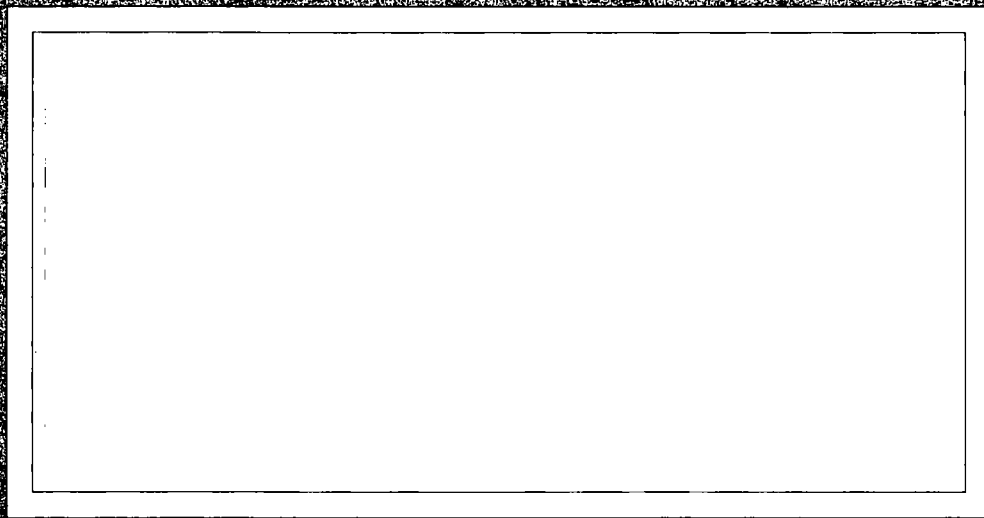


Carnegie Meeting Papers



CARNEGIE CORPORATION OF NEW YORK
300 Madison Avenue, New York, N.Y. 10017

FAMILY SUPPORT AND PARENT EDUCATION: OPPORTUNITIES FOR SCALING UP

By Rima Shore

**Report of a Meeting Convened
by Carnegie Corporation of New York
November 16-17, 1994**

From time to time Carnegie Corporation supports meetings on issues of importance that may or may not be closely related to its grant programs. Occasionally, reports of these meetings merit public dissemination.

CONTENTS

FOREWORD	<i>i</i>
INTRODUCTION	1
PART I. THE STATE OF THE ART	2
THE PROBLEM: A PATTERN OF NEGLECT	2
Meeting the Needs of Preschool Children	3
Concerns of Parents	4
Research on the Status of Children and Families	5
THE SOLUTION: BUILDING PARENTAL COMPETENCE	6
Local Efforts	6
State-sponsored Efforts	6
Federal Efforts	6
Types of Family Support Programs	7
Examples of Family Support Programs	9
IMPACT OF FAMILY SUPPORT AND PARENT EDUCATION: THE EVIDENCE ..	11
THE CHALLENGE: MOVING FROM PROGRAMMATIC TO SYSTEMIC EFFORTS	12
PART II. LESSONS LEARNED	14
THE MAJOR SERVICE SECTORS	14
Child Care	14
School-based Programs	15
Welfare	17
Health	17
Criminal Justice	18
MAINSTREAM INSTITUTIONS	19
Faith Institutions	19
Business	21
The Media	22
GOVERNMENT	23
Federal Government	23
State Governments	24
Local Governments	25

PART III. GOING TO SCALE	27
DEFINING "SCALING UP"	27
CREATING SYSTEMS OF SERVICES	28
SCALING UP PARTICIPATION	28
SCALING UP EVALUATION	29
LESSONS LEARNED FROM CURRENT EFFORTS	30
FOCUS ON QUALITY	31
ENDNOTES	33
REFERENCES	36
APPENDIX A: Agenda	
APPENDIX B: List of Participants	

FOREWORD

Parenthood is a very big job — a huge investment of time, energy, and sustained attention to childraising; and a great learning experience. But the process is far from simple — and now it is more complicated than ever.

