMMARY

Our experience with providing family-based mental health services in cooperation with managed health care systems has been very rewarding. Through our joint efforts we have been able to arrive at a fee rate that allows for direct and indirect costs, while at the same time maintaining cost efficiency. We are considering expanding the number of HMOs with which we will contract for services. The partnership with managed health care, through the HMOs' contracts with the Title 19 population, has strengthened our agency's mission to provide the best quality mental health services to the poor and the disadvantaged.

Note to the Reader: For more detailed information on the mental health models, please contact Vera O. Pina, St. Charles, Inc., Family Development Center, 151 South 84th St., Milwaukee, Wisconsin 53214. (414) 476-3710.



NEWS FROM THE NATIONAL RESOURCE CENTER ON FAMILY BASED SERVICES

AN UPDATE ON THE CENTER

This has been an exciting time at the National Resource Center on Family Based Services. We have several new training projects which offer promising developments in the field of family-based services. These include projects working with the Head Start population in schools and with tertiary care providers in hospitals, as well as a project to create a family development refresher course. We have developed a training videotape on circularity and sequence of behavior for use in Missouri. The supervisor's curriculum has been completely revised by Bonnie Mikelson, and we have developed new, specialized training on family reunification. One of our most exciting projects currently is the development of a training curriculum for work with families with drug-exposed and/or HIV-positive children.

This past summer and fall we conducted Child Welfare training in a number of states, including Missouri, Oklahoma, Florida, North Dakota, and Nebraska. We conducted training on "blended families" for the Iowa Department of Human Services, and in Maryland and Florida we piloted our newest curriculum, which focuses on work with drug-affected families. Family Development training continues to grow. Training sessions took place in Iowa, Illinois, Montana, and Alaska. Travelling coast-to-coast, Center Director Marcia Allen provided technical assistance to programs in Montana, Hawaii, Idaho, South Carolina, Texas, Florida, Georgia, and Indiana.

The research team reports that the Center, in collaboration with the Institute for Social and Economic Development, will evaluate Families First in Minnesota, a seven county pilot family preservation project. And while we're on the subject of evaluation and family preservation, the book *Alternative Models of Family Preservation: Family-Based Services in Context*, by Kristine Nelson, DSW, and Miriam Landsman, MSW, will soon be released by Charles Thomas, Inc. This study presents research findings on family-based services with client populations of different types and in different service delivery settings.

The Center's information dissemination staff has begun two new projects. Following up on the Center's findings in the "State Survey," we have begun an assessment of state legislation passed in support of family-based service initiatives. In addition, under a grant from the Children's Bureau, and in conjunction with the National Resource Centers for Foster Care and Adoption in Michigan, we have begun research on the new "permanency planning" project, an identification and evaluation of resources necessary to promote "lifetime relationships for children and families." As a part of that project we are identifying programs and initiatives implementing the principles of permanency planning. Join us! Help us spread the word! Complete our questionnaire on page 24.

As we continue to extend and develop effective family based services through all of the foregoing activities, we also continue to think about our wider audience. We would like to start a dialogue with readers of *The Prevention Report*. Please take a moment to fill out the questionnaire on the back page of the newsletter. Ask about our training opportunities, our research projects, our information resources. Tell us what you need. Write us your observations about the state of family-based services from where you stand. You are important to us, and we look forward to hearing from you.

PRELIMINARY FINDINGS - NRC'S STUDY OF FAMILY FUNCTIONING & CHILD NEGLECT

A preliminary analysis of findings from the National Resource Center's NCCAN-funded research study of family functioning and child neglect (Grant # 90-CA-1415) has recently been conducted. The study, which has been in progress since the Fall of 1989, was developed with three objectives in mind: 1) to identify measurable differences in family functioning between neglecting and non-neglecting families in Native American and non-native samples; 2) to assess the effects of family structure, male roles, extended family relationships, mental health problems, and substance abuse on family functioning and neglect; and 3) to assess changes and predictors of change in family functioning and neglect over a 12-month period.

By the end of the data collection period (Summer, 1992), up to 200 families will have been recruited in two sites: Tama County, Iowa, home of the Sac and Fox tribe, and a 12-county area in central Oregon where members of the Siletz and Warm Springs tribes reside. In each site up to 50 neglecting and 50 non-neglecting families, including both Native American and non-native families, are being interviewed by trained family assessment specialists. The interview consists of a series of measures covering such areas as family demographics, stress, support networks, and family functioning—from self-report and observations from videotaped family interviews; parental self-esteem, depression, knowledge of child development, male roles in child care, and drug/alcohol use; and child developmental status, self-esteem, behavioral problems, perceptions of parents, and drug/alcohol use.

Analysis of initial interview data from the first 100 families (63 in Iowa and 37 in Oregon) indicates that family history, mental health, and substance abuse differ significantly between neglecting and non-neglecting families, after controlling for per capita income, state, and ethnicity.

A history of separation and loss characterizes the neglecting families: over half of the neglecting caretakers had been placed as children for an average of two years, compared to

28% of non-neglecting caretakers; three-quarters of the neglecting families had lost a child in the past five years through death, placement, or arrest, and 43% reported child placements averaging nearly three years in length, compared to a 25% incidence of child loss and a 16% placement rate among non-neglecting families. One-quarter of the neglecting families (including a very high 39% of Native American families) also reported losses to suicide and violent death over the past five years, compared to only 10% of non-neglecting families.

Neglecting caretakers also reported family histories of alcoholism (68%), neglect (65%), and sexual abuse (49%) significantly more often than non-neglecting caretakers (48%, 41%, and 24%). Only 44% of the mothers of neglecting caretakers had completed high school, compared to 72% of the mothers of non-neglecting caretakers. There were no significant differences in the caretaker's being raised on welfare, in a single parent household, or being physically abused as a child. Among non-neglecting Native American families, childhood placement of the caretaker (60%) and a family history of alcoholism (70%) were as high as among neglecting families.

Neglecting families continued to experience more stressful events that were more upsetting to them (significant at $p < .10$) and more substance abuse (62% vs. 16%) than non-neglecting families. Neglecting caretakers reported higher lifetime rates of attempted suicide (47%), psychiatric treatment (66%), uncontrollable violence (40%), and arrests (63%) than non-neglecting caretakers (16%, 39%, 19%, and 16%). They also received more help from the community and from social services, although Native American families reported receiving one less social service in the past year than non-native families. Neglecting non-native families reported significantly fewer helpful friends and family members than non-neglecting families, but neglecting Native American families reported more.

These findings highlight some of the differences between neglecting and non-neglecting families and between native and non-native populations. These and other issues will be explored further in the next issue of *Research Exchange/Prevention Report*.

RESEARCH EXCHANGE

The last issue of *The Prevention Report* introduced the *Research Exchange*, a publication for researchers in family-based services. As we noted at that time, it is the Center's aim to provide a forum for discussing and debating research questions, and for disseminating interesting evaluation designs and findings. The content will span categorical service definitions, ideologies, and service models.

