Children, Families, and Communities

A New Approach to Social Services
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Introduction

The inadequacy of the current social service response to the changing needs of children and families is well known. Efforts to reform social services have proliferated. However, most have sought to improve or expand such problem-oriented social services as child welfare, mental health, or juvenile justice, and this categorical, deficit-driven approach to the problems confronting today’s children and families is too little and too limited.

We are proposing a fundamental reorientation and recreation of social services and social supports for all children and families—not simply those with critical difficulties. We envision an infrastructure of social services and supports that can enhance the development of children and the functioning of families, while also responding to special needs and problems as they develop. In 1991, the Chicago Community Trust committed $30 million to test these ideas. Seven Chicago-area communities are now receiving support in developing the kind of infrastructure we describe in this report, and researchers at the Chapin Hall Center for Children are documenting their progress. We are using this process evaluation to refine the reform conception itself and to provide observations to sponsors and participants that might be useful in the ongoing conduct of this initiative as well as for others engaged in community-focused reforms.

This new model for social service delivery has two essential and interrelated components:

- Supporting and expanding the often-overlooked primary services that already exist to some extent in all communities—resources such as day care and after-school programs, arts, music, and community service activities, sports teams, drop-in and support programs for parents, and the resources of parks, libraries, community centers, and settlement houses—that are resources for all children and families, that are available in the neighborhood without special qualification (often at little or no cost), and that can enhance child development and family functioning.

- Forging links between the primary services and such specialized services as child welfare, juvenile justice, and mental health and promoting their use by developing ways of increasing access to services, including providing information about available services and putting in place individuals who can help children and families learn about and access both primary and specialized services.

This reorientation in the way we think about youth and community development is based on a broadened conception of social services as promoting and enhancing development, as well as responding to deficits and difficulties. While there are already substantial financial, physical, and human resources invested in specialized services as well as primary services, in order to achieve this broadened approach to social services we must understand the value of primary services to children and families, and must enhance them by improving their quality, increasing their variety, and by recruiting, training, and retaining qualified staff. We must find ways to link primary services with one another and with specialized services so that they function together for children and families. These issues are explored in Chapters 1, 2, and 3 of this report.

In communities, planning and goal-setting mechanisms must be developed that involve citizens with service providers. The questions of strategic planning and goal setting for such an enterprise, of evaluating outcomes, and of governance are discussed in Chapter 4.
The ultimate goal of this reform initiative is to find ways to broaden community investment in children and families. We believe that engaging citizens in planning and decision making and strengthening their connections to one another and to community institutions can have an added benefit of providing a model for addressing a broad range of local concerns. Citizen involvement in developing an infra-
structure of supports in communities can create a set of relationships among people and institutions on which a sense of community can be built. We further hope that by interacting and working together, community residents, service providers, and neighborhood institutions will come to share an enhanced sense of responsibility for—and role in furthering—the well-being of children and families.
1. Redefining Child and Family Services

This report presents what we have come to believe is a critically needed redefinition and redirection of social services for children and families, one that builds an infrastructure of resources in communities aimed at enhancing the development of children and the functioning of families as well as responding to problems as they develop.

Our views are shaped by compelling contemporary realities concerning: (1) changes in the U.S. population and in the position of children, (2) transformations in family structure and functioning, and (3) the nature of the current social service response.

**New Realities: A Challenge to the Status Quo**

Children are now, and will continue to be, a smaller proportion of the population. Yet, children are more likely to be poor than the members of any other age group, and the percentage of the child population who are poor and who belong to minority groups is growing. An increasing percentage of children will be at a disadvantage because of poverty and the diminished education and employment opportunities often available to low-income members of minority groups. In the face of these challenges, each child of today will have to play a significant role as an adult to sustain and enrich our social, economic, and political institutions at a time of insistent and accelerating change.

The second reality that guides our thinking is profound changes in the structure and functioning of families, changes that strain families’ personal resources for caring for their children. Owing to a high rate of divorce and an increase in out-of-wedlock births, the percentage of children who live with one parent has almost tripled since 1960. Material, social, and psychological resources available to devote to children are often limited, especially for single parents. Many more children are living in households in which the sole parent is or both parents are working; about 63 percent of children now have mothers in the labor force. When work and the tasks of maintaining a home are accomplished, adult family members may have less time, energy, and emotional resilience to invest in their children.

Over the last 75 years, there has been a dramatic decline in the size of both immediate and extended American families, resulting in a more intense and unrelieved child-raising obligation for nuclear families and a decrease in opportunities for children to experience cross-generational interaction and support. As a result of significant geographic mobility, families may be unable to rely on informal social networks in communities. Mobility means that families often face periods of isolation while they make connections in new communities, and the movement of families out of communities can disrupt ties for those who remain.

The third reality that guides our thinking is the nature of social services today. Existing social services focus primarily on responding to children’s problems or to deficits in family functioning, and are available only after difficulties have become chronic or severe. Services are provided in such fragmented, problem-oriented categories as child welfare, mental health, juvenile justice, special education, substance abuse, and services for chronic illness or for physical and developmental disabilities. As a condition of receiving assistance, children and parents are required to restrict the help they seek to the narrow range of categorical problems that a given service defines as its domain. These specialized services often grow out of particular disciplinary or professional orientations and are provided through bureaucratic structures that make it difficult to recognize or respond to the full range of a child’s needs. To a large extent, federal

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*A more detailed demographic data are included in the Notes at the end of this book.*
and state laws, funding, and practice have reinforced this narrowly defined, problem-centered approach.

**The Need for a New Response**

The cumulative weight of the circumstances facing children and parents and the limitations of existing services suggest a compelling need for a new response from a society that is both obligated to support its dependents and interested in fostering their ability to contribute. In our view, this response requires a fundamental shift in our conception of services, from one concerned only with curing or preventing problems for some children and parents to one that is also concerned with promoting the development of all children and the functioning of all families.

While this paper is about reforms in the definition and delivery of social services, we want to acknowledge at the outset that redefined and reconfigured services are far from the only resources needed to support child development and family functioning. To become competent, caring adults able to contribute to their own well-being and the well-being of others, children need a range of resources in their lives. They need the presence of at least one responsively caring, invested adult; their parents need jobs that produce adequate incomes; and families need to live in communities that offer stable, secure housing, decent education and health care, and physically safe environments that foster play and sociability as well as networks of social support and social control among adults and children. Children also need the supports that a reconfigured system of social services could provide. They need access to activities, facilities, and events beyond home and school through which to build competencies and make connections and contributions to a larger social and civic world. Children and parents also need adequate responses to personal problems as they develop. It is these last two dimensions, organized opportunities that build competencies and adequate responses to problems through a reconfigured system of social services, about which we are writing. Although social services alone cannot create responsive communities, reconceived and reconfigured services can be partners in doing so.

**Reforming Social Services**

There is almost universal dissatisfaction with social services today. In the face of this dissatisfaction numerous efforts are underway that propose and test service reforms. Much of the debate and many of the associated demonstrations accept the existing definition of services as a given and focus on long-standing problems that have been identified. Reforms are primarily aimed at altering the single-problem focus, the fragmentation, and the centralized planning, financing, and control of existing services. While these issues need to be addressed, we believe that the chronic state of crisis that has come to characterize social services signals problems more profound and more pervasive than those addressed by current reform activities. We believe it is important to consider more fundamental changes.

To date, social services policies and programs have assumed that in the absence of defined, "categorical" problems, children are developing adequately. While it is important to respond to special problems as they occur, the absence of such problems is not adequate evidence that young people are developing the capacities they need to function as caring, competent adults. The demands on parents and the challenges facing children suggest that families need resources and supports for enhancing the development of children beyond only their own personal, immediate assets. Even if family structure, marital instability, and parental employment were not factors complicating the time
and attention parents have to devote to children, the complex and changing demands of the social and technological world children are growing into make it imperative that society provide opportunities through which children can build the capacities and skills they need to function adequately as young people and later as adults.

We propose a redirection of social services comparable to shifts that are underway in health services. In addition to responding to critical and chronic health care problems, the health care field has begun to address health promotion. It is important that the provision of social services promote development as well as respond to problems. In social services, as in health care, programs and practices that promote development and those that solve problems have an interdependent relationship.

Beyond what a society owes its dependents, challenges facing the relatively smaller cohorts of children mean that investing in children’s future abilities is a socially self-interested policy. With a smaller proportion of children, the vitality of our society increasingly depends on the capacity and resources of each child. The importance of investing in the development of all children is of even greater urgency given that, in the coming decades, larger percentages of children will face the obstacles to development that are often associated with being poor and minority. It is especially important to have available the supports and resources necessary for every child so that every adult will be prepared to contribute to social, political, and economic life and to the vitality of succeeding generations.

**Our Vision: Three Key Ideas**

Our focus on supporting the development of children and the functioning of families leads us to propose three central ideas.

First, beyond the informal resources of families, neighbors, and friends, the critical needs of children and parents for development, support, and problem solving should be met as much as possible by the organized activities and affiliations that we call primary services. Viewed as a network of resources, primary services can enhance child development and family life and can provide direct help in ways that are neither categorical nor stigmatizing. Moreover, primary services can enhance the benefits of specialized, problem-oriented services that children and parents are using. Primary services include toddler play groups and day care programs; sports teams; art, music, and after-school programs; youth volunteer opportunities; telephone warm lines and mentoring programs; drop-in and support programs for parents; as well as the resources of museums, parks, libraries, community centers, and settlement houses.

Second, primary services should play a central role in a larger, more purposefully organized infrastructure of child and family services that includes the developmentally oriented primary services as full partners with the traditional problem-oriented specialized services. The aim of this comprehensive infrastructure should be to enhance the development of all children and the functioning of families and to respond to problems as they occur.

Third, the connections between citizens and service providers needed to make this happen can best be created and sustained at the community level. Because most of children’s lives take place close to home and because families first seek sources of enrichment and support in their own neighborhoods, geographic communities are the jurisdiction in which the planning and provision of services can potentially be made most responsive to children and families. Thus, primary and specialized services can best function together at the community level.
Communities can create a comprehensive infrastructure of services by engaging in community-based planning involving citizens, civic interests, and service providers to set goals and priorities for meeting child and parent interests and needs. They can plan to create the array of services related to reaching their goals by identifying and stimulating the provision of services that jointly engage primary and specialized providers and by developing mechanisms that facilitate access and make services function together as a system for individual children and parents. These efforts can be instrumental in stimulating and contributing to the creation of responsive, caring communities—a long-term, larger benefit than that offered by the reform of services alone.

While the need to create a broadly conceived system of services is applicable across all communities, developing it in different kinds of communities is likely to pose different strategic challenges. The challenges will depend on such factors as the strength of citizen and civic leadership within a community, the level and quality of existing primary and specialized services, the urgency of particular goals for children and families, and the extent to which organizations and individual leaders have a collaborative or combative history. Depleted inner-city communities in which child and family needs are compelling, and where there is likely to be little if any existing infrastructure of primary or specialized services, will offer the greatest challenge.

This vision rests on four fundamental assumptions and beliefs which, although unproven, seem reasonable and plausible: (1) that primary services, as we define them, can be valuable in enhancing the development and functioning of children and families; (2) that the local community is a natural and manageable unit for planning a comprehensive service infrastructure; (3) that neighborhood residents should be involved in planning and developing the infrastructure; and (4) that residents' involvement with service providers and organizations in the planning process will contribute to community building.

While we acknowledge the obstacles, we believe that the inadequacy of our current response to the challenges facing children and parents warrants marshalling the effort to implement a broadened vision of social services and to identify and work toward overcoming the obstacles likely to confront this or indeed any reform. In fact, the changes we propose are now the subject of a major demonstration. The Chicago Community Trust, the foundation that originally commissioned our work on the development of an alternative conception of social services, has created a $30 million Children, Youth, and Families Initiative to stimulate implementation of these reforms. In its first years, the Initiative is focusing the bulk of its grant-making in seven Chicago area communities, most of which are low-income, urban communities. The Initiative’s multiyear demonstration of these reforms is likely to yield significant learning about the promise of the changes we are proposing and about the problems encountered along the way.

The remaining sections of this report describe the rationale and substance of our alternative conception of social services. First, because they are central to the redefinition we are advancing, we focus on the role, functions, and importance of primary services as we envision them. Second, we discuss how primary and specialized services can work together in communities as a common enterprise dedicated to promoting child development and family functioning as well as responding to problems; we also address what has to occur within communities to bring this about. Finally, we discuss implementation issues and strategies to consider in testing the vision.
2. The Role and Importance of Primary Services

We believe that critical needs of children and parents for development, support, and problem solving should be met as much as possible by natural activities and affiliations. These activities and affiliations, which we call primary services, should be integrated into a broadened conception of social services and should be available to enhance the development of all children and the functioning of all families.

Primary services are activities, facilities, and events provided by organizations that are part of families' familiar social world. They are available for use voluntarily, most often without an elaborate process of certifying need or eligibility. Primary services offer opportunities for participation, avenues for contributing to the well-being of others, and sources of personal support. They provide access to such community facilities as libraries, parks, and museums and to civic events and celebrations, often without formal registration. They enable children to form friendships and find support from both peers and adults, to investigate interests and develop and deepen skills, and to form ties to cultural, religious, and civic traditions. Primary services include activities specifically for parents, such as parent education, drop-in centers, parent support and self-help programs, and information and referral services—activities and services aimed at reinforcing parents' competence and enhancing their satisfaction in parenting and family life. Through their roots in communities and their ways of relating to children and parents, primary services can build individual capacities, help compensate for changes in families and other institutions, provide natural sources of help to vulnerable children and parents, and increase the effectiveness of specialized services.

We want to be clear that in calling organized activities in communities "primary services," we are not trying to change their nature or the nature of people's relationships with them; we are not interested in rigidifying them, or turning them into bureaucracies. We have chosen the term "primary services" to underscore the point that they offer a foundation of developmentally oriented activities for all children and families. Primary services, when joined with the problem-oriented responses of specialized services, can expand the organized social response that should be available for all children and parents.

In the following sections, we discuss what primary services are and what they offer children and parents. Because we think primary services have an instrumental and often overlooked role in enabling children to develop critical competencies, in much of the following discussion we focus on the ways in which they can strengthen the development of children. We talk as well about the capacity of primary services to enhance the development and functioning of families.

Enhancing Individual Capacities

Primary services offer children opportunities to develop and enhance fundamental capacities necessary in both childhood and adult life. Primary services can enable children to develop and maintain physical vitality, to make and sustain caring relationships, to be resourceful in applying knowledge and skills in effective action, and to gain a sense of connection to a larger community. Primary services respond to the developmental challenges children face at different ages—as preschookers, school-age children, and adolescents—and provide benefits that correspond to these stages of development.

Promoting Physical Vitality

Organized activities and community facilities can enable children and parents to enjoy building and sustaining a
level of physical well-being that is instrumental in accomplishing the tasks of everyday life. For young children, physical activities in parks, playgrounds, and recreation agencies support development of their physical skills, enhance confidence in their abilities, and provide a familiarity with the physical world beyond home.

Organized programs offer school-age children opportunities to meet and master increasingly demanding physical challenges. Learning to tolerate variations in ability among peers and to pursue common goals can be facilitated by adult leaders and older youth.

For adolescents, physical exercise is a way to become acquainted with and to adjust to rapid physical changes and is a significant source of release, mastery, and pleasure. Although many physical skills develop in the absence of organized programs, the needs for space, equipment, social arrangements, and instruction are seldom met without organized opportunities.