In the United States, the structure and function of families have undergone profound changes in just the past thirty years. Some of these changes represent new opportunities and tangible benefits. Others place the well-being of children in such jeopardy as to pose a problem for the entire society. One striking change from the perspective of child development is the widespread entry of mothers of preschool and school-age children into the paid workforce — now reaching about 60 percent. Another change is the growth of teenage parenthood. Although the birthrate for adolescents has leveled off, each year teenagers give birth to nearly half a million babies. Yet another drastic change is the large number of children growing up with only one parent; indeed, most American children today spend at least part of their childhood in a single-parent family.

By and large, young people moving toward parenthood today are far less experienced in the care of children than were their grandparents; they spend less time with their children than previously; and a majority of parents report they are less willing than were their parents to make key sacrifices for the next generation.

However much the American family has been transformed in the latter twentieth century, it is still the fundamental unit responsible for the health, education, and general well-being of children. Whatever has happened to it, the family is still the central organizing principle of the society. But families do not function in isolation. To be successful, they need an appropriate social environment — one that provides supportive social networks, a firm sense of community, mutual aid, and a feeling of belonging.

In view of the drastic family dislocations of recent decades, the traditional sources of family support have been seriously weakened. Increasingly, other institutions and organizations of society are stepping in with programs to help prepare young people for responsible parenthood, build parental competence, and strengthen the family through new supportive systems. The potential of these programs to fill in the gaps and help meet the basic needs of families and children is enormous. But they must become more widely available.

In November 1994, Carnegie Corporation drew together a group of experienced professionals in the domains of parent education and family support to review the experience of programs offered by schools, health care institutions, faith organizations, the private sector, nonprofit organizations, and government to strengthen parents' ability to care for themselves and their children and to consider the requirements for "scaling up."

We are most grateful for the participation of these experts over two days of intensive discussion. We further thank Rima Shore for preparing this extremely fine report synthesizing

the proceedings and the relevant literature, and Michael Levine, program officer in the Corporation's Children and Youth program, for overseeing the development of the report. Kathryn Taaffe Young, senior program officer at Commonwealth Fund, played an important role in organizing the conference. It is our hope that the report will stimulate serious thought and practical action on ways to bring parent education and family support to all who need it.

David A. Hamburg, President
Carnegie Corporation of New York

FAMILY SUPPORT AND PARENT EDUCATION: OPPORTUNITIES FOR SCALING UP

By Rima Shore

Report of a Meeting Convened
by Carnegie Corporation of New York
November 16-17, 1994

Most Americans live and raise children in family units. In fact, the United States population encompasses more than 67 million families with children under the age of eighteen.¹ To be sure, these families vary in structure, size, and self-description. But to a great extent people in every sector of American society are recognizing that the conditions and experiences that most directly affect children's lives are embedded in the contexts of families. Decision makers are acknowledging that if their policies are to address the urgent needs of children, families must be systematically supported.²

Today, some of the resources traditionally available to young families — the kind of help and skills shared among large extended families and close-knit communities — are no longer within the reach of many Americans. A wide range of institutions and agencies, private and public, have been working to fill the void. They now offer an array of services and interventions designed to strengthen families and to impart the knowledge and skills that can help parents fulfill their role with greater confidence and competence.

On November 16-17, 1994, Carnegie Corporation of New York convened a meeting to discuss the lessons learned from existing initiatives and to examine strategies for scaling up successful efforts. This meeting gathered individuals with expertise in some aspect of family support or parent education: independent researchers, academics, government policymakers, decision makers from the various service sectors, and leaders representing faith organizations, the media, and business. This report compiles the ideas, facts, trends, conclusions, and recommendations that emerged at the meeting, drawing as well on background documents and relevant data.