The *Research Exchange* will publish abstracts of new materials and will give updates on the Center's research projects. In addition, we would like to feature articles from our readers, as well as readers' comments on previous contributions. We welcome readers to initiate debates and to join in the debates that will be presented within these pages. Submissions may be brief commentaries or full-length articles (diskettes are appreciated).

Materials, questions, or suggestions for future issues should be sent to the attention of Miriam Landsman at the National Resource Center on Family Based Services, University of Iowa School of Social Work, 112 North Hall, Iowa City, IA 52242-1223. Telephone (319) 335-2200. FAX (319) 335-1711.

If you know of others in the field who would like to receive this publication, please let us know.

**ALTERNATIVE
MODELS
OF FAMILY
PRESERVATION:
FAMILY-BASED SERVICES IN CONTEXT**

*Kristine E. Nelson, DSW
Miriam J. Landsman, MSW*

In Press, Charles Thomas, Publisher

To obtain further information about the book, or to be notified when it is available, contact the National Resource Center on Family Based Services, University of Iowa School of Social Work, Iowa City, IA 52242-1223. Telephone (319) 335-2200 FAX (319) 335-1711.

**WHEN
LOVE
GOES
WRONG**

**WHAT TO DO
WHEN YOU CAN'T DO
ANYTHING RIGHT**

Strategies for women with controlling partners

Ann Jones and Susan Schechter

Ann Jones and Susan Schechter bring together their more than fifteen years of experience working with women in abusive relationships to offer a new, eye-opening analysis of controlling partners, and a wealth of empowering informing for women who want to change their lives for the better. Publisher Harper Collins, 10 E. 53th St., New York City, New York 10022.



NEW RESOURCES IN FAMILY POLICY, FAMILY SYSTEMS, FAMILY VIOLENCE, AND SEXUAL ABUSE

By John Zalenski, Ph.D.
Information Specialist

New resources at the Center include publications on family policy studies, on family systems applications, and on studies of family violence and sexual abuse.

Understanding Family Policy: Theoretical Approaches (1988), by Shirley L. Zimmerman, is devoted to understanding family policy at a conceptual level, within its institutional frameworks, and in practical programs. This broad ranging inquiry allows for an insightful treatment of the nature of policy formation, the social constraints within which it operates, as well as its practical complexities. The tale Zimmerman tells is worth attending to. She draws upon the distinction between "the public" and "the private" as a primary social value institutionalized at the highest levels of policy formulation. This distinction helps to explain the limited attention to family policy in American history.

Because of an (implied) constitutional right to privacy, families simply have not been included in discussions of social policy. Family life has always been strictly conceived as the concern of individuals acting within a domain free from governmental interference. The social fiction (in the "constructivist" sense) of autonomy and equality obscured the need for a policy devoted specifically to families. As a result, family "policy" becomes simply a collection of the unintended consequences of all other social and economic policies (or a piecemeal effort from a mid-level "action-center"), not a conscious effort to attend to the well-being of future citizens within the primary environment for socialization.

The chapter on "Developments in Family Policy" provides an interesting overview of how these social values have intersected with historical change, especially in the 1970's and 1980's, to generate new interest in family policy. A litany of demographic changes—including increasing poverty, changing family structure, the needs of working women, the legacy of economic inequality—all come into play. But instead of a simple story of great social shifts motivating a high-minded sea-change toward a family-centered social philosophy, Zimmerman presents a story of competition and conflict strongly influenced by the pro-family rhetoric of Ronald Reagan and his conservative entourage.

Zimmerman goes on in the book to present "frameworks" for conceiving family policy and programmatic expressions of family policy. Her book serves as a sobering reminder of the difficulties entailed in making our society work for families.

In part because of weak pro-active family policy in America, family-centered social philosophy has made its strongest inroads in the social services, especially in the child welfare system, where family policy impacts families in need (i.e., those who have forfeited the legitimate boundaries of their right to privacy) through some form of family-based services. *Family Systems Application to Social Work* (1991), edited by Karen Gail Lewis, gathers together a significant range of articles devoted to applying family systems therapy concepts to

clinical social work. Lewis believes that social work is unique among mental health professions in that it combines emphases on policy and clinical practice in a single discipline. The strength of its past and the promise of its future exist in a practice which fuses these emphases. Such a fusion, occurring through the use of family systems theory, could generate "a new paradigm," one that "encompasses the worker, the client, the extended family, the community, the government—a paradigm that understands the context in which people live and sees behaviors as attempts to adapt to impossible situations."

Although Lewis's contention that there is antipathy between family therapy and social work seems a bit dated (especially as the reviewer writes from The University of Iowa, where the School of Social Work offers an MSW specialization in family systems), the originality of her insight gives urgency and energy to the collection. Topics include family systems thinking for school of social work administrators, training for social work professionals in a family systems approach to multicultural families, and an ecosystemic approach to the treatment of families suffering with AIDS and substance abuse. Overall, Lewis's volume extends the boundaries of family therapy into some of the most important issues confronting social work professionals today.

Other new books at the Center attest to the growing attention to domestic violence and the continuing problem of sexual abuse. *Family Abuse and Its Consequences: New Directions in Research* (1988), edited by Gerald T. Hotaling and others, compiles articles devoted to the current state of research on violence and abuse in American families. This collection—papers given at the Second National Conference for Family Violence Researchers, held at the University of New Hampshire—assesses physical child abuse, date abuse, spouse abuse, and elder abuse: abuses upon abuses within the "privacy" of family relationships. Creating the larger, more generic category of "family abuse" allows for attention to "common themes, issues and controversies that cut across each of these forms of violence and abuse." This creates a more significant context for understanding each of these forms of abuse than taking each categorically. Key questions which need to be addressed in order to respond effectively to these abuse problems are: How much violence and abuse occurs in familial and close relationships? What are the consequences for victims and society at large? What do we know about perpetrators? The editors are particularly enthused about the increasing sophistication of research design, a "case control design" allowing for comparison between victimized and non-victimized groups.

Family Violence: Research and Public Policy Issues (1990), a collection of articles edited by Douglas J. Besharov, seeks to add to the knowledge base on family violence in order to foster the development of sound public policy. The volume addresses the act of researching family violence as much as it does family violence as such. Besharov's hope is to encourage research that is better while it is more limited in

scope. It may become better and more limited by becoming more methodologically self-conscious and dedicated to consistent and standardized definitions of different forms of violent abuse. This will help reduce widely varying findings on the incidence of abuse. Further, researchers must address the mundane research of program functioning in order to improve the translation of policy into practice. This research will, in turn, become more limited by giving up the search for "the cause of" and "the cure for" family violence, and instead focus on the range of social and individual factors which can lead to violent behavior, and on the variety of treatment options useful in breaking patterns of abuse. Contributions to this volume include: an argument for the value of qualitative research into spouse abuse; a call for improved research on child abuse through better definitions; a discussion of judging the success of interventions with men who batter; and an inquiry into the effect of research on policy.