Sustaining Caring Relationships

Primary services provide opportunities for social interactions that can promote children's ability to sustain caring relationships—their ability to give and to accept care in turn. This ability is essential to a sense of self-esteem and to participation in supportive social networks.

Play groups, preschools, day care, and other organized activities can introduce young children to other children and adults, encourage the development of social skills, and move children toward the possibilities of friendship. Through these opportunities young children learn that they can rely on certain settings and people to be predictable, protective, and caring.

For school-age children, group activities offer chances for learning about loyalty, protecting the feelings of others, and taking another person's interests into account. Adults in organized groups often help children to accommodate some of their personal interests to those of others and through this accommodation to learn to become responsive, caring companions.

Organized group activities can be occasions for children and adolescents to know a wider group of people and to form friendships outside their immediate circle of relatives, neighbors, and school peers. This broadened exposure to people who may have different values and beliefs can provide a valuable foundation for living in a pluralistic society.

Parents also benefit from the friendships and social support that grow out of their involvement in community activities for themselves and their children. For single parents, those new to a community, and those who live at a distance from relatives, the relationships that develop through these encounters can be extremely important sources of social support and social control.

Enhancing Resourcefulness

Resourcefulness is the ability to act effectively in achieving goals for oneself and others. The components of resourcefulness are the possession of practical knowledge and skills, and the ability to seek and sift information, to learn new things, and to apply knowledge and skills in effective action. Primary services provide varied opportunities for children to develop and test the effectiveness of their growing physical, mental, and social capacities. Opportunities to demonstrate resourcefulness build children's sense of competence and reinforce their willingness to take on more demanding challenges and to develop the capacities needed to master them.

Providing exposure to the mundane and practical aspects of the world (business offices, a manufacturing...
plant, a hospital) as well as to material and expressive culture (museums, concerts, and other art forms) can offer children an appreciation of the wide range of activities in which one can engage, and may stimulate curiosity. By experiencing what others do, children are likely to develop an interest in knowing how to do some of these same things themselves.

Children's resourcefulness is strengthened by hands-on opportunities to solve problems and make things happen. For very young children, chances to play with a wide variety of materials that allow them to have a visible, constructive effect on the world around them encourage the development of a sense of competence. School-age children need opportunities not only to learn new things but to apply what they know to solve practical problems with peers and to extend their sense of mastery over everyday matters.

Older children can build a sense of competence by picking an area in which to develop particular skills. Mastering a skill suggests to young people that they can develop expertise in other areas as well, and that they can ultimately learn to stand on their own. It is important that communities provide primary services of sufficient variety that each child can experience being involved in and being very good at something.

Mastering skills valued by adults is particularly important in building an adolescent's sense of competence and self-esteem. Primary services provide numerous avenues through which young people can contribute to the well-being of others and exercise skills that are valued by adults: they can enter the debate on social issues, participate in the operation of local organizations, and provide direct help to individuals. Such contributions can enhance a young person's self-esteem, consolidate skills, and provide exposure to the demands and rewards of work.

Primary services can provide direct support and guidance to increase effective parenting. It is difficult for children to become resourceful or develop a sense of competence if their parents feel helpless about their own capacities to care for their children effectively. Programs such as drop-in centers and parent support groups, parenting classes, and information and referral services complement and extend parents' personal resources. Informal interactions among parents who attend activities in which their children are involved are also ways for parents to find advice, friendship, and social support.

**Expanding a Sense of Connection to a Larger Community**

It is important for children to develop a sense of social connectedness, to feel attached to a network of relationships beyond family; these social connections are a foundation on which civic responsibility and participation rest. A sense of connection can be achieved through affiliation with groups that validate identity, provide access to friendships, activities, and supports, and expect personal contributions in turn.

Interacting with children and adults in organized activities acquaints young children with the ground rules and pleasures of group participation; it gives them the chance to learn that their presence and their developing skills are valued and rewarded outside as well as within the family.

For school-age children and adolescents, a sense of social connectedness can develop in groups where common interests are shared and where children are linked to the traditions of past generations. A sense of social connectedness can build children's awareness of being part of a familiar, responsive world beyond family and school. Ongoing groups provide an arena in which young people can experience the expectations and rewards of accommodating personal interests to common interests, an accommodation on which the functioning of a democratic society depends.
A sense of social connectedness may be taken for granted in many families, but for those who lack close relatives or other social connections, a link to community groups can make a great difference in their ability to cope with life events, including the challenges of parenting. A sense of ongoing connection to social groups is especially important for a child who is facing adversity or for a family experiencing a particularly difficult challenge or change in circumstances.

**Responding to Changes in Other Socializing Contexts**

Primary services are only one of the socializing contexts important in children’s lives. These contexts include families, communities, schools, and workplace opportunities for adolescents. Together they provide the settings in which children develop. In addition to strengthening individual capacities, primary services can play a key role in responding to changes in other socializing contexts. Changes in families, communities, schools, and the workplace increase the importance of primary services.

**Families**

Because of the decreasing size of immediate and extended families, children have fewer relatives on whom to rely for recreation, support, and socialization. Their opportunities to play with other children may be more dependent on adult facilitation (making play arrangements and taking children to them) or, particularly for children whose parents work, on organized community activities in which children participate. Having access to fewer adult relatives may increase the importance for children of available, caring adults in primary service settings—adults who can act as role models, sources of support and guidance, and monitors of normative values and standards of behavior.

For children experiencing disruptions, such as relocation to a new community, divorce or remarriage, or parental or sibling illness or death, access to other children and caring adults can diminish a sense of isolation and can rally a child’s own capacities to cope. As the personal resources of parents are spread thin in many single-parent and two-working-parent households, enrichment activities offered by primary services and children’s connections to adults in these settings can be important in augmenting the activities and attention parents provide.

For many single-parent families, as well as for an increasing proportion of two-parent families, the task of raising children is made more difficult by poverty. Primary services offer a capacity-building orientation and set of opportunities in depleted communities. They can help compensate for disadvantage by facilitating the development of skills and providing access to opportunities and to adult role models that are often otherwise scarce or unavailable. Primary services can be safe havens in which children can be protected from exposure to such negative influences as random violence and pressures toward involvement in drug use, gangs, and early sexual activity. Beyond their protective influence, primary services can offer avenues for engaging the energies of youth and adults in generative activities that can help counteract the sense of oppression and contribute to changing the balance of what is present in otherwise depleted communities.

**Communities**

The increasing rates of women's participation in the labor force and the movement of families into and out of communities have combined to limit the number of adults in com-
munities on whom children and parents can rely for regular
and sustained social support and social control. The thin-
ning network of acquaintances once available to support
children and to monitor their behavior enhances the impor-
tance of adults in primary service settings who can assume
these functions. Primary services also facilitate informal
social interactions among parents, through which they can
come to know each other and to develop shared norms and
values, sources of social support, and social control.

As a result of legal reforms in the areas of juvenile jus-
tice, special education, mental health, and child welfare, a
much greater proportion of children with special needs are
remaining in their communities. These changes—such as
the decision not to treat children's status offenses as crimes
and the mandate to educate handicapped children in the
least restrictive setting—have meant that communities
now have within them many more disabled and disaffected
children. The diminished network of adults available to
invest time and attention in the day-to-day functioning
and development of children, and in monitoring their
behavior, makes engagement with primary services particu-
larly important if disabled and disaffected children are to
be successfully integrated with their peers. The daily func-
tioning and development of these children can be strength-
ened by incorporating them as much as possible into pri-
mary service settings and programs.

Schools

As the universal developmentally oriented institution for
children in communities, schools—and increasingly
preschools—have been expected to take up the slack left
by changes in other socializing influences on children.
Schools are struggling to meet increasingly complex
obligations for children's learning and development.

Primary services can complement what schools provide
and offer an alternative to further increasing the obliga-
tions schools are expected to assume.

Primary services offer hands-on opportunities to apply
academic learning in practical situations, thereby consoli-
dating academic skills and strengthening children's interest
in continued learning. These opportunities can be espe-
cially important for children who are not doing well academ-
ically or socially and who thus may have a tenuous attach-
ment to school.

Because of their community connections, flexibility in
programming, and orientation to youth, primary services
may be particularly well suited to augmenting what
schools provide in such skill areas as decision making and
youth leadership and in subjects whose content is shaped
by cultural norms and values, such as parenting education
or values clarification. Primary services can reinforce the
learning schools offer; provide places where students can
test, consolidate, and extend what they have learned in
school; and stimulate their interest in continued learning.

Workplace Opportunities

In contrast to many of the paid employment opportunities
for adolescents that increasingly involve routine tasks and
minimal interaction with adults, primary services can pro-
vide regular contact with adults and exposure to a greater
range of work responsibilities and a wider variety of career
options. These opportunities can be particularly important
for young people living in communities in which legitimate
employment options are very limited. Through community
service and youth leadership opportunities in primary ser-
vice programs, adolescents can gain a sense of connection to
a community, an enhanced sense of competence, and an
understanding of both the demands and the rewards of
work. These contributions can build work-related skills and experience that can serve as a bridge to paid employment.

Providing Natural Sources of Help

When individuals have unmet needs, their help seeking begins with people and resources that are familiar to them. Beyond reliance on self or family, people generally turn, in order, to friends, neighbors, primary service organizations, and, finally, specialized service agencies. One reason people turn naturally to primary services for assistance is the sense of individual choice and control over the interaction that characterizes relationships with primary services. Children and parents can turn for assistance to organizations offering primary services without having first to define the kinds of problems for which they are seeking help or to certify their eligibility.

Helping Vulnerable Children

The interaction of children and parents with developmentally oriented programs and activities can facilitate identification of emerging problems and provide early assistance in ways that are neither categorical nor stigmatizing.

Adults who work with children in the context of organized activities are in a good position to identify children whose emotional states or behavior may signal minor or major troubles in their lives. Adults in these settings can often detect changes in children’s moods, appearance, and behavior that may indicate emerging problems.

Primary services offer a variety of ways to help children experiencing difficulties. Through informal and planned conversations and activities, primary services provide opportunities for participants to talk about experiences with peers and adults in ways that can help make sense of their experiences and that can provide a framework for mastery of problems.

Programs often have special roles—managing equipment, leading activities, taking responsibility for younger children—to which children can be appointed; these roles can confer a sense of special status and can involve extra time with and additional attention from both peers and adult staff. Roles such as these may be used by staff to give special attention to children in times of need. Staff can use their helping capacities to reach out to children and unobtrusively support them. When necessary, staff can sensitively assist families in seeking more specialized help. In sum, primary services can rally and reinforce children’s (and parents’) strengths to solve manageable problems, and can point the way toward specialized help when it is needed.

Responding to Children with Special Needs

Participating in primary services can keep children with special needs in touch with the expectations and rewards of mainstream social life. Children with special needs include children with physical handicaps, and with such sensory handicaps as vision or hearing impairment, as well as children with extensive learning or developmental disabilities, emotional or behavioral disturbances, or other problems of social functioning.

Opportunities for free exchange with peers and adults in primary service settings foster the ability of children with limitations to participate actively in and contribute to the world they are growing into. Because there are greater numbers of children with special needs living in communities, and there is often no way to predict the limit of their capacities to become contributing adults, including children with special needs in mainstream life is important both for the child and for society.

Incorporating children with special needs in primary settings can have long-term benefits not only for children
who are disabled or disaffected, for whom ostracism and alienation are often the most debilitating challenge, but for mainstream children as well. All children benefit by learning to express the caring required to adapt to children with special needs and by knowing that they too will continue to be included if they should encounter difficult times.

Increasing the Effectiveness of Specialized Services

Primary services may affect the process and outcomes of a child’s use of specialized services by providing support, involvement with others, and arenas in which to practice what is being learned through specialized help. How much of themselves children invest in specialized interventions is often a function of how connected they are, or can hope to become, with normative social settings. A child’s motivation to work hard and stay the course is seldom sustained purely by an internal wish to improve. Over the long term, particularly for school-age and older children, the potential for social participation is often what sustains a child’s effort to overcome obstacles.

At considerable expense and effort, specialized services may engineer substitutes for normative social settings. These social or recreational activities—day trips, special outings, sporting events—can be used as opportunities for children to practice skills they have learned. However, attempts to mimic the primary system are often less effective than incorporating children with problems in normative settings. This is true, in part, because children with special needs who attend only alternative programs are restricted to involvement with a group of peers with similar problems so that what is considered normative behavior often becomes skewed. Children may also be less engaged in these situations because they feel that they are not participating in what they know to be the “real” world.

The investment in specialized services to help a child function better can be reinforced in primary service settings where improved functioning is encouraged and expected. When children are engaged in primary as well as specialized services, specialized service providers can count on the normal social environment in primary services to reinforce goals and to provide opportunities to practice what has been achieved by specialized help. Improving motor control, managing a speech impediment, and controlling impulsive behavior are among a wide range of tasks that may be more fully or quickly learned when children are engaged in primary settings.

Parents of children in need of specialized services are often heartened by seeing their child participating in mainstream community activities and by forming connections to and finding support from parents of other children. Parents of all children benefit from learning more about challenging and challenged children and their families, thereby better enabling themselves and their children to learn to live in a world of diverse abilities.
3. Primary and Specialized Services in a Comprehensive Community Enterprise

Creating a coherent enterprise committed to enhancing the development of children and parents and responding to special problems as they occur will take the practice orientations and the resources of both primary and specialized services. In this section, we explore what it will take to broaden the conception and role of primary services and to bring primary and specialized services together as partners in a cooperative social service enterprise. We also make the case that communities are the context in which primary and specialized services can work most effectively, and we detail the functions that need to exist within communities to create and sustain a comprehensive infrastructure for children and parents.

Broadening the Conception of Primary Services

While primary services already exist in most communities, they almost always exist as independent activities, provided where the good fortune of leadership and resources come together. In order for primary services to play a central part in a larger, more deliberately organized world of child and family services, we need to enlarge the current conception of primary services and increase their availability. It will take several steps to accomplish this.

Primary services are now too often thought of as a variety of separate recreational and social activities for children and parents without an instrumental role in child development or family functioning. Nor are they recognized for their capacity to increase the effectiveness of other institutions important in the lives of children and families. A fuller awareness of the potential of primary services is a prerequisite to any serious planning or investment in them. Policy makers, planners, and providers need to understand that primary services can form an infrastructure of resources for children and families that can operate more effectively if they are viewed, planned for, and provided in relation to each other and to specialized services.

Primary service providers currently operate in relative isolation from each other, often without a shared understanding of the role they can and do play in enhancing development and in providing direct help to children and families experiencing difficulties. Particularly for smaller community-based programs, the vision and importance of what they can do for young people and parents is often arrived at through trial and error and through the vicissitudes of keeping programs running with limited funding. Even the larger youth-serving organizations have increasingly had to secure funding by altering their programs and justifying their activities in terms of the prevention or alleviation of youth problems rather than the promotion of youth development.

An important step in enhancing primary services is to create a sense of common endeavor among primary service providers. This aim can be achieved by creating forums in which providers can discuss the objectives that guide their initiatives and the structures, programs, and practices they use for reaching their aims. Confirmation that aims and practices are shared can underscore their validity, and discussion of what appears to work best, for whom, in what circumstances can help refine program design and implementation. Opportunities for interchange among providers can facilitate identification of common obstacles and of strategies for addressing them. Communication among primary service providers also can pinpoint opportunities for collaboration in achieving goals for children and families.