Part I of this report outlines the case for strengthening families, provides a broad overview of existing family support and parent education efforts, summarizes findings on the effectiveness of these programs, and discusses the challenge of moving from programmatic to more systemic efforts. Part II summarizes the lessons learned from existing initiatives in every sector of American life, including the major service sectors (child care, education, health, welfare, and criminal justice); mainstream institutions (faith institutions, business, and the media); and government (federal, state, and local). Part III presents the challenges of going to scale.

PART I. THE STATE OF THE ART

THE PROBLEM: A PATTERN OF NEGLECT

The springboard for the discussion of scaling up family support programs was the 1994 report issued by Carnegie Corporation of New York, *Starting Points: Meeting the Needs of Our Youngest Children*. *Starting Points* presented the scientific evidence that has accumulated over the last decade confirming what parents and teachers have long suspected — that children's early care and environment have a decisive, lasting effect on their later development, including not only their physical development but also their intellectual and emotional growth. It documented a pattern of neglect that threatens the well-being of young children and of the society they will inherit.

Starting Points found that when women and men are prepared for the opportunities and responsibilities of parenthood, they are more likely to provide the care and create the conditions that promote healthy development. It emphasized that the kinds of knowledge that can help parents give their children a good start in life — knowledge about child development and child health, for example — does not come naturally; nor is it always available from relatives or neighbors. For this reason, virtually all parents can benefit from the kinds of information and guidance that help them understand and respond to their children's physical, intellectual, and emotional growth, particularly in the first three years of life when development proceeds at such a dizzying pace. This finding is borne out by the fact that, across the nation, families at all income levels and in all kinds of communities — urban, suburban, and rural — are taking advantage of existing family support services.³

Meeting the Needs of Preschool Children

While parents of school-age children can certainly profit from family support, parents of infants and toddlers may benefit the most. And since the number of children under age five has increased sharply in recent years, rising by 18.6 percent from 1980 to 1993, more and more parents are struggling to meet preschoolers' needs.⁴ At times, those needs seem relentless. Compared to the young of other species, human children are remarkably helpless. The very survival of the human species therefore hinges on adequate parenting throughout an extended childhood (although parents who are trying to comfort a wailing newborn at three A.M. or reason with a thrashing three-year-old who will not get into her car seat may have more doubts about their own survival than that of their child).

And yet, parents must do much more than safeguard their children's (and their own) physical health and safety; they must also provide for their emotional, intellectual, social, and spiritual development and well-being. As their children grow, parents must continue to provide a sense of safety and structure, belonging, self-esteem and self-reliance, intimacy and relatedness, and competence.⁵

Parents must accomplish all of this while running busy households and holding down jobs. Today, approximately 60 percent of mothers are in the work force. Half of those have babies under one year of age. The number of mothers of preschoolers in the labor force has doubled over the last quarter century. In 1993, there were 9.6 million working women with preschool children.⁶

Parenthood can overwhelm even the most mature mothers and fathers; it is certainly stressful for the nation's large number of very young parents. Very recently, the birthrate for adolescents has decreased slightly, although the problem remains serious. Each year teenage mothers give birth to nearly 500,000 babies. Today, 3.3 million children live with adolescent mothers. These young mothers have a particular need for parent education and support. They are much less likely than other mothers to take advantage of prenatal care, and those under age seventeen are more likely to have low-birthweight children — with all of the health and developmental problems associated with that condition. In general, children born to teenage parents, especially those living with their mothers alone, appear to be more likely than other children to have continuing health problems.⁷

For all of these reasons, *Starting Points* recommended that community-based parent education and support be available on a voluntary basis to all parents with children under age three. It called for programs that increase understanding of child development and parent-child relationships, provide models of parenting, and teach parenting skills. The report stressed the importance of continuity — maintaining ongoing relationships with parents; flexibility — creating services and supports geared to the strengths, styles, and needs of individual families; and outreach — linking families with other parents and with community resources.