Robert T. Sigler's *Domestic Violence in Context: An Assessment of Community Attitudes* (1989) studies the emergence of domestic violence from behind the screen of privacy into the domain of public scrutiny. According to Sigler, most initial research on domestic violence is "activist driven"—focused on extreme instances and categories of abuse, and motivated by the desire to promote policy initiatives and immediate intervention. Sigler's contention is that, however valuable, such research is limiting and emotionally charged. Abuse is not always obvious, and definitions must be subtle and clear. His work focuses on the broad cultural context of the problem, as domestic abuse emerges and assumes shape as a public issue. To track this process requires awareness of social attitudes. In developing his thesis that domestic violence must be defined and measured in relationship to a national culture steeped in violence of all sorts, Sigler asks a series of key questions. What is perceived as violence in the home? What acts are considered wrong? What acts should be reported to police? What social and cultural factors influence the labelling of an act as wrong? How much support is there for criminalization of various acts of domestic abuse?

Family Sexual Abuse: Frontline Research and Evaluation (1991), edited by Michael Quinn Patton, a collection of research and evaluation articles funded by the Minnesota Family Sexual Abuse Project, works to define and develop child sexual abuse as a "multidisciplinary subspeciality" while it attempts to shape this domain of emerging knowledge to facilitate effective policy, intervention, and treatment.

In an opening chapter Jon R. Conte suggests three phases in the field's development. The first is the effort to gain professional recognition of sexual abuse as a common problem of childhood. This phase is marked by disputes generated by "erroneous conceptions," primarily disputes over definition and diagnosis. Following this initial wave of concern, the "middle phase" (into the early 1980's) focused on "system-induced trauma." As an array of professionals from medical, legal, mental health and social services sought a fitting response to child sexual abuse, an uneasiness about the effects of this process began to develop. This led to increasing attention to the professional procedures brought to bear on sexual abuse cases. The current phase and future agenda, Conte claims and implies, must integrate the lessons of previous phases, focus on prevention and treatment, and take "protection of children" as a "core policy" at the national level. Needless to say, well conceptualized research projects are necessary to give such policy a secure knowledge base. In an effort to advance this agenda, Part II of the volume focuses on the needs of families, the

effects on children, and the intergenerational transmission of sexual abuse (among other things). Part III focuses on evaluation, treatments and interventions.

Juvenile Sexual Offending: Causes, Consequences, and Corrections (1991), by Gail D. Ryan and Sandy L. Lane, details current conceptions of the juvenile sexual offender from a variety of key perspectives. The study of the sexual transgressions of minors is of great importance. In the past, juvenile sexual offenders have evaded responsibility for their actions, aided by folk rationalizations which saw such activities as exploratory, or as expressions of "adjustment problems" which would pass with age. However, the growing awareness of the long term psychological damage to victims, the continuity of adolescent and adult sexual transgression, and the discouraging prognosis for treating adult offenders have combined to lend greater importance to the study of the juvenile sexual offender. Ryan and Lane (and assorted other co-authors) define the population and the offenses, and establish their incidence and prevalence. They offer theoretical perspectives on normal sexual development in order to establish a clear concept of deviant development. They discuss intervention, treatment, prevention, as well as the effects of the offenses on the victims. They conclude with a chapter discussing the effects of juvenile sexual offense upon the therapists working with the offenders.

Casebook of Sexual Abuse Treatment (1991), edited by William N. Friedrich, focuses on the victims of sexual abuse, presenting the case descriptions of fifteen sexually abused children in treatment. Case descriptions have been organized according to a standardized format addressing theoretical format, assessment, techniques, outcome, and personal reactions. Clinical approaches focus primarily on individual therapy, although some approaches include family and group therapy. The treatments cover incest, ritualistic abuse, cooperative and uncooperative parents, and others.

Books reviewed, which may be ordered from the publisher or at bookstores:

Casebook of Sexual Abuse Treatment, edited by William N. Friedrich. New York: W.W. Norton and Co., 1991.

Domestic Violence in Context: An Assessment of Community Attitudes, by Robert T. Sigler. Lexington, MA: Lexington Books, 1989.

Family Abuse and Its Consequences: New Directions in Research, edited by Gerald T. Hotaling, and others. Newbury Park, CA: Sage Publications, 1988.

Family Sexual Abuse: Frontline Research and Evaluation, edited by Michael Quinn Patton. Newbury Park, CA: Sage Publications, 1991.

Family Systems Application to Social Work, edited by Karen Gail Lewis. Binghamton, NY: The Haworth Press, 1991.

Family Violence: Research and Public Policy Issues, edited by Douglas J. Besharov. Washington, D.C.: The AEI Press, 1990.

Juvenile Sexual Offending: Causes, Consequences and Corrections, by Gail D. Ryan and Sandy L. Lane. Lexington, MA: Lexington Books, 1991.

Understanding Family Policy: Theoretical Approaches, by Shirley L. Zimmerman. Newbury Park, CA: Sage Publications, 1988.

NATIONAL RESOURCE CENTER ON FAMILY BASED SERVICES 1992 RESIDENCY PROGRAMS

The National Resource Center on Family-Based Services is offering eight intensive residency programs at the University of Iowa in Iowa City in 1992. Programs are intended for professionals at different levels of experience in their family-based work. These programs offer individuals and smaller agencies the opportunity to participate in NRC's nationally recognized family systems training.

Participants study with National Resource Center trainers, all of whom are experienced teachers and family therapists familiar with public and private social services systems. The three day training programs run from 9 to 4, and cost \$300 each. Continuing education credit (CEU's) or college credit will be available through the University of Iowa for an additional fee.

Housing is available on campus at the Iowa House on a first-come, first-served basis in the spring and fall for \$45/single per night. During the summer programs, the Mayflower (dormitory housing) is available at a cost of less than \$20/single per night.

A lovely river town, Iowa City offers a wide array of entertainment including theater, music, films, walks, and restaurants. It is only a 4.5 hour drive from Chicago, 3.5 hours from Madison, 5 hours from St. Louis, and 6 from Minneapolis. Iowa City is also served by the Cedar Rapids airport.

POST-ADOPTION FAMILY THERAPY May 6-8, 1992 - Cheryl Prew, LCSW

For therapists, family-based workers and adoption workers providing services to adoptive families. The training will cover new advances in the field of special needs adoption and innovative therapy techniques. The information will be especially useful for post-adoptive work where families are at risk of disruption or dissolution. Topics include:

- ◊ New and Old Myths About Adoption
- ◊ Six Tasks of Adoptive Families
- ◊ Particular Dynamics Characteristic of Families of Adoption
- ◊ Attachment Within Adoption
- ◊ Belief Systems That Impede and Enhance Change
- ◊ Techniques to Assess and Change Belief Systems
- ◊ An Intervention Model Developed by Oregon's Post-Adoption Family Therapy Team

SUPERVISION FOR FAMILY-BASED SERVICES May 20-22, 1992 - Barb Christensen, MS

For individuals who supervise both family-based case managers and intensive workers, this program offers an opportunity to analyze the supervisory role systemically, to learn three modes of supervision and to acquire solutions for the inevitable challenges family workers face. Topics include:

- ◊ Effective Family-Based Workers & Supervisors
- ◊ Strengths and Challenges in Supervision
- ◊ Supervision as a System: Process, Content and Context
- ◊ Supervisee Developmental Stages
- ◊ Supervisory Styles & Skills
- ◊ Supervisor as Consultant:
 - Facilitating the Change Process
- ◊ Supervisor as Trainer: Teaching the Change Process
- ◊ Supervisor as Mentor: Guiding the Change Process
- ◊ A Supervisory Model for Problem Solving

FAMILY BASED SERVICES FOR THE ADVANCED PRACTITIONER June 3-5, 1992 - Barb Christensen, MS

For individuals working intensively with low-to moderate caseloads and/or those individuals already experienced in family systems work, special focus will be given to working in a systemic way with multi-problem families, including when and how to use strategic or indirect techniques as a complement to brief and structural family work. Participants also examine parallels between family systems and the workplace as a system. (This residency program is not a substitute for clinical training with supervision. It introduces participants to sophisticated family therapy theory and methods and forms a sound foundation for further work.) Topics include:

- ◊ Brief and Structural Family Work
- ◊ Circular Questioning
- ◊ An Integrated Structural/Strategic Model
- ◊ Strategic Theory and Interventions
- ◊ Applications to Family Issues of Chemical Dependency, Child and Spousal Abuse and Neglect
- ◊ Self-Care for Family-Centered Workers

WORKING WITH FAMILIES WITH SUBSTANCE ABUSE CONCERNS June 8-10, 1992 - Pat Parker, BA

For individuals working as case managers with families where substance abuse is a major issue, this training brings together state-of-the-art case management strategies and current knowledge about substance abusing families, including situations involving a drug-exposed infant. Topics include:

- ◊ Definitions of Addiction and Characteristics of Women With Substance Abuse Concerns
- ◊ Drug-Exposed Children: Short and Long-Term Effects
- ◊ Care and Service Needs of Children
- ◊ HIV Infected Children
- ◊ Family Systems Theories & Practices
- ◊ Gender, Non-Traditional Families and the "Trapped/Underclass"
- ◊ Recovery, Relapse and Spirituality



FAMILY-BASED CASE MANAGEMENT
July 15-17, 1992 - Barb Christensen, MS

For supervisors and line social workers in agencies committed to family-centered practice. Participants become familiar with family systems theory and the goals of family-based services and learn how to use basic diagnostic tools to analyze family and community dynamics, engage families in treatment, identify behavioral objectives, assure family progress toward change, and effectively terminate services. Topics include:

- ◇ Family Based Services: A Philosophy of Empowerment
- ◇ Another Look at Case Management
- ◇ Family Structure and Development
- ◇ Assessment Tools: Genograms, Ecomaps, Timelines and Sequences
- ◇ Engaging the Family and Responding to Resistance
- ◇ Case Planning: Developing Objectives with the Family
- ◇ Plan Implementation: Assuring Progress and Coordinating Services
- ◇ Termination of Services

EFFECTIVE INTERVENTION WITH BATTERED WOMEN AND THEIR CHILDREN
September 16-18, 1992 - Susan Schechter, MSW

Participants will learn to identify domestic violence, interview victims and their assailants, find ways to support abused women and their children, and develop links to other community resources. We will look at how abused women protect their children and design new interventions that attempt to keep all victims in the family safe. Topics Include:

- ◇ Understanding Dynamics of Battering Men
- ◇ Trauma and Its Impact on Victims
- ◇ What Victims Need
- ◇ Interviewing Battered Women & Abusive Men
- ◇ Danger Assessment & Safety Planning
- ◇ Crisis Intervention
- ◇ Monitoring Safety & Changes
- ◇ Impact of Domestic Violence on Children
- ◇ Developing Effective Agency Policies & Practices

FAMILY SYSTEMS CONSULTATION IN CHILD WELFARE
October 14-16, 1992 - Roger Friedman, PhD

There can be an exciting future for family therapists in the field of child welfare. The family-based services movement within the child welfare system has been one of the major innovators in bringing a family systems perspective to public social services. This new workshop from the National Resource Center will focus on the ways

family therapists can contribute to the many programs around the country which are working to preserve families and maintain children in their own homes. Using didactic, videotaped, and case materials, the presenters will highlight family therapy essentials for use in the child welfare arena. Topics include:

- ◇ The Context of Child Welfare and Family-Centered Services
- ◇ How to Successfully Enter the Child Welfare System
- ◇ Types of Involvement for Family Therapists: Training, Consultation and Organizational Development
- ◇ Do's and Don'ts for Consultants
- ◇ Models of Family Therapy for Child Welfare
- ◇ Professional Development

FAMILY-BASED REUNIFICATION: STRENGTHENING FAMILY CONNECTIONS
October 21-23, 1992 - Jim Nice, MA

This workshop for foster care workers and family-based therapists focuses on various methods of supporting family connections during separation, transition and reunification. Participants learn to conduct a structured Family Unity Meeting utilizing the family's own support system and to use tools such as goal-setting and visitation to enhance reunification potential. Topics include:

- ◇ Family Based Services and Reunification: Creating A Context For Change
- ◇ Traditional and Alternative Models of Foster Care
- ◇ Identifying Community, Agency & Worker Readiness for Family-Centered Approach to Out-of-Home Care
- ◇ Understanding the Stages of Reunification
- ◇ Assessing Systems: Uses for the Genogram and Ecomap
- ◇ The Family Unity Meeting: Addressing Critical Issues of Concern & Finding the Reservoirs of Strength
- ◇ Establishing Behavioral Goals with the Family
- ◇ Visitation: The Heart of Connectedness
- ◇ Assessing Child and Family Readiness for Reunification
- ◇ Dealing with Ambivalence
- ◇ Assuring Permanency for the Child

Football tickets for the Iowa versus Purdue Homecoming game (Oct. 24) are available on a first-come, first-served basis. Order now!

For further information on these workshops, contact the National Resource Center on Family Based Services, University of Iowa School of Social Work, 112 North Hall, Iowa City, IA 52242-1223. (319) 335-2200 or FAX (319) 335-1711. **Registration form on page 23.**



NATIONAL RESOURCE CENTER ON FAMILY BASED SERVICES FAMILY DEVELOPMENT PROGRAMS

FAMILY DEVELOPMENT

Family development is a model of family-based intervention designed to help all families, but especially low-income families, improve family functioning and achieve economic independence. Family Development Specialists are problem-solvers, allies, and advocates who are skilled in helping families to

- * Review their needs, their stresses, and their strengths
- * Imagine another reality and set goals to realize it
- * Enhance family relationships
- * Develop competencies they need to become economically independent
- * Use developmental resources in the community effectively
- * Meet other families for support and collective action

Participation in family development programs is voluntary. Programs may be sponsored by social services, mental health, or educational organizations. Sessions can occur in the family's home, in groups, or through center-based activities.

FAMILY DEVELOPMENT TRAINING

The Family Development training programs benefit Community Action, Head Start, county extension, and family support workers, people whose job is to provide services to families.