Networks among primary service providers can be created and sustained at the level of local communities as well as nationally. Local providers working within the same community can come to understand the specifics of the context, its opportunities, and obstacles in ways that
national networks can overlook. Local forums may stimulate collaboration in program design and delivery or in the sharing of resources, such as facilities or staff training. National venues, including professional associations and journals, can use their broader scope to identify and disseminate information on exemplary programs and common elements of best practice. Nationally focused initiatives can offer technical assistance and training aimed both at applying or adapting best practices in local contexts and at disseminating strategies for addressing common obstacles. National initiatives can also stimulate and help underwrite program evaluations needed to determine the effectiveness of different primary service programs.

Leadership for enhancing the conception and practice of primary services and for creating networks of primary service providers can come from providers themselves, foundations and other sources of financial support for primary services, civic or community leaders, and legislators and other policy makers within government. Recent efforts by some national and community foundations have begun to focus on the importance of enhancing youth development and family functioning and on the role of primary service programs in achieving this end.

Increasing the Availability of Primary Services

If primary services are to play a more central role in enhancing the development of children and meeting their needs, these services must exist in greater variety and volume. All communities need to have sufficient variety to accommodate children of different ages, interests, and capacities. There are a number of strategies for increasing the availability of primary services.

Modifying Existing Primary Services. Existing programs may be adapted or expanded to attract and serve additional children. This can be accomplished by increasing access through changes in program location, hours, costs, or eligibility criteria; enriching program content by providing activities appropriate to the interests, developmental stage, and capacities of the children for whom they are intended; and enhancing program quality through strengthened staff training and supervision. Development of self-assessment tools may aid programs in identifying the ways to modify existing programs to attract and retain additional children.

Primary service providers working in the same community can engage in collaborative planning to better match the activities they provide to the interests and needs of the children and parents they serve. Within a group of providers, the funding and effort used to support underutilized activities could be shifted to provide a set of program options that better fits the range of child and parent interests and needs.

Creating New Primary Services. Primary service offerings can be enhanced by adding programs missing in a community and by creating new services. An expanded array of primary services can be created by exploring greater use of existing facilities (such as schools, parks, libraries, churches, and other community facilities). Collaborations among agencies with available facilities and those with available equipment and staff, or the capacity to train and supervise new staff, are ways to facilitate development of primary service programs.

Primary service opportunities for young people can be increased by including them in existing programs for adults. The organizational goals of programs aimed at adults, including political, environmental, or other social action programs, may be well served by seeking adolescent participation. Developing roles for adolescents is also a way for existing children's services to expand program operations. Even in well-endowed communities, primary ser-
vices often overlook adolescents on the assumption that they prefer informal activity with peers. Primary services can collaborate with adolescents in ways that build on their capacity for decision making, leadership, and service.

Primary service programs may be initiated by a small group of parents or other volunteers. Facilitating the development of programs initiated by youth is another way to expand available primary services. Established agencies, government, foundations, corporations, or individuals may assist new and existing primary services by providing seed money grants for planning or program implementation; supplying physical space in which programs can meet; offering such administrative supports as clerical, legal, or accounting assistance; or creating mechanisms through which entities such as foundations can support unincorporated programs and through which programs can be protected from liability exposure.

There are also opportunities to meet children’s needs by creating resources to increase access to, or bridge gaps among, existing primary services. Children are often excluded from after-school activities in communities with limited public transportation and limited numbers of adults able to offer transportation by car. Even where adequate public transportation exists, children too young to use public transportation may be effectively barred from participation in available activities. Independent travel can also be a problem for children living in unsafe communities. Communities could extend the use of existing transportation resources, including buses or mini-vans regularly used to transport students, the handicapped, or senior citizens. Alternatively, communities might develop a dispatch service of registered drivers.

While some communities may have a variety and volume of primary services sufficient to accommodate children and parents of diverse ages, interests, and capacities, others have very limited offerings. In the latter communities, citizen and civic interests as well as providers will need to expand primary services by securing additional resources. They might do this by, for example, recruiting units of national organizations to the community or obtaining commitments from public and private funders. (In Chapter IV, we talk about the challenges of implementing these reforms in different kinds of communities, including depleted, inner-city communities with limited resources.)

**Enhancing Staff Capacities**

Primary services are quite diverse, and their staffing patterns are equally diverse, even within one type of primary service. Many primary services are small operations led by one or a few paid or volunteer staff with little or no formal training in child development. Even the best-trained staff in the most developmentally oriented organizations are unlikely to have knowledge about or experience with children who have special needs.

Some of the best-educated staff in primary service programs view themselves primarily in terms of their professional roles, as social workers, librarians, ministers, or physical education teachers. Some staff identify with the mission of a particular primary service, age group, or activity, and they may refer to themselves as group workers or youth workers rather than by a profession such as social work. All need to examine how their professional identity can expand to complement an expanding role for primary services.

Many of the nonprofessionals in primary service work have a foundation in experience rather than in formal training. Because there are few requirements for entry into the field, the work attracts individuals who have an interest in working with children but who have limited formal educa-
tion, as well as people who may be between jobs or unable to make a commitment to another occupation. Nonprofessional staff in primary services are typically among the most poorly compensated workers in the labor force, paid less than homemakers, home health aides, and nurse’s aides. The salaries and work frustrations of youth workers are much like those of child care workers who staff day care centers.

Teaching, like other human service professions, evolved from a vocation—the view of an earlier time when it was believed that any committed citizen could teach the young—to a profession with its own body of knowledge, skills, and philosophies. It is reasonable to hope that primary service work might follow a similar course.

Staff Recruitment. People who are drawn to primary services often enjoy the activities and the energy among staff and young people. Young adults may be attracted to the work to extend their own sense of youthfulness, to test out career interests, or for idealistic reasons, such as a desire to give something back to a community. They are likely to view the work as a temporary stop on the way to a “real” job. Low salaries, limited career opportunities, and the lack of status accorded the job are the greatest obstacles to attracting and retaining those who might consider making a commitment to child and youth development work.

Second-career programs for displaced workers could bring mature people to work with children. Despite resistance to this idea on the part of some in the field, we believe that age is not a deterrent and that not all child and youth workers need to be young.

Viewing investing time with children and youth as a civic-minded thing to do might increase recruitment and retention, as well as support for increased compensation. As part of developing a comprehensive plan for services, a community may want to consider raising public awareness about the valuable contributions made by paid and volunteer staff who work with children and youth.

“Spend-a-year-with-kids” could be recommended to college students as an affordable alternative to a year abroad. A campaign of this kind could be a way to recruit young adults into child-focused careers. Participating college students exposed to this experience would become more informed citizens and advocates for children while contributing to the programs they staff.

Internships and academic credit for high school and college students are another alternative for increasing staff resources and quality. Young people who staff summer day and residential camps could be encouraged to use those experiences as a foundation for additional work in primary services and for the pursuit of related academic studies.

Another recruitment option would be a federal initiative to attract young people to child and youth work with the incentive that a portion of their student loan costs would be forgiven. Given the substantial debt that many young adults acquire in the course of undergraduate and graduate education, an initiative of this kind could be a way to attract better-educated people to the primary service field, much as medical manpower initiatives of the past drew many young people into medicine. The National and Community Service Trust Act of 1993 is a step in this direction.

Volunteers. Volunteers play a prominent role in primary services. Such organizations as Boy and Girl Scouts, Little Leagues, and Big Brothers/Big Sisters are staffed primarily by volunteers. Most organizations that rely on paid staff also involve volunteers, not only in traditional governance and fund-raising roles but in direct service and support roles as well. The problems of recruitment, training, and retention of direct service volunteers might be addressed more effectively if individual organizations viewed themselves as part
of a larger system of primary services so they could share common training opportunities and encourage volunteers to have a broader vision of their roles and importance as part of a child and youth development mission.

Although staff and volunteers tend to be thought of as adults, children and youth are potential resources not to be overlooked. Preadolescents can be very helpful in programs for younger children as well as for the elderly. Adolescents and older youth can contribute in numerous ways. Providing young people with some training and certificates of accomplishment can improve and underscore the value of their work and provide proof of their work skills that could be recognized by employers who hire youth.

Training and Supervision. The diversity of settings and staff backgrounds in primary services poses a challenge for training that most organizations address by offering periodic in-service workshops, supervisory meetings, and encouragement to pursue traditional academic course work. But there are few offerings in college or university curricula specific to the promotion of child and youth development in primary service settings. Courses in basic aspects of child development and in specific childhood problems are available, but their applications to practice settings are often not addressed.

Few organizations have the resources to mount their own comprehensive training programs. Beyond issues of cost and capacity, however, there is value in building consensus about the knowledge and skills that should shape child and youth development work and in establishing common training programs to convey this consensus. Bringing staff and volunteers together from across different primary services would offer them an opportunity to develop a sense of common mission. In most fields of practice, basic training takes place with peers who eventually work in a variety of different settings, but the common orientation of the training institutions and course work contributes to a substantive and personal allegiance workers can call on during the course of their careers. It allows staff in a variety of settings to use their network of peers as sources of program ideas and resources for refining their approach and practices with young people.

Several of the large national primary service organizations have developed curricula for use with their own staffs, sometimes bringing them together at central locations across states. Although this practice offers staff a chance to identify with a wider group of colleagues, it cannot contribute to a common sense of mission across diverse kinds of primary services within communities. Training that is based in communities and that brings together the staff of many organizations could foster a sense of community connectedness among the staff, and pave the way for enriching the programming of individual organizations and for potential collaboration among them.

Supervision and in-service training in some settings tend to focus primarily on administrative procedures. Important as they are, they do not help workers build skills to enhance child and youth development, to respond to emerging problems, or to work in concert with other services. In work with volunteers, supervision is often problematic—particularly if the volunteers are better educated, better paid in their primary occupation, or older than supervisors. There is need for training in the goals and process of supervision. However, defining curricula for this training is difficult without first establishing a common ground concerning the mission, knowledge, and practice skills that define child and youth development work.

One option for the design of primary service training is to develop an entry-level credential along the lines of the
Child Development Associate (CDA) credential created in the early days of Head Start, when federal day care guidelines were being developed. The CDA credential is a nationally endorsed set of competencies—knowledge and practice skills—that can be acquired through classes and a supervised work placement or through a tutorial relationship between a child care worker and a qualified mentor. The CDA helped establish the foundation for the child care field as a vocation leading to a variety of professional options in early childhood education, and other specialties. The CDA has been criticized because it does not provide "credits" that would be accepted by a community college. A Youth Development Associate (YDA) credential could be developed in a manner that gives it credit value in a community college.

If a Youth Development Associate credential became the defining knowledge and skill base for the field, it might be possible to use many of the same components in training volunteers and specialized service providers in the practical knowledge and skills they need to be effective in primary service settings. However, some attention should also be given to developing specialties in child and youth development work at the community or four-year college level. At present, students interested in working with children and youth can pursue majors in physical education, recreation, social work, education, or academic disciplines such as psychology, human development, or other social sciences. If a student's goal is child or youth development work in community settings, that goal may be devalued and the student diverted to more prestigious occupations.

Enhancing the staff resources available for primary services poses major challenges. Defining a field of primary services from an array of disparate programs is a first step toward developing a common foundation of knowledge and skills appropriate to child and youth development work.

Attracting and retaining skilled staff and volunteers is critical to enabling primary services to play a larger, more deliberate role in enhancing child and family development and in providing natural sources of help.

The Role of Specialized Services

Specialized services add an essential capacity to a comprehensive service enterprise. Specialized services are interventions aimed at reducing or resolving the difficulties children or parents may have in physical, cognitive, emotional, or behavioral arenas. These services—such as speech, occupational, and physical therapy, individual and family counseling, and behavior management—are provided by individuals whose disciplinary perspectives, training, and skills are geared to understanding and developing remedies for particular child or parent difficulties. Many children and parents need specialized services at some points in their lives, some may need them intensively over extended periods.

Specialized services may be directed at limitations within a child's own functioning, such as emotional, physical, or developmental disabilities, educational handicaps, delinquency, or alcohol and substance abuse. Some specialized services are directed at children's problems that result from interactions within a child's family or from limitations in parent functioning. These services address problems such as parent-child conflicts, dependency, neglect, and physical or sexual abuse. Within each of these groups of services, some are involuntarily imposed by legislative mandates, including juvenile justice and child welfare services for dependent, neglected, or abused children.

Just as primary services need strengthening to play a broadened role effectively, specialized services need attention to problems in their design and delivery, particularly
in the public specialized service systems. In fact, there is a significant movement toward reform in the specialized service sector that seems to be converging on a set of principles about the characteristics of the service response to child and family problems: First, the response should encompass the range of child and family needs across the traditional categories of funding and disciplinary perspectives. Second, it should build on individual strengths rather than focusing exclusively on the identification and treatment of deficits. Third, with a state role in standard setting, monitoring, and financing, this response should provide greater community authority in the design and delivery of services, to more flexibly tailor services to the needs of children in the context of their families and to the needs of families in relation to the communities in which they live. We are in full agreement with these principles. If used to guide reform, they would result in specialized services that would mesh with our conception of a responsive community infrastructure for children and families.

In proposing that the redefinition of social services include both primary services and specialized services, we are not arguing that the distinctions in focus and methods that characterize primary and specialized services should be eliminated. The differing orientations and skills of these sectors each have an important role to play in enhancing the development of children and responding to problems. What we are arguing is that having these services act in concert on behalf of children and families will strengthen what each is able to provide and the role each can play in the lives of the children and parents they serve. We are proposing a recognition among primary and specialized providers that they are parts of a single enterprise serving children and parents, and collaboration among them to make that enterprise more effective.

Much of the argument for collaboration in the current debate about social service reform focuses on the need to integrate services for children and parents with multiple problems and significant levels of distress. We agree that it is critical to facilitate access to services and to make services responsive to families struggling with an array of problems, often with limited financial and other resources. Later in this report, we propose development of several specific “helping functions” and suggest ways in which they can facilitate access to both primary and specialized services. While recognizing the importance of collaboration in order to meet critical child and family needs, we are proposing broader alliances for a broader purpose. Participating in this common enterprise means sharing a vision of the reach and range of responses that primary and specialized providers can jointly provide and of the powerful contribution they can jointly make to accomplishing their common aims for all children and parents, including those in distress.

In the following sections we discuss why we focus on communities as the context in which to create a comprehensive infrastructure of services, and the steps that must be taken in order to bring this about. These steps include the development of collaborative planning and decision-making capacity—by citizens and civic interests as well as providers—and the creation of mechanisms that make services accessible to individual children and parents. Taken together, these changes—creating a collaborative goal-setting and decision-making capacity at the community level, and mechanisms for enabling individual children and parents to access services—can create a comprehensive and coherent social service infrastructure in communities.
Communities As Arenas for a Comprehensive Service System

Children, families, and communities are essential resources for each other. Although families are the primary context in which children develop, children and parents seek social support, social control, and services from their communities. Communities, in turn, rely on the continuing investments of their members to generate and maintain their common institutions.

The various contexts in which children develop tend to cluster in the communities in which they live. At least through elementary school, children's interactions with friends, schools, religious organizations, teams, clubs, and other associations usually occur close to home. Beyond the convenience of relying on local resources and services, there are benefits to children from overlap in membership and expectations among the settings they experience. Children's development is most effectively supported where there are connections among the adults who play roles in children's lives and where the messages children receive from the various settings in their lives are consistent.

Communities are the most promising domain for the planning and delivery of responsive services, allowing for a state role in standard setting, financing, monitoring, and concern for equity. Services created by local institutions can harmonize with local interests and needs more readily, can be more responsive to specific cultural preferences or particular norms and values, and can more naturally draw on surrounding resources than services offered by institutions representing larger and more distant jurisdictions. Citizens can assume a greater control over local institutions and the services they provide. Gaps in available resources and services and problems of fragmentation are also most evident at the local level.

Knitting together institutions that provide primary and specialized services so that they function as a common enterprise depends on connections among individuals and institutions, and on a shared understanding of families' needs and a joint plan for meeting them. These connections are most likely to be created and sustained in a geographic area within which service providers can know area residents and each other.

Defining Geographic Communities

"Community" has varied meanings. We mean a geographically bounded territory within which people live, a locality that can provide a shared frame of reference growing from a dynamic pattern of interactions, a shared history, and common interests. At minimum, these interests arise from living within the same territory, sharing the same institutions and services, and facing the common obstacles and opportunities presented by these resources.

Life within a geographic community can be seen as a social system in which functions central to daily living occur: goods and services that are part of daily life are provided and consumed; knowledge, values, and behavior patterns are transmitted, particularly to children; influence is exercised to regulate behavior in conformity with accepted norms; and access is provided to participation in joint activities, to opportunities to create and maintain interpersonal relationships, and to sources of mutual support. In Chapter IV, we discuss criteria that can be applied in defining and selecting local communities for the purposes of creating a common service enterprise.

What Is Needed to Build the Infrastructure

In what follows we discuss the steps needed to bring primary and specialized services together so that they function
as a broadly defined, responsive infrastructure of social services for children and families. While this discussion focuses on the changes needed to create an infrastructure of social services, enhancing the development of children and families and responding to their problems requires the engagement of a range of individuals and institutions in communities, including those concerned with education and health care. In some communities, other needs, such as economic and physical development, have to be addressed if long-term goals for children and parents are to be achieved. The changes we are proposing can provide a framework for the expanded goals and additional actors that would be involved in a broader reform initiative.

Two critical steps are necessary to accomplish the alliance of primary and specialized services as parts of a common service infrastructure. First, communities need to create a collaborative capacity to set outcome goals for children and families, to set priorities among these goals, and to identify how providers might help meet them. Within this goal-setting and planning framework, primary and specialized providers need to work together in developing activities and delivering services. Second, mechanisms need to be fashioned that facilitate access to and use of services, that make services function together for individual children and parents.

Creating a Collaborative Goal-Setting, Planning, and Decision-Making Capacity

Creating an infrastructure of services within a community is best done as an expression of goals that reflect both desired outcomes and valued qualities of life for children and families. If goals reflect the opportunities a community wants for its children and families, they can serve to guide the planning of services and the allocation of resources, and can establish targets that providers can be held jointly accountable for achieving. Goal setting should be a civic process, broadly representative of youth and parents and organized community interests—religious organizations, ethnic associations, business clubs, and block clubs, among others—and informed but not dominated by the experiences of primary and specialized service providers.

It is important that citizens take an active part and feel ownership in setting goals and selecting priorities. This process should not reflect or appear to reflect the self-interest of service providers calling for priority provision of more of what they currently offer. The process should also avoid framing all goals in social service terms, because primary services that enhance the quality of life include a variety of social arrangements, such as community projects and events, access to facilities, or rerouting of transportation, that may require involvement of non-provider organizations or volunteers.

Crafting a planning and decision-making structure and capacity within communities gives rise to complex issues, including the composition of a representative group of citizens, civic interests, and service providers; the role and authority of this group and of individuals within it; the process by which decisions are to be reached; and the relationship of this group to other representative and governmental bodies. We address these and related issues in the following section on implementation and talk here about the functions of this planning and decision-making group.

Service Planning

The aim of service planning is to make the array of services in a community coherent and responsive to families' interests and needs—not to control or inhibit the development of services. Planning should focus the attention of
service providers, individually and jointly, on better matching the interests and needs of children and parents by coordinating what is available in a community and creating what is needed.

For a community to plan for the provision of services, two kinds of information must be gathered: the interests and needs of the community’s children and parents—that is, information about “demand”—and information about a community’s existing “supply” of resources and services.

Understanding Child and Parent Interests and Needs. The interests and needs of children and parents should be the starting point for efforts to develop a community-based service infrastructure. Planners can gather and transmit information of several kinds through conversations with children and parents. First and foremost, children and parents can speak for themselves about how they see and define their interests and needs. Surveys can identify existing patterns of child and parent participation in primary and specialized services; they can also highlight unmet needs, and the priorities children and parents attach to meeting them. Surveys can also identify what children and parents know about existing services and see as barriers to their use; identify those interested in participating in a community planning process or in volunteering in the development or operation of primary or specialized services; and allow families to express interest in being contacted by primary or specialized service providers. At the same time, interactions with families during the course of a survey can offer opportunities for transmitting information—about the existence of a community service initiative or about the availability of existing services, for example.

A community that finds a household survey too formal, too time-consuming, or too costly could gather information from children and parents in other ways. Open meetings, formal opportunities for public testimony, focus groups, and interviews on the street, in malls, stores, and service settings are all ways to seek input directly from children and parents. Secondary sources, individuals who know and work with children and families, can also provide information. Interviews can be conducted with social service, recreation, education, health care, and law enforcement professionals, among others who know a community’s children and parents in a variety of settings and from a variety of perspectives. Census tract data can be aggregated to provide a community-wide perspective on the age and income distribution, education, housing, and family structure within a community. Each of these methods has benefits and limitations requiring that the breadth and depth of knowledge gained be balanced against considerations such as time, cost, and community receptivity.

Inventory of Existing Resources and Services. The purpose of compiling an inventory of available services is, in the first instance, to match it against child and parent interests and needs as the basis for community service planning. It provides the basis for identifying gaps as well as redundancies in existing services.

Like a survey of children and parents, the process of compiling an inventory should integrate thinking and planning about primary and specialized services and provide opportunities for interchange between planners and service providers. Information can be gathered about the existing pattern of contacts among providers as well as the nature and extent of their interest in additional collaboration. Data on existing community services can be the basis for creating an ongoing community information and referral function. The purposes and importance of an information function of this kind are discussed in the following section.
Communities can use a variety of methods to assess the array of primary and specialized services. Inventories should begin with information in existing directories; interviews with leaders of major organizations and other key informants can supplement this material. Data can be collected directly from existing service providers through mailed or telephone surveys, through in-person interviews, or through a combination of these methods. Inventories of existing services can be compiled by survey researchers, staff of public or private agencies, or volunteers—including youth.

In addition to documenting the existence and capacity of existing services, documenting the quality of services is an important—but more complex—aspect of developing a service inventory. Even without formal evaluations, there are a number of ways to assess how well available services meet people's needs. For example, information on waiting lists can be used as a rough proxy for measures of consumer demand, and data on consumer satisfaction can be gathered directly from people who use existing services. Alternatively, service providers can be used to rate the quality of existing services or to rank services by quartile so that attention can be paid to improving the services of lowest rank.

Ideally, a process should be developed for assessing the contributions of services toward improving outcomes for children and families. This process needs to begin by better defining the range of influences primary and specialized services can have on enhancing the development of children and the functioning of families and on addressing child and family problems. Methods for evaluating the quality of individual primary and specialized services and for documenting the joint contribution they make to a community's children and families are both needed.

Using Information for Planning. The purpose of assessing existing services is to plan and provide services that address the interests and match the needs of children and parents. Citizens and civic interests as well as providers of primary and specialized services should share responsibility for calibrating the nature and array of available services so that they enhance the well-being and respond to the needs of children of all ages, interests, and capacities. Implicit in this process is the need for each service agency to examine and adjust its own offerings in relation to information about interests and needs in the community and the offerings of its counterparts. At the same time, the unique resources of each provider's staff, facilities, traditions, and programming should be articulated and their comparative advantages taken into account.

Survey information indicating interest among children in particular primary services such as sports or music can be mapped against what is known about children's skill levels and their interest in and tolerance for structured and competitive activities as compared to more informal or individualized involvement. The array of the community's offerings in these areas can be planned across providers so that there are opportunities for children to engage in highly structured, competitive, performance-oriented programming as well as less formal and more individually focused varieties of these activities. The goal should be to offer all children an opportunity for constructive engagement with activities that enhance their development.

If survey or other data about the community and its residents indicate that significant percentages of children are facing challenging life circumstances, primary and specialized providers can recognize and jointly respond to these circumstances. If there are substantial numbers of families moving into a community, responsive program-
ming should provide multiple points of entry into activities for children with various skill levels and patterns of prior participation. If substantial numbers of children are living in families with problems of unemployment, divorce, or other stressful disruptions, the normative settings of primary services can serve as the first level of response to those issues. Primary service programs can include more “down time” surrounding activities to allow for conversation with peers and adults, or other supportive activities. With input or staffing by specialized providers, primary services also can organize more formal groups for children or parents to discuss and begin to address difficult life circumstances. By being attentive to children or parents experiencing serious difficulties, staff can suggest connections to more intensive and individualized help from a specialized service when that seems warranted.

Patterns of use of multiple services by children and parents may suggest opportunities for collaboration in program location, in communication among program staff, or in service delivery across groups of both primary and specialized providers. Survey information identifying large numbers of children at risk of out-of-home placement through specialized service systems may support a community’s petition for pooling and for flexible use of currently categorical funding for such publicly financed services as child welfare, mental health, juvenile justice, and special education.

Joint planning can work to ensure that the nature of services, their sites, and their hours are responsive to parents’ schedules and to their reliance on organized provisions to augment children’s enrichment and supervision. Parents often rely on their children’s use of primary and specialized services in non-school hours as an important source of enrichment, attention, and care. However, unforeseen circumstances can make these arrangements unreliable, stranding children with little, if any, recourse. A set of collaborative arrangements could be established among parents and community schools, individuals, and organizations to respond to circumstances in which children are stranded or otherwise without access to capable and caring adults.

**Conditions Needed to Sustain a Common Enterprise**

The kinds of alliances we are suggesting are not trivial undertakings. They require moving beyond differences in orientation about the role primary and specialized services see themselves playing in children’s lives and the relationship they believe they have to each other; they require developing a shared sense of purpose and a common language about purposes and practices; and they require spending time together to address problems as they emerge. The following are among the conditions needed to create and sustain a sense of common enterprise among primary and specialized service providers.

*A shared purpose:* Primary and specialized service providers need to forge a sense of common purpose, blending their orientations and expertise as individual professionals and as organizations to the joint task of promoting development and responding to problems. Both primary and specialized providers need to draw on shared goals for children that they are committed to working together to achieve. This does not mean abandoning the unique purposes of individual providers or agencies, but it does mean altering and extending those purposes through alliances among primary and specialized counterparts.

We propose that a service enterprise develop within the local community context. This can facilitate the process by which service providers arrive at shared purposes. By working within the same community, providers will be serving the same children and parents. They will be shar-
ing an environment that presents the same opportunities and obstacles, which they may be better able to leverage or solve by acting jointly.

A sense of mutual benefit and mutual respect: By bringing their promotional and problem-solving orientations into a common orbit, primary and specialized providers should come to understand what they each contribute to the well-being and welfare of children. A sense of mutual respect and benefit should derive from common endeavors and experiences that demonstrate that together they can extend and strengthen what they could achieve separately. This sense of mutual gain and growth from common undertakings will be key to the longevity of alliances among primary and specialized services.

Forums for sustaining a common enterprise: Obstacles to creating alliances among primary and specialized providers are substantial, and problems translating purpose into practice inevitably occur (see Chapter IV on implementation issues). Primary and specialized practitioners and providers committed to being part of a single enterprise need forums or mechanisms through which they can sustain common endeavors. These forums should provide regular opportunities to renew and refine the purposes for which they are working; to understand the differences in orientation, training, and language with which they view and serve children; to define and discuss the problems that emerge in practice, identify solutions, and refine these approaches so that they work. Forums should be created for developing alliances among program executives, managers, and line staff.

Priority attention to creating a common enterprise and to building the personal relationships needed to sustain it: Building alliances requires an investment of time, both managerial and staff time, and an understanding of the importance of personal relationships as a basis for sustaining joint endeavors. It is important for providers to know each other personally, to meet face to face rather than relying exclusively on bureaucratic channels and efficient but technological ways of trying to work together (memos, phones, faxes).

Cooperation among primary and specialized providers is central to creating a common enterprise. Their cooperation on joint planning and service provision ultimately needs to be stimulated by incentives other than those now driving the provision of services. The demonstration of the reforms proposed in this paper should provide a test of and better understanding of the incentives needed to engage primary and specialized providers in collaborative undertakings. It will be important to ascertain the extent to which collaboration across now disparate services can in fact enhance both the appeal of services to children and parents and their potential effects, as well as the power of enhanced services to motivate continued collaboration.

The outcome goals set for children and parents should also be used as a stimulus and focus for continued collaboration. It will take the joint efforts of parents and a wide range of providers to move toward these goals. Using outcomes as the focus for collaboration will require developing altered accountability mechanisms to monitor and reward joint action. Tracking progress (or the lack of progress) toward goals, at least initially, can be used more to understand child and family circumstances and the nature of potential opportunities for moving forward than to impose sanctions on particular providers. In addition to joint accountability mechanisms, sustaining long-term collabora-
tion in service provision will require changing patterns in the financing of services. These changes may include more flexible access to currently categorical funding so that communities can better direct funds toward priority goals and collaborative service provision designed to meet them. We further discuss financing in Chapter IV.

**Making Services Work for Individual Children and Parents**

Creating a common service enterprise depends not only on goal setting and planning across the entire span of services, but also on having a mechanism that makes the full range of services accessible to individual children and parents. The assistance available to make services coherent and responsive to an individual family should mirror the family's situation: as a family's needs increase in complexity or intensity, so should the mechanisms available to help. This help can translate what can otherwise be discrete, unrelated services into a coherent, responsive service system for an individual child and family.

Information about existing services and individuals able to provide increasingly intensive help in creating strategies for use of and access to services are essential mechanisms for a coherent service enterprise for individual children and parents.

**An Information Bank.** Information is a fundamental prerequisite for access to services and for their effective use. For many children and parents, a centralized information resource would facilitate the choice of and access to services responsive to their interests and needs. A strong information resource is also essential to facilitate collaboration among providers and to help them make appropriate referrals to primary and specialized services.

An information bank can be a minimalist structure of reference information or a more fully developed operation that provides data to answer diverse questions about the particular interests and needs of individual children and parents. Among its functions would be cataloging and communicating data about primary and specialized services in the immediate and surrounding communities, including for and by whom they are provided, and when and at what cost they are offered, along with other data relevant to choice and use. An inventory of existing services, maintained and updated over time, could be the starting point for developing an information bank.

Possible sponsoring organizations for an information bank include libraries, schools, existing information networks (such as day care information and referral services), municipal offices, and an entity created for this specific function. Involvement of community residents, including youth, in data collection and periodic updating would be a way to encourage community investment in and use of an information bank.

It would be advantageous to have common data elements and operating procedures across information banks in various communities to give residents and local providers access to the network of services in other communities and to make it possible to provide centralized assistance to individual information banks. This assistance could include the provision of data on regional services or local services provided by a central source such as state government, as well as technical assistance on maintaining and upgrading the information bank and training in its use. In addition, information banks with uniform data systems would provide the basis for identifying relative need among communities and would facilitate planning and funding decisions—both governmental and philanthropic—at the community as well as the county, regional, and state levels. Over time, the information
bank and the service inventory that supports it could be expanded to include information on as broad a range of services as communities want, such as health care and education, employment training, and job opportunities for children and youth as well as adults.

Access to an information bank needs to be convenient to facilitate its use and provide equitable access to service information for all residents. In most communities, information is privileged in the sense that it is more readily available to members of some social networks than to others. A computerized system could be available at multiple sites throughout a community, and accessed by consumers and providers alike. It should be easy for adults as well as children and youth to find and to use independently.