National Resource Center trainers are experienced teachers and family therapists committed to community-based work with low-income families. Since 1981, the Center has provided training and consultation to organizations involved with children and families in all fifty states. Since 1988, over 500 Family Development Specialists have been certified nationwide.

FURTHER INFORMATION

For information on the two following Family Development Training Programs, contact Wendy Deutelbaum, Ph.D., Director of Family Development, National Resource Center on Family Based Services, University of Iowa School of Social Work, 112 North Hall, Iowa City, IA 52242-1223. (319) 335-2200.



THE FAMILY DEVELOPMENT SPECIALIST CERTIFICATION

This eight-day certification program for workers is offered in three sessions and includes lectures, discussions, videotapes, demonstrations, and skill practice. Designed as a family-based equivalent to Head Start's Child Development Associates training, this program helps trainees acquire the knowledge and skills they need to work developmentally with families. Participants complete structured homework assignments and take a written test on course material.

The course is designed to develop competencies in

- * Family systems theory and principles of family development work
- * Relationship-building, interviewing, and family assessment skills
- * Goal setting and planning
- * Coordination of community services
- * Identification of and response to family violence, chemical dependency, and depression
- * Empowerment strategies, including assertiveness, self-esteem building, conflict resolution and problem-solving skills
- * Techniques of group work, community development, and advocacy
- * Professional development



FAMILY DEVELOPMENT SUPERVISOR TRAINING

This two-day workshop is designed to help supervisors effectively guide and support family development workers and enhance their own growth as professionals.

The course is designed to address the following questions:

- * What can family systems theory teach us about organizations?
- * How does our own family of origin affect our strengths and weaknesses as a supervisor?
- * How can supervisors effectively anticipate and respond to the problems workers face at each stage of their development?
- * What are the most useful ways to structure family development supervision?
- * How can supervisors use peer networks for their own support and development?

NATIONAL CONFERENCES

NATL CHILD WELFARE PARTY LINE 1992 TELECONFERENCE PROGRAMS

Contact for specific dates & topics:

Marilyn Russell
1-800-HELP-KID

March 10-September 9, 1992 -- 5 Part Series:

Adoption 1992, A New Vision

March 31-April 14, 1992 -- 2 Part Series:

Class Action Lawsuits in Child Welfare

April 21, 1992 -- A Creative Prescription: An Energizer for Trainers

April 29, 1992 -- What's New in Washington: An Update on Legislation that Will Affect Child Welfare Services

May 5, 1992 -- Developing Quality Standards in Child Care

May 19, 1992 -- Does Training Work?

May 27, 1992 -- Power and Foster Care Review: Future Directions for Case Review Systems

June 2, 1992 -- Professional Ethics in the Child Welfare Agency

June 19, 1992 -- Ethnographic Interviewing

June 23, 1992 -- The Impact of Suter vs. Artist M. on Child Welfare Policy

July 14-September 23, 1992 -- 2 Part Series:

Total Quality Management, What Does This Mean to the Child Welfare Agency

July 7, 1992 -- Getting Back on Track — Establishing a National Policy of Child Protection

September 15, 1992 -- Approaches to the Assessment of Competency

September 30, 1992 -- Assessing Parenting Skills in a Multicultural Environment

October 6, 1992 -- Working with the Office of Juvenile Justice and Delinquency Prevention to Improve Juvenile Justice Systems

October 13, 1992 -- Crisis Nurseries and Respite — Another Avenue for Protection

October 20, 1992 -- Issues in Child Welfare and Substance Abuse: A Policy and Practice Conflict

October 29, 1992 -- Zebley vs. Sullivan and Its Impact on Foster Children

November 6, 1992 -- Capturing Title IVE Funds for Juvenile Justice Clients

November 10, 1992 -- Effective Contracting: How to Get the Most from Your Purchase of Service Dollars

November 17-December 15, 1992 -- 2 Part Series: Using Technology in Child Welfare Training

THE ATTACHMENT CENTER AT EVERGREEN: WORKSHOPS 1992

Contact: The Attachment Center
(303) 674-1910

Workshop Cluster B

Apr. 2 Insight into Attachment

Apr. 3 Learning to Live and Laugh While Parenting Drug Babies

Apr. 4 Art of Consequencing

Workshop Cluster C

Aug. 31 Insight Into Attachment

Sept. 1 Reintegration Conference

Sept. 2 Art of Consequencing

Sept. 3 Coming Home

Workshop Cluster D

Nov. 12 Insight Into Attachment

Nov. 13 Looking For Touch in All the Wrong Places

Nov. 14 Art of Consequencing

OBJECT RELATIONS COUPLE THERAPY

April 24-25 — Chicago, IL

Contact: Debby Ziff

Psychotherapy Book Club Seminars
c/o 1610 New Hampshire Ave. NW
Washington, DC 20009
(202)667-3008
FAX 667-8542

WORK-FAMILY ISSUES & THE WORK ETHIC: NEW REALITIES, NEW AP- PROACHES

April 28-29, 1992, New York City, NY

Contact: Conference Board Registrar
212-980-7014

LEGAL REMEDIES FOR CRIME VICTIMS AGAINST PERPETRATORS: BASIC PRINCIPLES

May 14-15, 1992 - Chicago, IL

September 17-18, 1992 - Philadelphia, PA

Contact: National Victim Center
2111 Wilson Blvd., Ste 300
Arlington VA 22201
(703) 276-2880

THE 13TH NATIONAL INSTITUTE ON LEGAL ISSUES OF EDUCATING INDIVIDUALS WITH DISABILITIES

May 17-20, 1992 - San Antonio, TX

Contact: LRP Publications
421 King Street
PO Box 1905
Alexandria, VA 22313-1905
1-800-727-1227

CWLA NATIONAL CONFERENCE, CHILDREN '92: It's Up to You

April 1-3, 1992 - Washington DC

Contact: Children '92 CWLA
440 First St. Ste 310
Washington, DC 20001
(202) 638-2952 Fax (202) 638-4004

PHILADELPHIA CHILD GUIDANCE CENTER/FAMILY THERAPY TRAINING CENTER WORKSHOPS 1992

April 3, 1992 — AIDS, Families & Commu-
nities

April 10, 1992 — Surviving Alone

April 16, 1992 — Magic Metaphor &
Mastery, Part II

April 29, 1992 — Introduction to Structural
Family Therapy

June 4-5, 1992 — Inducing Change Through
Crisis

June 12, 1992 — Making it as a Stepfamily

June 29-30, 1992 — Supervision of
Supervision

Contact Wendy L. Siegel, Training Admin.
Family Therapy Training Center
Philadelphia Child Guidance Center
34th St & Civic Center Blvd.
Philadelphia, PA 19104
(215) 243-2777

SIBLING RIVALRY:

A Video Teleconference

April 11, 1992 1:00-4:00PM-EST

Contact: Foster Parent Teletraining
Eastern Kentucky University
Training Resource Center
217 Perkins Building
Richmond, Kentucky 40475-3127
1-800-622-1497