As useful as computerized access to information would be for many children and parents, some residents will need assistance if they are to benefit from a community information system. General as well as individual outreach to explain the availability and use of the information bank are both needed, but may be organized according to a particular community’s characteristics. Demonstrations and assisted searches could occur in sites such as malls, schools, supermarkets, and pediatric offices. Community newspapers and television and radio public service announcements could be used to promote the information bank, supplemented by other devices, such as the newsletters that often accompany telephone and utility bills.

An individual outreach capacity would be an important adjunct of an information bank, since persons who have the greatest need for information or direct help may be isolated, intimidated, or uncertain about how to formulate their questions. Individual outreach and assistance in using the information bank could occur through creation or expansion of home visitor or commercial “Welcome Wagon” services.

For families with increasingly acute or complex needs, we suggest three types of “helping persons” and their functions.

The Helping Functions. The helping functions proposed here are an active mechanism through which primary and specialized services can function in an integrated, responsive way for individual children and parents. This active helping can make services function as a single, effective system. The purpose of these helping functions is not to supplant the services available in primary and specialized agencies but to enable children and parents to exercise more effective and efficient use of community resources and services.

In what follows we describe three helping functions that we have somewhat unsatisfactorily called information resource specialist, family advocate, and case manager. As we conceive of these functions, we believe that most people would have reason to use information specialists from time to time, many would have occasion to turn to a family advocate at some time in their lives, and a small number would require the services of a case manager.

Information Resource Specialists. When families wanted help in finding relevant information, an information resource specialist, in person or by phone, would discuss with them their interests and needs, and would provide information about the range of relevant primary and specialized services.

The first level of assistance from an information specialist would be technical and would involve demonstrating how to use the information bank or operating it for an individual. This service could be provided by salaried outreach workers or by trained volunteers. Retired or semi-retired professionals, including human service workers who are interested in continued involvement with their community,
would be ideal recruits. In addition to helping focus questions and direct inquiry, they could be available at a variety of locations to help consumers learn to use the information bank independently. Adolescents could serve as information specialists, particularly for other young people in settings such as schools, libraries, or youth organizations.

Some inquiries would require more detailed responses, including help with the assessment of resources for particular circumstances. Such inquiries could be referred to a more knowledgeable information specialist. A parent might have a question about whether home or center day care is more appropriate for a shy, medically fragile, or aggressive child. Or the question might be about the differences between types of volunteer opportunities, or afterschool or counseling programs. A parent might need information about where to turn for evaluation of a possibly handicapped child. Primary and specialized providers could also use the assistance of an information specialist to learn more about service options before making referrals.

When children, parents, and providers sought information matching preferences and needs against available services, the information specialist would operate more like a reference librarian than a directory assistance operator and would probably need the training of a librarian, a teacher, a communications specialist, or a social worker as well as considerable familiarity with the resources of the local community.

What distinguishes the information specialist function from those that follow is the locus of responsibility for laying out a possible course of action. An information specialist would not counsel, only expand the information available to a child, parent, or provider. When more help is needed, he or she can refer to the next level of help, the person we have called a family advocate.

*Family Advocates.* If families wanted help beyond learning what services were available, an individual acting as an advisor or advocate could offer additional assistance in sorting out problems and creating a strategy for using assessments and other primary and specialized services.

For a family concerned but confused about their child’s status, consultation with a family advocate might be of value. With the advocate’s assistance, problems could be given some initial definition, and strategies for understanding and addressing them could be created. The child might be having difficulty making and keeping friends, be difficult at home, and may have trouble learning. After talking about the range of problems, and getting a sense of the child’s interests and the child’s and family’s strengths, the advocate and family could develop a service strategy. Such a strategy might include the child’s involvement with a primary service organization that matches his or her expressed interests. (For example, a child having difficulty with math who excelled at reading could be an effective reading tutor for younger children, using his strength to enhance the skills of other children and to build his and their abilities and self-esteem.) The family advocate might also suggest that a prudent course would be a request to the public school for a multidisciplinary assessment (even if the child is enrolled in private school).

For families who had difficulty negotiating a route to these or other services, the advocate would be available to negotiate on their behalf and, in the process, to model a problem-solving process. This might empower the family to consider and develop additional strategies as needed. Parents could return for further problem solving or seek additional counsel by phone until they had developed a satisfactory course of action.
The advocate could help make linkages to community services, but would not do their job. He or she could be available for a fee, or as a community service for a limited number of contacts annually. It will be a delicate matter to balance the constant neediness of some families, the needs generated by crises that can occur in any family, and the needs of families not in crisis who would benefit from timely help sorting out emerging problems.

Although the family advocate would assume some professional responsibility for the quality of problem solving and direct advice, and should have consultants to call for advice and referral of acute problems, the primary responsibility would remain with the family. Referral to primary services as well as to specialized diagnostic and treatment resources would be recommended when the nature or complexity of a situation suggested these options.

The family advocate’s life experience, openness, and problem-solving style might be as important as professional training or experience. No one could have all the knowledge relevant to the range of questions that could arise. A capacity to sift data, to think flexibly, to draw on past experiences, and to know the community and its resources are all important ingredients for creative problem solving, which, more than anything else, is what the family advocate would offer, share with, and teach families. The advocate can best be described as someone with assessment skills and a capacity to fill the role of the traditional case-worker, who saw his or her task as viewing clients in their community context and empowering them to take charge of their lives. For families with multiple service needs and without the capacity to secure or manage these services, the family advocate might make a referral to a case manager.

Case Managers. The case management function would differ from the information and advocacy functions on two counts. The case manager would have skills in coordinating service planning and provision among providers and, in the best case, would have authority to certify eligibility for government-funded programs and benefits. The purpose of the case management function is to provide a person and a place to focus responsibility and financial resources to accomplish more effective outcomes for the child and family, and to use scarce resources in more deliberate and efficient ways.

Case management services should be available for families who are or who may need to be involved with multiple primary and specialized services and/or government systems of care and who do not have the capacity to manage these services either because of the nature and complexity of the child’s problem or because of parental incapacity.

The case manager should have access to a flexible pool of funds with which to pay for arrangements that make a service strategy work—funds that act as the glue for a service plan—and that are unavailable from other sources. These payments might include expenditures that help families meet concrete needs, such as transportation, babysitting, and enrollment or equipment fees, thus enabling a child or family to use either primary or specialized services.

A case manager might also use these funds to assist primary service providers in making necessary accommodations to serve a child with special needs, by providing adaptive equipment, for example.

Ordinarily the appropriate training for a case manager would be a graduate degree in social work, psychology, nursing, or another human service discipline, broad experience in primary and specialized services, creativity, diplomacy, and optimism.

Workers providing the three helping functions should be located in an organizational setting to which families are naturally attracted. The setting, likely to vary in different
communities, could be a town hall, library, community center, school, family resource center, or service agency. Existing agencies that currently provide a mix of primary and specialized services may be well positioned to house and provide organizational support for these helping functions. In some communities, it may be necessary or desirable to create a setting hospitable to these functions, such as a settlement house, family resource center, or some other community-based entity that offers a natural helping context.

Like the breadth of data in an information bank, these helping functions could be extended to provide access to a wide array of services, including education, health care, and employment training and placement services for children and youth, for parents in their roles as family providers, and for adults regardless of their age or family status. The reach of these helping functions could parallel the breadth of reform initiatives in local communities.

Given the challenges facing children and families and the limitations of our current problem-focused service response, we have argued that it is time for a fundamental redefinition of social services. Services for children and families should be informed by a shift in both policy and practice, from an exclusive concern with responding to deficits to an orientation that also includes enhancing the development of children and the functioning of families. This fundamental redefinition of services should enhance the role and presence of primary services, combine primary and specialized services into a common infrastructure, and focus on communities as the arena in which the planning and provision of services can be made responsive to child and family interests and needs. The involvement of citizen and civic interests in planning and overseeing the provision of services and an array of resulting services that is responsive to child and family interests and needs are likely to contribute to building an enhanced sense of community and a greater investment in sustaining it.
4. Implementation Issues and Strategies: Achieving the Vision

There are a number of conceptual and practical challenges in implementing a vision as broad as the one we have presented. Some are generic to the implementation of innovations; others, specific to our premises. The ideas we propose will have to find their way into a mature, complex, and, in most communities, fragmented social service environment. Many pressures operating in this environment may mitigate against wholehearted commitment to innovation. This process will take years in most contexts, and at some point will need real political commitment to institutionalize. It will require significant commitment to local democracy and governance, including the involvement of a range of community members, and in some cases a significant redeployment of public resources.

Certainly our proposals suggest a much greater emphasis on the importance of primary services, and on creating responsive services—both primary and specialized—at a time when public resources are under great pressure. What it will take to finance and build the redefined service enterprise will differ in different communities. In all cases, the existing primary and specialized services in communities will need to serve as the basic building blocks for a more broadly conceived and coherent service system. This system must harness the existing service authority and financing in a community and build on that. We are not suggesting building a new infrastructure on top of or beside what already exists in communities. What it will take to create this system, beyond harnessing the human and financial resources already being spent on primary and specialized services, is one of the important lessons to be learned from demonstrations of these proposed reforms.

Economically advantaged communities might need a funding increment to finance the staffing, technical assistance, and training needed to further a civic planning process and collaboration among providers. In some of these communities, the skills and resources for these functions might be available from existing organizations and budgets; in others, these funds might come from foundations or government-financed demonstrations. In any case, the institutional capacity, if not the will, is likely to be strong.

Much more will be needed in disadvantaged communities with inadequate services, including reinvestment from public systems in both primary and specialized services. In these communities, rebuilding social services will have to be connected in some way to reconstituting the larger social ecology of children's and families' lives: housing, employment, and jobs, nutrition, health, education, and community safety. Building a responsive system of services that recognizes the legitimacy of primary services can both complement and strengthen reforms in these other areas. A network of primary services can offer opportunities that build on and mobilize the investment of children and adults in generative activities and in creating environments that help mitigate the effects of poverty. Strategies to reclaim and rebuild responsive services can play an integral role in larger reforms in depleted communities.

The "problems" for which our proposed overhaul of services are a "solution" present bureaucratic challenges—challenges inherent in any institutional reform. In terms of the social and psychological realities of children's and families' lives, and in terms of the specifics of community context, the "problems" vary significantly from one community to another.

The approach to defining the boundaries of a local community, and then stimulating and implementing change in that community, matters in a fundamental way. Decisions made early on about how to shape the change...
process reverberate over time, and powerfully shape the product of that process. It is important to recognize that there are options with respect to this process—for example, when and how to define the boundaries of the local community, how closely held or broadly participatory to make planning, how clearly to state a specific objective at the outset, and what external ideas and technical assistance to draw on. These “process” decisions have a substantive influence on the outcomes of reform.

The impetus for change, the mandates that begin reform, the purposes articulated for engaging in a reform process, the patterns of participation in the process, and not least the nature of the local community and preexisting service enterprise will all influence the way in which a local community relates to the ideas we have presented. Each community is going to present different opportunities and constraints to reconfiguring its social services, and have a different capacity to bring about and sustain changes.

There are different ways to envision initiating a change process. The impetus may come from inside or outside the community, from community leaders, providers, citizens or citizen groups; from local or state government; or from a foundation. Change can focus initially on a few discrete tasks involving a few providers, or it can be community-wide from the start. The process can be narrowly held or broadly participatory. What constitutes the community can be delineated in different ways. Each starting point, each strategy for bringing about change, each parameter set on the locus and scope of change, brings with it certain strengths and certain limitations. In what follows, we illustrate a variety of alternative ways to move toward implementation of the ideas we have presented; our intent is to acknowledge the diversity of possible starting points and processes.

Communities and the children and families who live within them may benefit from partial implementation of the broad-based reforms we have described. Benefits may accrue from single-focus changes, from strengthening the primary services sector, from generating joint endeavors across primary and specialized services, from developing a civic-led goal-setting and planning process, or from creating an information resource and the helping functions that can make services more responsive to individual children and families. We have proposed the full set of these changes because we think that together they can create an infrastructure of services able to support the development of children and the functioning of families and to respond to problems as they develop. Assuming these ideas hold merit as they are tested, we believe that the greatest benefits for children, families, and communities are likely to come from creating an infrastructure within communities that includes the full range of reforms we have described.

There are a number of reasons for focusing efforts at the community level. Communities are where the quality of supports for children and families and the quality of connections among service providers are most obvious and salient. Dissonance, fragmentation, and cross-purposes are most clearly seen and felt at the community level. A community focus encourages providers to ask themselves what kind of a place the community is for children and families, and how they may be influencing the quality of life there. Those most affected by changes in services—both providers and consumers—are likely to be found in a local community. Finally, in a complex society with scores of competing interests and claims, the community seems to be a relatively more “governable” social unit than society as a whole.

At the same time, a community focus implies more variability in the starting point, the process, and the product
of reform from community to community. Those involved in the effort must consider the boundaries of the local community for their particular purposes. Questions of size and scale have to be balanced with the issue of political salience. Should the community be defined in a way to ensure political representation in city or county government? Taking the community as the locus of reform requires consideration of who and what make up the community, and what are the fault lines, and what is the common ground. Should the definition of boundaries promote, or even consider, class, ethnic, racial, and religious heterogeneity? How will local reform processes be linked to and influenced by institutions outside the local community? Should people who live outside the community but spend substantial time there be considered part of the community?

**Defining the Community Enterprise**

There are a large number of alternative geographic designations that could be chosen to develop and test the ideas we are proposing, such as a variety of government jurisdictions, including such political units as municipalities, counties, and congressional or other electoral districts. Government service districts are also potential candidates. These include school, park, and library districts, and the districts for such specialized services as child welfare, mental health, and the juvenile courts. The geographic areas from which voluntary associations draw their members or within which they provide services may also be relevant community boundaries. Such associations include membership organizations like religious congregations; they also encompass ethnic and cultural groups, and entities such as social, recreational, and neighborhood centers.

There are a number of criteria to consider in selecting a particular boundary within which to build a service infrastructure linking primary and specialized services. They include: (1) the extent to which there is a sense of affiliation among area residents; (2) the area’s geographic size; (3) the size of the child population; (4) the stability of boundaries over time; (5) coincidence with boundaries of other relevant jurisdictions; and (6) the existence of a governance entity.

No single area is likely to meet all relevant criteria. However, in evaluating alternative boundaries against these criteria, it will be clear what attributes, such as a sense of affiliation or a governance entity, would have to be generated if a particular boundary is designated. The following sections discuss each of these six criteria relevant for designating community boundaries.

**A sense of affiliation:** A sense of affiliation entails a perception of relation, affinity, and mutual interest among community residents, and of “belonging” to a community. It may come from sharing a history; through realization of common interests, or recognition of interdependence; or from having shared commitments to norms, values, attitudes, aspirations, traditions, or patterns of culture. A sense of common interest and shared endeavor is a source of good will and motivation that can help create and sustain the joint planning and provision of services on which a service enterprise will depend. A sense of affiliation is particularly advantageous in creating a service system that depends heavily on the initiative and ongoing investment of local residents.

**Size of the geographic area:** The geographic area in which a service infrastructure is created should facilitate access to services; larger areas may inhibit access to services by children themselves as well as by parents. The consideration of area size is likely to vary depending on whether the locale is urban, suburban, or rural. Because of lower population
densities, rural children and parents are routinely required to travel longer distances to access services than their urban or suburban counterparts. Natural boundaries and existing patterns of commerce or transportation are relevant factors to consider in defining new geographic boundaries rather than using already-designated areas.