THE FIRST NATIONAL WRAPAROUND CONFERENCE

April 12-14, 1992 - Pittsburgh, PA

Contact: The Pressley Ridge Center for
Research and Public Policy
530 Marshall Ave.
Pittsburgh, PA 15214

INDEPENDENT LIVING RESOURCES: SEMINARS 1992

Program Planning for Administrators

April 13-14, 1992 - Chapel Hill, NC

May 19-20, 1992 - Sturbridge, MA

Pass it on: Helping Staff Share Knowl-
edge and Skills with Youth

April 15-16, 1992 - Chapel Hill, NC

May 21-22, 1992 Sturbridge, MA

Youth Assessment and Outcome Planning
for Independent Living

March 31-April 1, 1992 - Warwick, RI

Independent Living for Teen Parents

April 2-3, 1992 - Warwick, RI

April 29-30, 1992 - Chapel Hill, NC

Contact: William V. Griffin
Brendan Associates
4324 Thetford Rd
Durham, NC 27707



MOTHERS:

Victimization, Stigma, and Survival
April 22-24, 1992 - Boston, MA
Contact: Harvard MED-CME
P.O. Box 825
Boston, MA 02117
(617) 731-4700

PARENT-TO PARENT CONFERENCE

Apr 24-27, 1992 - Phoenix, AZ
Contact: Pilot Parent Partnerships
2150 East Highland # 105
Phoenix, Arizona 85106

ABA SIXTH NATIONAL CONFERENCE ON CHILDREN AND THE LAW

May 1-2, 1992 - Arlington VA
Contact: American Bar Association
Center on Children & the Law
1800 M Street, NW
Washington DC 20036

1992 NATIONAL TRAINING INSTITUTE FOR CHILD WELFARE SUPERVISORS

May 4-6, 1992 - Atlanta, GA
Contact: Shirley Sklar, Training Coordinator
404-876-1934

UNITING OUR CONCERNS:

10th Annual Protecting Our Children, National American Indian Conference on Child Abuse and Neglect and 5th Annual Encircling Our Forgotten, A Conference on Mental Health Issues for the Emotionally Disturbed North American Indian Child & Adolescent

May 4-6, 1992 - Orlando, FL
Contact: American Indian Institute
Continuing Education and Public Service
The University of Oklahoma
555 Constitution Ave
Norman OK 73037-0005
405-325-4127

UNITING THE GENERATIONS TO MEET COMMUNITY NEEDS

May 8-9, 1992 - Washington, DC
Contact: Generations United Conference
c/o CWLA
440 First St NW, Site 310
Washington, DC 20001

11TH ANNUAL CONFERENCE OF THE NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION

May 16-19, 1992 - Nashville, TN
Contact: National CASA Association
2722 Eastlake Avenue East, Suite 220
Seattle, Washington 98102

FAMILY RESOURCE COALITION *THE FAMILY RESOURCE COALITION FOURTH NATIONAL CONFERENCE*

FAMILY SUPPORT: Framework for the Future

JOIN US IN CHICAGO FOR THE ONLY NATIONAL CONFERENCE THAT PUTS ALL THE FAMILY SUPPORT PIECES TOGETHER!

Contact: **Family Resource Coalition**
200 S. Michigan Ave. Suite 1520 Chicago, IL 60604
312/341-0900 FAX (312)341-9361

May 6-9, 1992 The Palmer House Hotel Chicago, Illinois

20TH ANNUAL CHILD ABUSE AND NEGLECT SYMPOSIUM:

Controversies in Child Abuse and Neglect: Strategies for Resolution
May 18-22, 1992 - Keystone Resort Conference Center, CO
Contact: Child Abuse Symposium
Kempe National Center
1205 Oneida Street
Denver CO 80220

1992 NATIONAL SYMPOSIUM ON CHILD VICTIMIZATION

May 19-22, 1992 - Washington, DC
Contact: Division of Child Protection
Children's National Medical Center
Trinity Square
111 Michigan Avenue NW
Washington, DC 20010
(202) 939-4960

SHATTERED DREAMS: CHILDHOOD RECAPTURED: The 8th Biennial National Symposium on Child Victimization

May 19-22, 1992 Washington D.C.
Contact: Conference Coordinator
Div of Child Protection
Children's National Medical Center
111 Michigan Ave, NW
Washington, D.C. 20010
(202) 939-4960

8TH NATIONAL CANADIAN CHILD AND YOUTH CARE CONFERENCE

May 20-23, 1992 - Victoria, BC, Canada
Contact: Post Office Box 5759
Station B
Victoria, BC, Canada



**3RD NATIONAL CONFERENCE
ALLEGATIONS OF CHILD SEXUAL
ABUSE: Do Adults Lie, Children
Misperceive or Professionals Miss their
Mark: You be the Judge.**

May 27-30, 1992 - Portland, OR
Contact: Molly Davis

Alternatives to Sexual Abuse
PO Box 25537
Portland, OR 97225
(503) 644-6600
FAX 643-3798

**CHILD WELFARE INSTITUTE
WORKSHOPS:**

**Changes in the Environment
Successful Model Programs
Current Legislation
Issues of Diversity**

June 17-19, 1992 - Portland, OR

Contact: Patrick Feeny
School of Extended Studies
Portland State University
P.O. Box 1491
Portland, OR 97207
(503) 725-4812

**NINTH ANNUAL CAPE COD SUMMER
SYMPOSIA**

June 22-August 28, 1992

Contact Institute for information on topics
and dates at:

New England Educational Institute
92 Elm St
Pittsfield, MA 01201

**REALITIES OF GLOBAL INTERDE-
PENDENCE: Challenges to Social Work
Education**

July 15-19, 1992 - Washington, DC

Contact: Vera Mehta, Secretary General

IASSW Secretariat
Palais Palfy, Josefs Platz 6
A-1010 Vienna Austria
222/513-4297
Fax: 43 222 513-8468

**2ND MIDWEST FAMILY-BASED
SERVICES CONFERENCE**

July 16-19, 1992 - LaCross, WI

State Contacts:

Illinois - Marjorie Sullivan
(312) 434-5577

Iowa - Michael Tallman
(319) 864-7122

Minnesota - Norb Laufenberg
(507) 457-6200

Nebraska - Janie Peterson
(402) 498-1317

North Dakota -- Bill Kersman
(701) 662-7581

South Dakota - Jay Van Hunnik
(605) 343-7262

Wisconsin - Don Gjesfeld
(715) 836-2285

**TRAINING INSTITUTES: Developing
Local Systems of Care for Children and
Adolescents Who Are Severely Emotion-
ally Disturbed**