Size of the child population: The size of the child population should be sufficient to support a basic array of primary and specialized services. There is a direct relationship between the size of the geographic area and the density of the child population sufficient to sustain an appropriate array of services: because of the greater density of the child population in cities, it is likely that the geographic size of the area chosen for development of a service enterprise will be smaller in urban than in rural areas.

Stability of boundaries: Creating a responsive service system in a given area depends on knowing the children and parents who live within it and understanding their interests and needs. Generating the collaboration between primary and specialized services requires that service providers know each other and build a history of working together to meet common goals. Both of these prerequisites—shared knowledge of children and parents and working relationships among providers—are harder to create and sustain if the boundaries of the enterprise, its people, and its providers keep shifting.

Coincidence with other relevant boundaries: To the extent that a potential area for developing a service system encompasses the boundaries of relevant public services and voluntary organizations, the investment of these institutions in joint planning and collaboration should be enhanced. If an organization’s service district is only partly encompassed within the boundaries of a newly defined reform initiative, its organizational interest will be only partly invested in what happens within this evolving enterprise. If an organization’s service area is split among several community planning and governance areas, its own service planning and provision may be fragmented. While it is unlikely that the boundaries of all relevant services will be encompassed within any proposed community boundaries, it may be possible to pay particular attention to those services or organizations considered critical for accomplishing immediate goals.

Recasting contracts between service providers and state agencies in such areas as child welfare, mental health, and developmental disabilities so that services are focused within geographic areas could enhance collaboration among service providers and support community-based services. Currently, contracting arrangements inhibit cooperation among agencies because agency staff are required to work over geographic areas too extensive to enable them to know or routinely interact with staff of many other service organizations. In addition, children are likely to be served in ways that disrupt community ties. Contracts could be written not to serve a total number of children as at present but to serve a defined geographic area. In this way agencies would share a vested interest in helping to generate and sustain other resources in the community that are needed by the children they serve, and would thus stimulate a natural interest in community-based service planning.

Existing governance entity: It may be advantageous for the boundaries of a potential service enterprise to contain an existing governance entity that is elected or created in a representative manner. It would be an added plus if this governing body had existing mechanisms for citizen input as well as experience in the administration or provision of primary or specialized services.
An area with a governance entity that has control of financial resources is also advantageous. For example, a village government could use a portion of its budget funds to stimulate interest in the development of a service infrastructure among providers, policy makers, and the broader public. Resources, such as staff or facilities of a local governing body, can also be useful as in-kind contributions to infrastructure development.

We believe that these are the central criteria to consider in defining geographic areas in which to create a common service enterprise. Having a child population sufficient to support an array of primary and specialized services is also likely to be a determining factor for establishing the boundaries of a service system. Which of the remaining factors should be weighted most heavily will depend on the primary aims for reform. If the first aim is to rally individuals and institutions to participate in community-wide planning and governance of a reconceived service system, a sense of affiliation may be paramount. Alternatively, if the initial aims are to engender links between primary and specialized service providers, encompassing the catchment areas of most existing providers may be a more important consideration.

The process of designating communities in which to develop a service infrastructure will differ depending on whether a set of reforms is to be uniformly instituted across an entire region or whether selected communities are to be identified for the purposes of demonstrating and testing these proposed ideas. In applying a set of criteria across a region there is likely to be considerable variation in the extent to which areas exhibit key characteristics. In a demonstration, there is more flexibility to draw geographic boundaries in order to maximize those criteria considered central to the reform effort or to look for existing community areas that demonstrate these characteristics. There are risks to this approach, however, in that boundaries of convenience may be drawn to exclude families in socially and economically marginal areas.

Leadership and dialogue within communities—Key criteria for demonstrations: A criterion that should weigh heavily in the selection of community boundaries for the purposes of a demonstration is where the source of leadership and energy for a demonstration comes from. Where the stimulus for reform originates and who is interested in these ideas, is generating momentum, and wants to grapple with bringing about reform are very important considerations in defining the community boundaries in which demonstrations should be tested. A number of alternative geographic areas may be effective boundaries for a demonstration provided that in each (1) there is dedicated leadership committed to the principles of working collaboratively at the local level and (2) this leadership has some base of authority from which to work.

In some circumstances, leadership may suggest community boundaries. For example, if leadership lodges in a mayor, with a group of citizens, or in a consortium of parishes, these leaders bring with them the boundaries of the geographic areas they represent. If the leadership for reform represents areas that fall short of criteria for defining community boundaries, some of these shortcomings can be addressed: a city can be subdivided for the purposes of creating local governance entities, or areas too small to create and sustain service planning and provision can amalgamate with adjacent partners.

Leadership can come from individuals or institutions within as well outside the territory in which a service enterprise will be developed. Leadership can come from a large variety of sources: government (the governor, the
mayor, a local elected politician), a private funding source (the United Way, local or national foundations), the service provider community (a consortium of interested providers), a group of interested citizens, or an individual (such as a religious or other community leader). Leadership can come from wherever authority and interest in children’s services exist.

An additional criterion important in selecting communities for demonstrating these reforms is the nature of the existing interchange among local organizations, service providers, and civic and elected leaders. The degree to which there is some history or evidence of civil discourse and cooperation among relevant individuals and institutions within a community is likely to suggest a framework in which to build the interaction that local planning and collaborative service provision require.

It is important to see how the ideas we have proposed play out in a variety of settings if we are to understand the power of these ideas to stimulate reform. There is an array of issues that needs to be understood: the obstacles and opportunities in creating and sustaining a comprehensive service infrastructure in communities of different sizes, types, and locales, and in settings in which leadership originates at the local level or is stimulated from outside; the threshold number of children and array of services needed to sustain the planning and provision of a responsive network of services; what community governance entities function well, what obstacles they encounter, and how to address them; and what outcomes for children, parents, providers, and communities are reasonable to expect. The aim of demonstrations in a variety of community settings is to use these initiatives as a group of natural experiments from which to learn what does and does not work well, for whom, and in what circumstances.

Impetus for Reform

There are many possible starting points for implementing the ideas we have outlined in this monograph; in a sense, almost as many starting points as there are communities that might adopt the ideas. A corollary to this reality is that there is no one right way for the process to begin in a local community. In one setting, it might start with two providers sitting down to talk with each other about how they might work more closely together. In another, it might start with an existing neighborhood organization, a coalition of youth service providers, a parents’ group, or a tenant advisory council in a housing project.

Who initiates efforts to implement the ideas we have presented, and why they do so, has ramifications for the whole reform process. If, for instance, a redirection and reorganization of services is initiated by a public or private institution outside a local community, there may be issues related to the community’s motivation to undertake such a reform, who the local agency or group should be that leads the process, and what the perceived need for these specific changes really is locally. When an external institution initiates the change process it will have to address the question of whether the community has to demonstrate some degree of coherence before receiving funds. If reform is initiated by local providers, whether on the primary or specialized side, there may be issues related to ownership by nonsponsoring providers, and opening up the process to nonproviders. Conversely, if reform is initiated by community members outside the service enterprise, there may be issues related to providers’ reasons for buying into the process.

One external impetus for local reform could be enabling legislation passed by the state legislature, typically with enough funds attached for some number of local
demonstrations. Another could be a local or national foundation initiating a demonstration program. Those designing enabling legislation or foundation initiatives face the challenge of striking a balance between specificity with respect to the kinds of changes envisioned in a local community and room for local control of the whole experience. For example, the legislative mandate and subsequent guidelines might require that those attempting reform incorporate certain principles and practices considered essential. Whether a state or foundation takes a demonstration approach or a state legislature passes legislation initiating recreation of children’s services, the approach should be enabling rather than defining, particularly during the early phases of development of a new service enterprise. There has to be adequate room for local initiative in agenda setting, definition of what the reform experience is about, patterns of participation, and procedures for getting from here to there.

It is possible that an opportunity to implement the ideas we have presented in this report will be linked to other efforts planned or underway. For example, providers within a local community may be required by new laws or regulations to provide such new functions as case management, or to work more closely across agencies to coordinate services. Or there may be a new mandate to serve certain children differently or to serve children not served before. New mandates can be viewed simply as additional demands placed upon an already overburdened service system or as an opening to a broader process. In other words, they can be viewed pessimistically or opportunistically—in the best sense of the latter word. Our ideas seem particularly well suited to the many states and localities currently interested in strengthening the role of "community-based" services in the overall service enterprise. Few of the current proposals for such reform consider the potential of primary services to serve as a vehicle for redefining what children’s services are all about.

When the impetus for change comes from within a local community, it may be more likely that such impetus arises in response to particular community problems, for example a growing concern with youth gangs, or a lack of day care or after-school programs, or a problem related to the schools. In such cases, feelings of ownership of the initiative will be less of an issue, but linking those feelings of ownership to some external set of ideas (such as ours) may be more of one. Linking local concerns and initiative to the proposals we have outlined may be a gradual, indirect process.

**Planning Processes and Their Implications**

By planning processes, we mean all the activities that lead to implementation of the ideas we propose in this report, and secondarily to the continuing activities necessary to refine and maintain implementation. Just as the impetus for reform can come from different sources, the process that occurs subsequent to that impetus can vary enormously. It can be self-initiated or stimulated by something outside the community. It can be self-directed or guided by a professional community development specialist or planner. It can be closely held or broadly participatory. It can be comprehensive or limited, time-bound or ongoing.

Planning processes usually involve a selected, appoint- ed, or self-appointed group that represents some set of interests among the many interests in a community. This group can include providers, consumers, community members, community leaders, elected officials, civic and religious leaders, and others. The group sometimes decides its own initial and continuing agenda, or it may have respon-
sibility for implementing a preexisting mandate. It can engage in activities as varied as inventoriong the services and identifying the service gaps in a community, deliberating about the objectives and purposes of services, serving as a forum for providers to get together and learn more about each other, or serving as an arena for solving specific service problems. It may or may not see its task as reforming the whole service enterprise.

In most cases, it will be helpful for the planning process to be viewed as an evolving one, capable of incorporating new elements, issues, and people. Purposes and boundaries established early on should serve as a foundation to build on, rather than as an immutable blueprint. For example, a planning effort might start with two institutions, say schools and libraries, meeting to see how they can work together more effectively. The discussion might stay at that level; or in the course of discussions it might become evident that other community institutions should be involved, say providers of after school programs, or a program that provides tutors for children needing extra help with school work. The views of parents might be sought. Suddenly the planning process is about something broader than coordination between two institutions.

The focus in our ideas on (1) specific kinds of changes in the boundaries and balance of social services and (2) a community-level orientation in bringing about change provides a kind of generic parameter for planning processes. For example, the community-level focus suggests that planners wrestle with the questions of what and who constitute the community, and how to consider different segments of the community in planning and reform processes. There is a certain amount of tension between these two objectives. At one level we argue that planning should encompass a key set of strategies, including, for example, extending the boundaries of services to include primary as well as specialized services and creating an information bank and the helping functions. At the same time we acknowledge that each community that took up our ideas should, indeed inevitably will, seek its own distinct expression of them. In order for a locally based initiative to work, the early processes and activities have to be devoted in part to encouraging a sense of local ownership. People tend to develop a sense of ownership when they feel they are making a formative contribution to an agenda or plan that is not yet fixed. There is a downside to developing community ownership, however, if each community develops an approach so distinctive that it cannot easily be coordinated with those of neighboring communities.

The composition and size of the planning group, like the purpose of planning, should also be viewed as evolutionary. Early on, it often makes sense for the planning process to be guided by a relatively small group, in the interest of being able to get organized and move ahead. The new initiative needs a solid base, and this often means building a tentative conceptual vision and political support among a like-minded group of people. At the same time, the initial planning group has to remain aware, to continue reminding itself, that it is representing only a small portion of the community. Both the vision and the political allegiance will be tested, sometimes sorely tested, as the initiative widens to include more segments of the community.

One of the first tasks of those planning to implement the ideas we have outlined in this report will be to relate these general ideas to the existing social service environment and to the lives of children and families living in the particular community. Relating the general ideas to community realities is the first step in creating a coherent vision of what local reform is going to be all about. The
planning group might develop a set of questions about children, families, and the service system as a starting point for its activities. Questions might include which children and parents have contact with which kinds of institutions, settings, and services currently; what roles different providers play in people's lives; and what resources, from what sources, are coming into the community. Some of the basic information gathering should illuminate the match (or mismatch) between the structure, funding, emphasis, and balance of existing local services on the one hand and what children and families say their needs and interests are on the other. All these threads then begin to lead to directions for change. Along with determining information to be collected, the planning group has to consider how it will gather information relevant to addressing some of these questions. (See our earlier discussion of community inventories for ideas about this.) The planning group also has to consider how and when it plans to pull different stakeholders and interests into the planning process. Not least, it has to define its own task, what it as a group is trying to accomplish.

Beyond its information collection and analysis functions, planning is a social and political process. One key purpose of planning in this regard is network building or, from a political perspective, coalition building. This means broadening the group of people who see themselves as being part of and invested in the initiative. A key issue here is broadening the group involved in initial planning who see that they, acting alone, do not have and cannot possibly acquire the resources to adequately address children's and families' needs, but that the combined resources available to the community and its providers come closer to being able to do so. In other words, people may have to be socialized into the awareness that the "power" and resources to reshape the community's response to children and parents are located in the interrelationships among people and institutions; they do not reside in any one person or group.

Leadership and Governance

It should be evident by this point that the implementation of our ideas would (1) lead to a new focus on the organization of services at the local level, (2) bring community members more fully into the service planning and governance processes, and (3) lead to new relationships among service providers. Both the process and the product of reform would have to be conceptualized and managed within the community, and this suggests some kinds of governance processes and perhaps a governance entity. We do not normally think of services for children and families as being governed by one entity, or as being governed at the community level. That is in part because of the fragmented and categorical nature of services, and in part because we do not think of most services, especially specialized services, as bounded or "owned" by the community in which they are located. We would argue that local governance can be thought of as a lens for refocusing people's view of services and for defining a framework for altered relationships, and then as the glue that will hold the redefined local service infrastructure together.

A Governance Entity

Each community will evolve a governance approach that reflects its unique context and situation. Nonetheless, in most situations, there will be a need to designate an existing organizational body or establish a new one that stakeholders inside and outside the community recognize as the governance entity, and that can serve as the locus of the
processes associated with the reforms underway locally. This entity:

- Needs some kind of institutional base
- Has to have some level of responsibility for (a) planning and service design, (b) setting priorities, (c) the deployment of funding, and (d) accountability within the reformed service enterprise
- Has to have the authority and capacity to fulfill these responsibilities
- Should be representative of (and reflect in its composition) the different segments of the community, and not be dominated by any one segment
- Needs a source or sources of legitimacy
- Needs channels and mechanisms for (a) communication with and feedback from the community, and (b) negotiation among different interests within the community (i.e., some sort of parliamentary procedure)
- Needs mechanisms for negotiating with stakeholders and institutions outside the boundaries of the reformed system of services

Developing a governance structure and roles, like other dimensions of the reform process, will often work best as a step-by-step process. Developing an elaborate structure too soon gets the organizational issue ahead of both the content and orientation of reforms and of the community’s readiness to buy into the whole process. Depending on the source of inspiration for a redefined local system of services for children, the governance structure and roles might be established in different ways. In a few states recently, such as California, new models of children’s services have been outlined in legislation creating locally based demonstration programs to test those new models. The enabling legislation for a demonstration outlines both governance and funding mechanisms. In many settings, governance structures and roles may be created by a local coalition responsible for moving a community toward a new system of services. In such cases, it will be important to pay attention to existing governance entities in the community—as sources of ideas and technical assistance, for support in pushing one’s agenda locally, and as representing interests that should have a role in governance of the redefined service enterprise.