July 18-22, 1992 - Breckenridge, CO

Contact: CASSP Technical Assistance
Center

2233 Wisconsin Ave, NW
Washington DC 20007
(202) 338-1831

**WORLD ASSEMBLY 1992: Improving
the Human Condition**

July 18-24, 1992

Contact: Marketing Department, NASW

7981 Eastern Ave
Silver Spring, MD 20910
1-800-638-8799

WORKING WITH AMERICA'S YOUTH

July 19-22, 1992 - San Diego, CA

Contact: TeRessa Kaemmerling, NRC

Coordinator
(918) 585-2986

**CLINICAL TECHNOLOGIES: Emerg-
ing Systems to Improve Children's Mental
Health Services**

July 29-31, 1992 - Cambridge, MA

Contact: Trieschman Center

1968 Central Avenue
Needham, MA 02192
(617) 449-0626
Fax (617) 449-9074

**SIXTH ANNUAL NORTH AMERICAN
CONFERENCE ON TREATMENT
FOSTER CARE**

August 3-5, 1992 - San Diego, CA

Contact: FFTA Conference Coordinator

10100 Elida Road
Delphos, OH 45833

**THE 1992 WORLD CONGRESS ON
THE FAMILY: Strengthening Families
Now and Into the 21st Century**

Aug 16-22, 1992 - Columbus, OH

Contact: International Call for Participation

1992 World Congress on the Family
1780 E. Broad St.
Columbus, OH 43203
(614) 258-5724

**6TH BIENNIAL CONFERENCE OF
THE AMERICAN RE-EDUCATION
ASSOCIATION: PITTSBURGH 92**

August 3-5, 1992 - San Diego, CA

Call for presentations: March 16, 1992

Contact: AREA Program Conference
Program Committee

c/o The Pressley Ridge Schools
530 Marshall Avenue
Pittsburgh, PA 15214
(412) 321-6995

**NINTH INTERNATIONAL CONGRESS
ON CHILD ABUSE AND NEGLECT**

August 30-September 2, 1992 - Chicago, IL

Contact: National Committee for

Prevention of Child Abuse

Attn: ISPCAN

332 S. Michigan Avenue, Suite 1600
Chicago IL 60604-4357

**12TH ANNUAL NATIONAL RURAL
FAMILIES CONFERENCE: Children,
Youth and Families**

September 23 - 25, 1992 - Manhattan, KS

Contact: Conference Co-directors

Steve Bollman (913) 532-6984

Charlie Griffin (913) 532-5747

**THE AMERICAN ASSOCIATION FOR
MARRIAGE AND FAMILY
THERAPY'S 50TH ANNIVERSARY
CONFERENCE**

Oct 15-18, 1992 - Miami, FL

Contact: AAMFT Conference

1100 17th St, NW 10th Floor
Washington, DC 20036-4601
(202) 452-0109

**RESTORATIVE JUSTICE FOR
JUVENILE SEX OFFENDERS**

November 15-17, 1992 - Lake Tahoe,
Reno, NV

Call for Papers Deadline - April 20, 1992

Contact: Juvenile Sexual Offender

Conference/Dept. GS

P.O. Box 8970
Reno, NV 89507
(702) 784-6012

**6TH ANNUAL NAFBS EMPOWERING
FAMILIES CONFERENCE: One Vision:
Many Views**

December 9-12, 1992 - Seattle, WA

Proposals due March 31, 1992

See ad on page 21.

**REHABILITATION OF CHILDREN,
YOUTH AND ADULTS WITH
PSYCHIATRIC DISABILITIES**

January 27-30, 1993

Call for Papers: June 15, 1992

Contact: Dr. Fredrick Menz

Research & Training Center
University of Wisconsin-Stout
Menomonie, WI 54751

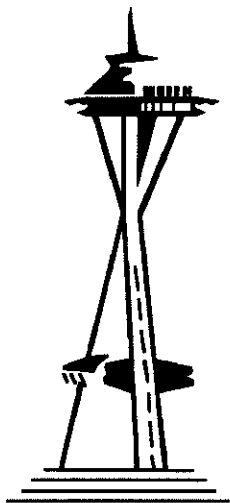
**HARTMAN BIENNIAL CONFERENCE
ON CHILDREN AND THEIR FAMILIES**

June 23-25, 1993 - Connecticut

Call for Papers: September 1, 1992

Contact: E. Susan Morton, Conference

Coordinator or Judy Lovelace
Child and Family Agency
255 Hempstead Street
New London, CT 06320
(203) 443-2896 FAX (203) 442-5909



Sheraton Hotel & Towers
Seattle, Washington

Sixth Annual
National Association for Family Based Services

Empowering Families Conference

One Vision: Many Views

December 9-12, 1992

Featuring Presentations On:

- *Practice
- * Policy
- * Research
- * Education/Training

Contact: DyAnne Goff
NAFBS
1513 Stoney Pt. Rd. NW
Cedar Rapids, IA 52405
Phone or Fax: (319) 396-4829

"SEE YOU IN SEATTLE"

materials available from the national resource center on family based services

NEW* ANNOTATED DIRECTORY OF SELECTED FBS PROGRAMS (1991). \$25.00

Descriptions of 391 family-based service programs across the country, including information on program goals, background, services, client characteristics, staff, funding and contact person. The recently completed *State Survey on Placement Prevention & Family Reunification* is also included.

CHRONIC NEGLECT IN PERSPECTIVE: A STUDY OF CHRONICALLY NEGLECTING FAMILIES IN A LARGE METROPOLITAN COUNTY:

EXECUTIVE SUMMARY: (1990) no charge
FINAL REPORT: (1990) \$15.00

A research study examining three groups of families referred for child neglect: chronic neglect, new neglect, and unconfirmed neglect. The report presents descriptive data about: these groups of families, changes over time, and differences between the three groups. The study was conducted in Allegheny County, PA, and funded by OHDS and the Vira I Heinz Endowment.

A COMPARATIVE ANALYSIS OF THE COSTS OF SUBSTITUTE CARE AND FAMILY-BASED SERVICES (1982). no charge

A method for comparing costs of foster care and family-based services, using the present-value-of-money concept to demonstrate savings in foster care maintenance expenditures.

EMPOWERING FAMILIES: PAPERS FROM THE THIRD ANNUAL CONFERENCE ON FAMILY-BASED SERVICES (1989) \$7.50

A collection representing the first published proceedings from the annual Empowering Families Conference sponsored by the National Association for Family Based Services. Five major sections — Programs and Practices, Program Issues, Practice Issues, Evaluation and Policy, and Family-Based Services and Social Change — reflect the interdisciplinary nature of family-based services and offer new perspectives on children and family services.

***NEW* EMPOWERING FAMILIES: PAPERS FROM THE 4TH ANNUAL CONFERENCE ON FAMILY-BASED SERVICES (1990)** \$10.00

A collection representing the second published proceedings from the annual Empowering Families Conference sponsored by the National Association for Family Based Services. Four major sections — Program and Practice Issues, Program Issues, Practice Issues, and Evaluation and Policy — reflect new and continuing developments in family-based services.

FACTORS CONTRIBUTING TO SUCCESS AND FAILURE IN FAMILY-BASED CHILD WELFARE SERVICES:

EXECUTIVE SUMMARY (1988) \$2.50
FINAL REPORT (1988) includes the Executive Summary \$15.00

Summary and final report of a 2-year federally funded study analyzing social worker characteristics, family characteristics, services provided, outcomes, and the relationship between these factors in eleven family-based placement prevention programs.