**Institutional Base**

There are two basic choices, as well as variations within each, in locating a governance entity institutionally within a local community. Such an entity can be based in and supported by an existing community institution, whether a human service agency, a church, a neighborhood organization, or an existing neighborhood council of some sort. This has the advantage of existing institutional resources and capacities, and an already-organized constituency. At the same time it faces the task of pulling in other institutions and constituencies, and reassuring them that it is serving as an honest broker, that the initiative is their initiative. As an alternative, the governance entity can be created as a freestanding body. In that case, it is not burdened by its preexisting association with a defined perspective or constituency. It nonetheless faces a different kind of credibility-building challenge, this one in relation to the existing institutional environment. An initiative can also start out based in or tied to an existing institution or group, and later separate itself and become freestanding. The governing entity can also become incorporated or remain unincorporated. This last choice depends to some extent on whether it will want to control and manage funding.
*Tasks and Responsibilities*

The mandate and scope of responsibilities of a governing entity depend on a number of factors: for example, the composition of the governance group (see below), which agencies and organizations are participating in a local initiative, where its authority derives from, and what kinds of funds it has some control over. Nonetheless, there are four basic responsibilities that would be logical in most circumstances. These are initial and ongoing planning (as described earlier), setting priorities with respect to the focus of local reform efforts, serving as the forum for agencies' efforts to develop collaborative working relationships and implement new plans, and monitoring the progress of the reform effort and its effects on children, families, providers, and the community as a whole. The extent of actual management responsibility would depend on capacity, resources, and the nature of the duties that accrue to the governance entity. It is possible that the governance entity would want to hire one or more professionals in "executive" and other staff positions to manage all the processes identified above, and to provide ongoing attention to a new initiative. This might be especially appropriate in cases in which a governing entity is responsible for managing the funds that are available to a reform effort, or perhaps even the overall funding of the newly constituted service system itself.

One issue likely to come up in poor communities is the extent to which the governing entity gets involved in general neighborhood improvement activities not immediately related to the organization and provision of services. There will obviously be more case advocacy if the new helping functions outlined earlier in this report are enacted. Case advocacy often highlights systemic issues and problems in the basic living conditions of children and parents that then seem to compel class-level attention.

*Composition, Selection Procedures, and Roles in a Governance Entity*

The composition of the governance entity, the procedures for selecting "governors," and the roles played by different participants are central issues in the governance of a service reform initiative. Decisions in these related domains determine who will control the priorities, agenda, and course of the initiative, what groups and constituencies the community is seen as being made up of, and how these groups will be represented. For example, composition of a governance entity could be determined by geography (each block or other geographic unit being represented), by role (e.g. parent, provider, civic or religious leader), by group (ethnic, religious, etc.), or by a combination of these. A community could be seen as having a great many segments and interests, or just a few, depending on how one "slices" it.

Some "governors" could be elected or appointed to represent special interests, others the whole community. One could imagine setting criteria for providers on the governing board—for example, that any provider represented on the governing board has to have demonstrated a community focus in its services. At the same time it would be unrealistic and impossible to keep certain institutions, such as the schools, away from the table. If the governing body includes people with little experience with governance, they will need some kind of training (perhaps like the training that has emerged to help members of the Local School Councils in Chicago). Providers, individual citizens, community leaders, and others can each play a variety of roles, ranging from decision making to advising to simply being informed.

The nature and extent of community resident participation in governance bears special weight and consideration. The role of neighborhood residents in governing
reform efforts has been a central preoccupation of reformers for decades, and there is now a great deal of experience to draw on in considering different approaches to this issue. A number of assumptions have guided efforts to structure the involvement of neighborhood residents in governance. For example, one is that participation is inherently good for the reform itself, and especially for the participant. A second, questionable assumption is that most community residents do not have the wisdom or experience to govern service reform, and therefore should work alongside professionals in this process. Experience shows that it is important for community residents to have a share of actual decision-making authority, not just the opportunity to offer advice, often after key decisions have been made. Arguments about community residents’ lack of capacity to make good decisions on behalf of the community often are just a way of attempting to keep control of an initiative in the hands of those who already have substantial power.

A critical objective of establishing broad representation on a governing entity is to build a sense of local ownership in an initiative. People are less likely to feel a sense of ownership in something in which they have little or no voice.

In general, no one segment of the community should dominate the governing body. The beliefs and interests of providers, children and parents, religious and civic leaders, elected officials, the business community, and so on, should all be represented. Of course, none of these segments is itself monolithic; not all children and parents have the same beliefs and interests, nor do all providers, or all the members of other groups. “Youth” should have representation in a governing body, not just because they are “consumers,” but because they, like other residents, have a responsibility to maintain their community.

With respect to continuity of governance, the group responsible for initiating reform may not be the same as the group that eventually governs an initiative. Change agents do not necessarily make the best ongoing leaders. Moreover, it is important to broaden the base of the initiative over time. Defining “representative” has to be a negotiated task. This suggests that the core group involved in reform reach beyond its membership in considering this issue. The initiating group’s view of what makes up the community and where direction for reform should come from will likely determine how representation in the governing entity gets delineated.

Legitimacy

Legitimacy involves two related issues: first, establishing the right of the governing entity to plan, make decisions, represent the community’s various interests, and so forth; second, being viewed by different segments of the community as the best place to accomplish these tasks. Legitimacy is both formally established and earned. It can be established by such means as elections, legislation, appointment and delegation of responsibility by those already having authority and legitimacy, and through personal involvement of those with authority or credibility in the community. For example, if the governing body is made up partly of those with an acknowledged long-standing commitment to the community’s children, they bring “legitimacy” with them. Representatives of important institutions bring a certain kind of legitimacy also, albeit a somewhat narrower kind.

In its most important sense, legitimacy is not something that can be proclaimed. Those involved with a new initiative should expect that it will take a few years for that initiative, and the ideas underlying it, to earn the trust and
understanding of the community. The key will be to cultivate some common ground, and keep expanding that common ground. At first, the common ground may be primarily a forum for different community interests to get together and talk. At that level, the whole enterprise is still about negotiation among special interests. At some point, those doing the talking have to be able to stop feeling required to represent some set of interests, and simply bring "themselves" to the forum. This is the first step in a process that should point toward an identification with the whole community in all its heterogeneity. The same process occurs in the field as different providers learn to work together more and more deeply, genuinely sharing responsibility, rather than engaging in a proceduralized dance that is about limiting one's responsibility while maximizing one's discretion. In a general way, the activities of the governing entity contribute to building a sense of community. The governance entity becomes the embodiment of the abstract idea of the community's shared interests, as opposed to the interests of particular segments of the community. Paradoxically, while the governing entity is made up of the various interests within a community and its service system, it also represents the community as a whole in negotiating and working with specific interests. In their role as part of a governance entity, particular interests are forced to try to consider the interests of the overall community.

Boundaries

A central question in working out the governance of a redefined service enterprise is who and what will be governed, and by implication who and what will not be governed. Are just service-related issues to be governed, or are the community's concerns as a whole to be taken into account, including, for example, housing, safety, and economic development? With respect to services, what mandates and purposes, what people, institutions, actual services and programs, and, of course, what funds will fall within the purview of the governing body? For instance, if a local family resource center wants to start a new program for teen parents, does it have to work through the governing body and the governance mechanisms? Will the governing entity manage or supervise direct service providers? If not, what will be its relationship to them? Will some family-oriented programs that are not primarily children's services be part of the new system? Is one task of governance, and therefore the governance entity, to monitor the well-being of children in the community? Will the governance entity manage the people serving in the new helping functions?

It is likely that in different communities the scope and agency participation requirements of the redefined enterprise will be defined differently, and therefore the corollary governance issues will differ. In one community, an expanded conception of the whole local service enterprise may be the underpinning for reforms, while in another it may be a specific service-related issue in another community. In one community, participation may be voluntary, in another, mandatory, depending on the impetus for the new enterprise, the role of state and local government, perhaps strategic considerations, and so forth. The members of the governing body, especially providers, civic leaders, and representatives of elected officials, surely will have something to say about the mandate of the initiative, and therefore those governing it.

Mechanisms for Handling Issues Involving Stakeholders and Institutions Outside the Local Community

In many cases there may not be a larger process of organizational and finance reform surrounding the development and governance of a redefined local service system. Those
involved in creating a new system are thus likely to have to deal with a variety of institutions, including state and local government, about resources, waivers, subsidies, legal mandates, and the like. External institutions in turn will want to be assured that there is some local body that is accountable for the ways in which resources are used, that can provide assurance that children’s and families’ due process and other legal rights are protected, and that can negotiate waivers and the like. In a different vein, people who live in one community often use resources in other communities. Thus there will also have to be negotiation with institutions in other communities regarding children from the affected area who use services in those other communities, and conversely children from those communities who use services in the community being reformed. If a local provider, whether primary or specialized, is going to provide his or her services differently, and some of those services are used by children who live outside the community, what voice do those children’s parents and communities have in this decision? If the “reformed” community is going to use its resources differently, might this affect a family’s ability to choose a specialized service located outside the community for a child with specialized needs?

It is thus likely that the governance entity will be the primary negotiator on behalf of the community in dealing with external institutions and other geographic jurisdictions around resource and regulatory issues, and also around the rights of community children to access specific services and resources outside the community. It may also have to act as stand-in for the state in ensuring constitutional and administrative protection to children and families.

If the state contributes resources toward local efforts to serve mandated populations, including handicapped, delinquent, and abused and neglected children, its role is likely to involve standard setting and monitoring to ensure equitable access to services and adequate standards of care across communities. The state could facilitate service planning and access to services across communities by aiding in the development of local information banks with data systems that enable local planners, providers, and citizens to access information in surrounding communities and that, across communities, enable local and state government to identify relative need in the allocation of public funds and to plan for the provision of low-incidence services.

There are a number of additional steps local and state governments can take to facilitate the ability of communities to plan for and deliver better integrated and more responsive services. Relevant public agencies (child welfare, juvenile justice, public health, mental health, and developmental disabilities among them) can agree to target their resources to communities in which child and parent needs are greatest and can loosen the categorical restrictions on access to their respective funds. Government agencies can work toward integrating the eligibility process through which individual children and parents apply for access to public programs, and they can simplify the process providers use to contract with multiple public agencies for funding. At the same time, public agencies can integrate the monitoring and auditing process, so that if providers are dealing with a family about alleged abuse or neglect, using child welfare money and providing counseling with mental health funds, there is an acknowledgement that this is the same family and that tracking progress for that family is the same across the public agencies whose funds and services are involved.
Sources of Funding for Elements of a Redefined Service Enterprise

While a redefined service enterprise may be stimulated by private or public funds, much of the funding for ongoing activities within this enterprise will have to be public, if this system is to remain viable. When one looks at all the funds spent in a community on both primary and specialized services, even in a resource-scarce context, it is clear that there are substantial resources potentially available to support the ideas we have proposed. The bulk of current funds, however, are categorical, and implementing our ideas necessitates shifting some of these funds to non-categorical services and activities. Innovative funding strategies have begun to emerge in different states and localities that illustrate possible options for locally based reform. They include:

- Joint funding of particular local initiatives across systemic and agency lines; for example, mingling public education and United Way funds to provide private-agency-managed afterschool programs in local elementary schools
- Delegating authority over use of state funds to local authorities (through incremental decategorization, waivers, etc.)
- Frontline service financing through use of flexible dollars; that is, giving frontline workers access to funds to purchase services for families (Sar Levitan and colleagues have even proposed something equivalent to a voucher system, giving families an account that can used to purchase services.)
- Using federal entitlement program funds (e.g., EPSDT, Title XX, Community Development Block Grants) in expanded ways
- Reconfiguring categorical funding streams into functional funding streams; for example, information and referral, case management, child care, and youth work

Regardless of what strategy a local community uses to free up resources for a reconfigured local service system, it is critical that the adequacy of the overall funding base for children’s services be addressed. Redeploying resources is not a substitute for adequate funding. Indeed, it will be much more difficult to implement the ideas we have discussed in the atmosphere of fiscal crisis that prevails in too many communities today. The point of our ideas is to build community and societal commitment to supporting children, not simply to reshuffle already inadequate public resources and call it reform.

Governance and Funding

Complementing the question of how a reformed system of services is funded—that is, where the funds will come from, and what part of all funding for children’s services they will constitute—is the question of who will control the deployment of funds. For example, it is possible to conceive of the governing body of the reformed system controlling all the funds (at least all the public funds), some of the funds, or even none of the funds for services in a particular community. Funds sometimes chase children or sometimes go to district offices for use as they see fit. Under one scenario, all the state agencies serving a community might give the funds that would have gone to serve resident children and parents or flowed through their local district office to the new governing body. This body might or might not channel that money back to the district office. Under a different scenario, the funds would still go to the district office, but contingent on evidence of its participation in the new system of services.
Obstacles and Challenges

Existing institutions and institutional practices tend to reflect the past, and are usually geared toward maintenance. While we believe that the ideas proposed here offer substantial potential to make services more responsive to children and their families, they also pose a number of conceptual and practical challenges. One general challenge will be to shift institutional attention from day-to-day survival and maintenance toward a more “future” orientation. It may not be easy for existing institutions, on both the primary and specialized sides of the service equation, to imagine themselves relating to each other differently and to conceive of their roles in the larger scheme of things differently, in their particular community contexts. The planning function, especially, will require a focus on what the future will and might be like, and the ability to imagine the future as being somewhat different from the past and present.

The flip side of shifting people’s focus toward constructing a future is pausing to make sense of the past, particularly the history of past reform efforts. Too often, reform is undertaken as if starting with a fresh slate, unconstrained by deeply rooted institutional and community dynamics. Most social institutions and communities have at least some history of reform efforts, and this history has to be accounted for in current plans. Indeed, this history can be a very helpful guide to possible obstacles and challenges, as well as likely sources of support, for those involved in a new reform effort. Ignoring history often means ignoring some of the most important issues in institutional and community life.

Too often reform is imposed on communities, agencies, and frontline providers from the outside. Nobody asks those most affected what the key issues are, how reform might be undertaken, or what some of the expectable obstacles are. In other words, there is not enough of what Richard Elmore has called “backward mapping,” starting with what is currently happening between families and providers, asking what is shaping that, and then what is shaping that, up the line. While the planning and governance dimensions of our proposals address this issue to some extent, it will be critical to overcome the temptation to assume the problem being addressed by a reform effort is understood, rather than trying to figure out what the problem is.

It is possible that the ideas we have proposed here will not seem relevant to the problems identified in a particular community’s planning processes. In such cases, it will essentially have to be a judgment call as to whether it makes sense to try to combine different agendas. For example, it is possible that improving basic living conditions and reforming child and family services should be viewed as complementary aspects of one larger community improvement agenda. Whether the two are combined or not may be primarily a function of the interests and capacities of the lead reform groups or agencies.

Another common challenge to reform is to maintain the holistic quality of the intent and the ideas involved. There is a tendency for large, coherent reform ideas to be “bureaucratized,” and transformed into the limited concerns of separate constituencies. They can also become fragmented by the very fragmented quality of our current institutional and social life. This problem should not be confused with the inherently iterative, trial-and-error nature of the reform process itself. In such a process, one still maintains a focus on where one wants to get to, in the larger sense. Nonetheless, because reform often is most successful when it is opportunistic and builds on established community interests, proponents have to find a balance:
making sure that their central ideas do not get lost, and at the same time being responsive and flexible in the pursuit of those ideas.

There are a number of challenges related to our focus on the local community as the place to rethink and redo services. We noted earlier that establishing the boundaries of the community will be an issue, not least because each person or institution at the table will be working from different boundaries. Almost any choice will seem overly inclusive to some and overly exclusive to others, and perhaps nonsensical to still others. One way to deal with the inherent arbitrariness of this decision is to make the initial definition of what constitutes the community an interim definition, subject to modification based on experience with the new initiative. Related to the question of boundaries is the question of how to construct the "community" out of its constituent elements. There is no such thing as an overarching institution or group in a community, one that can be said to symbolize the whole community. Each represents some interest or constituency or segment of the community. The challenge is to make the governance of a local initiative more than simply a negotiation among those representing various segments of a community for a piece of a reconfigured service pie, to make the idea of a common enterprise more real than rhetorical. Those involved have to give up at least part of their autonomy in the service of building something new.

Communities already have a variety of governance and decision-making mechanisms, both formal and informal. Existing institutions are often in the process of trying to renew and improve themselves. Existing providers are embedded in institutions and service systems that shape their behavior in critical ways. The ideas we have proposed may find themselves in competition with other visions of service reform. In other words, participants in the governance process and actual service reforms we have proposed may also be participating in other processes that draw their allegiance. Those who would work for the reforms we have described here have to attend to, and relate themselves to, other community-level governance and service renewal processes, without becoming co-opted by them.

**Inner-City Communities as Contexts for Our Ideas: Unique Challenges**

A neighborhood or local community focus on service renewal and reform poses special challenges for low-income neighborhoods. Many such neighborhoods are already isolated from others around them. Bounding and defining an isolated and neglected community can isolate it even more. Other neighborhoods' sense of responsibility for a low-income neighborhood, and their willingness to share resources on behalf of children, can diminish further in the face of an initiative that highlights localized responsibility and local effort. It may be that in the most depleted low-income neighborhoods an important focus of efforts should be on deliberately strengthening links to organizations based outside the community in the interest of connecting these external resources to those that exist in the community. Indeed, without such linkages, it is likely that efforts to expand the role of primary services in low-income communities may primarily serve to increase the enormous stress already afflicting such services.

Especially in low-income communities, but increasingly in all kinds of communities, involving parents in governance and other aspects of local reform is likely to be a significant challenge. Many parents have withdrawn from community life, even when it comes to activities critical to their children. Yet, parents have an important role in mak-
ing many of the ideas we have proposed here viable. If the reforms we have discussed—particularly those relating to local planning and governance of services—remain in the hands of providers, then it will be very difficult to bring about basic community-level changes in concern for children and families. Providers, especially those who are part of large bureaucratic systems, will only be encouraged to be more responsive to community needs and preferences if parents and other community members demonstrate through their involvement that they want a role in service priority setting and governance.

While each community presents different challenges to the implementation of our ideas, the challenges in inner-city communities are likely to be qualitatively greater. Historically, primary services have been a key part of the “developmental infrastructure” of inner-city communities. But, today, institutional sources of nurturing, supervision, and socialization for children are thinning out in the inner city.

We have talked earlier about the compatibility and importance for depleted communities of linking reforms in social services with reforms aimed at rebuilding a community’s physical and economic infrastructure. The challenge of reinvesting in and building a base of primary services in inner-city communities is likely to be substantial in itself. The financial health, the quality of program operations, and in many cases the survival of child- and youth-serving agencies in the inner city have become increasingly tenuous. The many reasons for this include increasingly tight budgets and the growing difficulty of finding qualified staff at the salary levels offered in youth-serving agencies. The primary problem, though, is the inherent difficulty of sustaining a healthy institution in an environment that tends to drain and undermine institutions of any sort.

At the same time that primary service institutions are under mounting pressure, the need for them in the inner city is growing. The attributes that characterize good primary services—caring, available adults; safe and predictable environments; developmentally oriented activities; simple fun; the opportunity to test and explore ideas, feelings, and identities—take on added importance in contexts in which children are getting too few of these things elsewhere. At the same time, the pressures associated with trying to “be there” in fundamental ways for so many children can be overwhelming, even when resources are not inadequate.

Special requirements and characteristics of reform efforts in inner-city communities include:

- Sensitivity to the effects of extreme resource scarcity for a planning process, which may be viewed primarily as an arena for competition for scarce resources. It is also possible that an inner-city community may have been through prior planning processes that failed to lead to new resources, resulting in heightened skepticism about planning processes themselves.

- A greater need than in other communities to build primary services, including strengthening the semi-formal opportunities and grassroots organizations that may exist and identifying significant financial resources and technical assistance to support new program development.

- A potentially greater focus on offering services that couple primary and specialized service provision in single settings, given the needs of children and parents to both build capacities and respond to often complex, multiple problems.

- Special efforts to involve institutions outside the community in supporting local reform. These insti-
tutions include government and philanthropic human service providers.

- Attention to the full range of families’ support needs, how these are being addressed, and which are most relevant to address in a reform effort. It is likely to be particularly important to include leadership training to engage citizens in planning where it occurs and to couple outreach efforts in the provision of information and the delivery of the helping functions designed to make services work for children and parents.

While the challenge of implementing these reforms will be great, and potentially greatest in depleted communities, we believe that it is a challenge worth meeting. The efforts to implement the ideas we have proposed in Chicago should provide insights and learning about whether and how the challenge can be met. What is critical, we think, is that communities, funders, government, and others adopt an exploratory and experimental spirit, using our ideas as a starting point and conceptual framework.

**Understanding the Difference These Reforms Can Make**

It will be important to chronicle the testing of these reforms. We believe that drawing the lessons from community-focused reforms presents challenges that require a new model of evaluation, one consonant with the objectives of the reforms being tested. At the core of this approach is the requirement that evaluators work through and with communities, seeing their role as including building the communities’ capacity to document their own progress and to learn from implementation along the way.

There are a series of substantive and methodological difficulties associated with the evaluation of community-level reforms. A central issue in building a community-reform evaluation methodology is the need to define outcomes. For example, outcomes can be seen variously as improving the delivery of services, as enhancing child development and family functioning, as mobilizing citizen investment and leadership, or as improving the quality of life in communities. Whether these or other potential outcomes are competitive or complementary and who among those engaged in reform should have a say—or the final say-so—in selecting among competing outcomes are issues that need to be explored. What role should the originators of reform proposals, funders, community participants, grant recipients, or evaluators have in defining reform outcomes and whose views should prevail in selecting outcomes for which a reform is to be held accountable?

Once outcomes have been clarified, an equally important issue is defining the measures that reflect progress toward meeting these outcomes, for example, measures that reflect evolution in the development of local leadership or the evolution of a collaborative community decision-making capacity. We risk inappropriately declaring community-focused reforms a failure because we lack clarity about their outcomes and an inability to track intermediate markers of progress in reaching them.

Community-focused reforms by their nature change over time, and in some aspects of these reforms the process is an intended intermediate outcome. Creating a collaborative decision-making entity within communities and developing the capacity of a variety of kinds of service providers to work jointly in the provision of services are illustrative of processes that are intended intermediate outcomes in their own right.

These reforms work across systems that have their own outcomes of interest and often their own approach to evalu-
ation. For example, providers and evaluators interested in economic revitalization, physical development, or social service reform each have a distinct set of outcomes of interest and separate effects they are interested in documenting. In reforms aimed at forging a single system from the separate primary and specialized service sectors, an equally complex challenge is the absence of recognized outcomes and of an existing approach for evaluating the effects of primary service programs.

Developing an effective evaluation methodology will require addressing the difficulties of defining "the intervention," given often wide variations among sites within the same reform initiative. Moreover, the success of these initiatives will depend to a large degree on the context of individual communities and on what occurs within them independent of the initiative, for example, on the preexisting nature and extent of cooperation among organizations within a community and on other resources that may or may not exist or come into the community—that is, on events and circumstances that are less controllable than traditional social science variables.

In documenting community-focused reforms, it is important to begin by recording the evolution of efforts in individual communities. Through process evaluations, it is possible to understand the obstacles and opportunities confronted by demonstrations, to identify the nature of these efforts and what "the intervention" is in particular communities. A process evaluation can help clarify the reform objectives in a given community, aid in developing the baseline data and eventual outcome measures for documenting change, and lay the groundwork for understanding how changes brought about actually occur. Process evaluations also provide vehicles for refining and adapting the ideas and approaches on which these reforms are based. Beyond process evaluations, it will be important to address the substantive and methodological issues inherent in developing an approach for evaluating the outcomes of community-level reforms.
Conclusion

We have presented three ideas for the reform of social services: enhancing the role and presence of primary services, redefining social services to include primary as well as specialized services, and focusing on communities as the arena in which services can function as a common enterprise. Taken together these proposals embody a fundamental reorientation of our current conception and provision of child and family services.

Compared to current efforts at service reform, the vision we have advanced has both important commonalities and distinctions. The major distinction is not one of fundamental purpose: we share with other proposed reforms the intent of improving both the prospects and outcomes for children and families. The major distinction is in the territory our reform encompasses. Most proposed social service reforms and their associated demonstrations restrict reforms to the sphere of specialized, problem-oriented interventions now defined as social services. We have expanded the arena in two ways. First, we have advanced a redefinition of social services to include promotionally oriented primary services as a broadly available resource for all children and parents designed to enhance child and family development and to provide natural sources of help for problems as they emerge. Second, we have located the effort to create responsive social services in communities as a way to combine primary and specialized services into an infrastructure of support for children and families and to shift the center of service planning and service response toward the territory in which children and parents live and to which they naturally turn for sources of enrichment, support, and problem-solving.

Beyond this primary distinction, the ideas we are proposing differ in important ways from some of the recent shared by current proposals for service reform while often sharing surface similarities with them. Many current reform proposals, for example, encompass a shift in focus toward prevention. While a preventive focus moves away from the current service philosophy's focus on solving problems that are chronic or severe, it maintains a deficit orientation: the prevention of problems. In contrast, we are proposing a fundamental shift in policy and practice to encompass services designed to promote the development of children and the functioning of families.

A second characteristic shared by many proposed reforms is an emphasis on the need for comprehensive services. We propose broadening the definition of social services to include primary as well as specialized services, and in this sense our conception of services can be seen as redefining what "comprehensive" means. An important distinction, however, is that the notion of comprehensive services encompassed in other proposed social service reforms remains within the sphere of specialized, problem-oriented interventions.

Many reform proposals are animated by the importance of collaboration among service providers. In many of these proposals, the purpose of collaboration is cited as a way to better serve poor, isolated families, and families with multiple, complex problems. We are advancing collaboration as a way to enhance the quality, coherence, and responsiveness of primary and specialized services for all children and parents who use them, including children and parents with multiple, complex needs.

Numerous proposals for service reform focus on communities as an arena in which local norms, values, and preferences can be made known in ways that inform the design and delivery of services. We concur, but propose a focus on communities because of the potential for an
important additional benefit: that the provision of services focused in communities and the process of local service planning and delivery holds the potential for community building. We believe our ideas can help to create communities that have redefined the nature and limits of their responsibilities to children and parents, engaging both individuals and institutions in the process of building caring communities. Caring communities, and the policies that lead to them, can both support the healthy development of children and the functioning of families and respond to problems as they occur.

Given the challenges facing our children, our communities, and our country, we hope that the alternative we are advancing will be considered and tested along with other reform proposals. Our aim is to join in informing the debate about social services and service reform in the hope that the courses ultimately chosen will better serve our children—and us—for the decades to come.
Notes


3. Just over 26 percent of children under 18 were members of a minority group in 1980. (U.S. Bureau of the Census, *Census of the Population: 1980 General Population Characteristics*, Part 1, United States Summary, U.S. Government Printing Office, Washington, D.C., Table 49, pp. 1-52.) Conservative projections predict that by 2010, over 36 percent of all children will be black, Hispanic, or members of another minority group. A less conservative, but potentially more accurate projection places this figure at over 40 percent of all children. (Members of another minority group include American Indian, Aleut, Asian and Pacific Islander (Japanese, Chinese, Vietnamese, etc.) and members of other groups (Cambodian, Laotian, Fiji Islander, etc.). Hispanics can be members of any racial group, but in these figures minorities are defined as all groups other than non-Hispanic whites. (U.S. Bureau of the Census, *Current Population Reports*, Series P-25, No. 995, *Projections of the Hispanic Population: 1983 to 2080*. U.S. Government Printing Office, Washington, D.C., 1986, Table T, p. 14, and personal communications with demographers at the U.S. Bureau of the Census.)

4. In 1950, there were 16 workers contributing to the Social Security system for every retiree drawing a Social Security pension; in 1990 the ratio dropped to 3 to 1. By 2020 there are expected to be just over 2 workers supporting each retired adult receiving Social Security. (National Commission on Children, *Beyond Rhetoric: A New American Agenda for Children and Families*, 1991, p. 17.)

5. Since 1972, more than 1 million children each year have seen their parents divorce, a threefold increase since 1950 (Bianchi, Suzanne M., “America’s Children: Mixed Prospects,” *Population Bulletin*, vol. 45, no. 1, Washington, D.C. Population Reference Bureau, Inc., June 1990, p. 9.) One out of every two marriages is expected to end in divorce. (Cherlin, Andrew J., “The Weakening Link Between Marriage and the Care of Children,” *Family Planning Perspectives*, vol. 20, no. 6, 1988, p. 303.) The failure rate for second marriages is even higher (60 percent) (Rosewater, p. 5.)


either full or part time or actively looking for work. This figure does not include children who are in families headed by men only. In 1991, approximately 3 percent of children living in families were in families headed by a single male parent.

Between 1970 and 1990, the proportion of mothers with children under 6 who were working or looking for work almost doubled (from 32 percent to 58 percent). The majority of mothers with very young children now work. (National Commission on Children, p. 21.)


8. Children born in 1910 had about 5 brothers and sisters, 20 aunts and uncles, and 40 cousins. Children born in the 1970s have about 2 siblings, 8 to 12 aunts and uncles, and about 16 cousins. (Banc, Mary Jo, Here to Stay: American Families in the Twentieth Century. New York: Basic Books, 1976, p. 52.) Their counterparts born in the 1980s are likely to have only one brother or sister and proportionally fewer extended family members. (Pooley, Lynne, and Julia H. Littell, Family Resource Program Builder, Chicago: Family Resource Coalition, 1986, p. 16.) Although it can be argued that smaller nuclear families enable parents to commit greater time and material resources to each child, consideration of family size alone does not factor in the effects of other demands on parental time and emotional resources such as maternal employment.

9. At present, roughly 19 percent of all children move each year. Children between the ages of 1 and 4 are more likely to move than older children; over 23 percent of children between 1 and 4 move each year (U.S. Bureau of the Census, Geographical Mobility: March 1990 to March 1991, Series P-20, No. 463, April 1992, p. XIV).


Hornbeck, David W. 1990. Outcomes as a tool to probe and change. Paper prepared at the Workshop on Effective Services for Young Children, a project of the National Forum on the Future of Children and Families.


Littell, Julia, and Joan Wynn. 1989. The availability and use of community resources for young adolescents in an inner-city and a suburban community. *Chicago: Chapin Hall Center for Children at the University of Chicago.*


Stagner, Matthew, and Harold Richman. 1986. *Help-seeking and the use of social service providers by welfare families in Chicago.* Chicago: Chapin Hall Center for Children at the University of Chicago.


Chapin Hall Center for Children at the University of Chicago is an independent research and development center dedicated to the study of issues affecting children. Chapin Hall focuses its efforts on monitoring the condition of children, facilitating the improved delivery of services to children in need, and seeking ways to foster the development of all children. The contexts in which children are supported—primarily their families and communities—are areas of particular interest.