FAMILY-BASED JOB DESCRIPTIONS (1986) \$7.50

A compilation of job descriptions for family-based service workers (including social workers, supervisors, administrators, family therapists and paraprofessionals) which are currently in use by selected public and private family-based programs throughout the country.

FAMILY-BASED SERVICES FOR JUVENILE OFFENDERS (1989) no charge

An analysis of family characteristics, service characteristics, and case outcomes of families referred for status offenses or juvenile delinquency in eight family-based placement prevention programs. In *Children and Youth Services*, Vol. 12, No. 3, 1990.

FAMILY-CENTERED SERVICES EMPLOYEES MANUAL, Iowa Dept. of Human Services (1985). Revised (January 1991) \$5.00

Iowa Department of Human Services family-centered services regulations, which define and structure the Department's preventive services program, and accompanying procedures manual.

FAMILY-CENTERED SOCIAL SERVICES: A MODEL FOR CHILD WELFARE AGENCIES (1983) \$9.00

Planning and implementing family-centered services for public child welfare agency administrators, including a proposed model of service delivery, family typology, data collection instruments, comparative cost analysis, and extensive bibliography.

FAMILY PRESERVATION AND INDIAN CHILD WELFARE. American Indian Law Center (1990) \$12.00

This collection of essays looks at the application of family preservation to Indian Child Welfare. Historical, contemporary, therapeutic, program implementation, staff training, and program evaluation issues are treated. Only available directly from the American Indian Law Center, Inc., Box 4456, Station A, Albuquerque, NM 87196. Not available from the National Resource Center.

INTENSIVE FAMILY SERVICES: A FAMILY PRESERVATION SERVICE DELIVERY MODEL (1985) no charge

Manual providing detailed descriptions of the State of Maryland's Department of Human Resources Intensive Family Services (IFS) pilot projects in 8 local department of social services, including chapters on funding principles, interventions, closure and evaluation. This program was implemented in 1985 and expanded to 14 jurisdictions in 1986.

INTENSIVE FAMILY PRESERVATION SERVICES RESEARCH CONFERENCE CLEVELAND, OHIO. SEPT. 25-26, 1989 FINAL REPORT or BRIEF REPORT no charge

Final report of a two-day conference on family preservation services research co-sponsored by the Bellefaire Jewish Children's Bureau, the Mandel School of Applied Social Sciences at Case Western Reserve University, and the Treu-Mart Fund. The final report includes the history and definition of family preservation, implementation in child welfare, juvenile justice and mental health systems, review of existing research and recommendations for future research. The brief report focuses exclusively on needed research in the area.

MEASURING THE COST EFFECTIVENESS OF FAMILY-BASED SERVICES AND OUT-OF-HOME CARE (1983) \$5.00

Data from the state of Maryland.

PLACEMENT PREVENTION AND FAMILY REUNIFICATION: A PRACTITIONER'S HANDBOOK (1984) \$9.00

Applications of family-based services, initiating the program, family assessment, functions and activities of the in-home worker, staff supports, case closure, and service techniques.

PLACEMENT PREVENTION AND FAMILY REUNIFICATION: A VIEW FROM THE CHILD WELFARE SECTOR (1980) \$2.00

Reasons for and advantages of family-centered services, for use with legislators, boards, advocacy groups and civic organizations.

POSITIVE PARENT NETWORK (PPN) OF RAPID CITY, SOUTH DAKOTA. American Public Welfare Association (1986) \$2.50

Describes a typical rural primary prevention program, including program context, background, management, operations and monitoring, evaluation, and sample materials.

***NEW* POST ADOPTION FAMILY THERAPY (PAFT): A PRACTICE MANUAL: Oregon Children's Services Division (1990) no charge**

Discusses the conception, development and implementation of the PAFT project including positive research findings for 50 at risk families. Part two describes therapeutic challenges of adoption, intervention techniques, and the treatment model developed by the project.

***NEW* POST ADOPTION RESOURCES FOR TRAINING, NETWORKING, AND EVALUATION SERVICES (PARTNERS): WORKING WITH SPECIAL NEEDS ADOPTIVE FAMILIES IN STRESS: Four Oaks, Inc., Cedar Rapids, IA (1992) no charge**

Information about the PARTNERS model for adoptive families with special needs children. Includes a description of support services, screening, assessment, treatment planning, treatment and termination phases of the project, and descriptive statistics of the 39 families served. Part two describes therapeutic challenges of adoption.

PROGRAM BLUEPRINT FOR NEGLECTFUL FAMILIES: Oregon Children's Services Division (1987) no charge

Presents a program model based on recurring evidence about the nature of neglectful families.

THE SELF-SUFFICIENCY PROJECT: INTERIM EVALUATION REPORT (1990) \$2.50

Focuses primarily on the 26 chronically neglecting families (referred repeatedly for alleged child neglect) who have participated continuously in this 3 year demonstration/evaluation project begun 1989 in rural Douglas County, Oregon. Analyzes differences between participants and non-participants that might have contributed to their decision to join or remain in the project

STATE SURVEY ON PLACEMENT PREVENTION & FAMILY REUNIFICATION PROGRAMS: FINAL REPORT (1990) \$5.00

Results of a 1989-90 nationwide survey of state child welfare administrators and specialists regarding the extent to which placement prevention/reunification services have been implemented. Includes data from 37 states. Issues include eligibility requirements, exclusions, costs, service length and availability, state expenditures and state legislation regarding placement prevention and reunification services. Similarities and differences between public agencies and purchase of service programs are featured.

THE SUPPORTIVE CHILD ADULT NETWORK (SCAN) OF PHILADELPHIA. American Public Welfare Association (1986) \$2.50

Describes and documents this representative urban placement prevention program, with information on history, philosophy, goals and objectives, organizational structure, staff, funding, management and services.

THREE MODELS OF FAMILY-CENTERED PLACEMENT PREVENTION SERVICES (1989) no charge

An analysis that defines and compares family-centered services by identifying three models whose primary goal is tertiary prevention, the prevention of out-of-home placement of children from seriously troubled families or reunification once placement has occurred. Also examines data from 11 family-centered placement prevention programs that further specifies and compares these models. Reprinted with permission from *Child Welfare*, Vol. LXIX: no.1, (Jan./Feb 1990)

AUDIOVISUAL MATERIALS

HOME-BASED FAMILY-CENTERED SERVICES: A BASIC VIEW (1980) (Rental Only) \$10.00 @ month

An 18-minute, 80-slide synchronized presentation providing an introductory overview; for use by advocacy and civic groups, boards of directors, and policy-makers. Includes an 8-page study guide.

FAMILY-BASED SERVICES: A SPECIAL PRESENTATION (1990) \$80.00* (*plus \$5.00 shipping)

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BIBLIOGRAPHIES

The National Resource Center maintains a constantly updated list of bibliographies covering more than 120 subjects relating to family-based services. This list is available on request.

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ALTERNATIVE MODELS OF FAMILY PRESERVATION

by Kristine Nelson and Miriam Landsman (Please notify me when available.)

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