Concerns of Parents

Few jobs are more vital to the well-being of children and society as a whole than parenthood; yet few jobs are undertaken with so little solid information or training. Many Americans have more resources in their homes for operating a new appliance, such as user manuals, on-screen instructions, or toll-free customer support numbers, than for coping with a new baby.

This might not be alarming if parents and children were faring better. But participants at Carnegie Corporation's meeting pointed to numerous, well-documented signs that many American families are in crisis and that the trajectory toward trouble may be set even before birth. Some of this evidence comes from parents themselves. Torn between the need or desire to work and to care for their children, many mothers and fathers are worried — sometimes guilt-ridden — that they do not have more time, more energy, more patience. Two-thirds of employed parents with children under eighteen say that they do not have enough time for their children.⁸ More than half — 55 percent — say that they are not doing as good a job at childrearing as their own parents did.⁹

American parents are hungry for information and advice, a fact that has not been lost on publishers, which have stocked bookstore shelves with scores of titles on pregnancy and childbirth, child health and development, and childrearing. Parenting magazines, numbering close to one hundred separate publications, are thriving. Many parents are also going on-line, perusing electronic bulletin boards for advice about teething or toileting, finding child care, or coping with sleep deprivation. A measure of parents' desperation is their eagerness to call helplines. A single 800 number supported by corporate employers has been called by more than two million parents. Even some of the corporate decision makers who established the helpline have expressed surprise that so many parents are willing to rely on the guidance of

strangers. In short, vast numbers of Americans, representing every socioeconomic and ethnic group, are worried about their parenting and are eager for information and support.

Research on the Status of Children and Families

Over the last two decades, research on the status of children and families in the United States has confirmed parents' fears: that in too many cases our children's most basic needs are not being met in their family settings. The data gathered in *Starting Points* indicate that despite a great deal of knowledge about caring for young children the nation is not yet able to assure their physical safety or survival. The risk to children's health and safety begins before birth. In 1990, one in four pregnant women received inadequate prenatal care, and the number of mothers who receive virtually no care during pregnancy is rising.¹⁰ As a result, the United States has a worse low-birthweight rate than thirty other nations and a worse infant mortality rate than nineteen. Childhood injuries are the leading cause of death among children ages one through four. Many of these injuries are accidental; too many are not. In 1990 more than 2.5 million children were reported as being abused or neglected in the U.S. One in three victims of child abuse was a baby less than a year old.

Millions of other small children may be physically safe and healthy but may face other kinds of risks that jeopardize their emotional, social, and cognitive development. Recent studies have found that the vast majority of child care programs in this country — 70 to 80 percent — are of mediocre or poor quality. The quality is even worse for infants and toddlers. The services available are too fragmented and too poorly funded to provide adequate coverage or quality to meet the needs of an expanding and changing preschool population.¹¹

These and other problems cut across all social and economic strata but are more common among children of poor, teenaged, and single parents and among women who have rapid successive pregnancies. Many of these problems can be linked to poverty. For example, children from low-income homes are at significantly higher risk for infant mortality, low birthweight, physical or mental disabilities, fatal accidents, and common health problems such as asthma, frequent diarrhea, pneumonia, or decayed or missing teeth.¹² These findings are especially sobering in view of the fact that the number of children living in poverty is large and growing. Today, one in four infants and toddlers under the age of three — nearly 3 million children — lives in a family with an income below the federal poverty level.

THE SOLUTION: BUILDING PARENTAL COMPETENCE

The challenge posed by *Starting Points* is to identify, replicate, and expand programs and services that build parental competence and strengthen families. The group that gathered in November 1994 took up this challenge.

Most individuals and institutions committed to family support and parent education envision a future in which these services are available to every family that wants or needs them. While that remains a distant goal, enormous strides have been made over the last decade.

Local Efforts

A national database of family support programs from the Family Resource Coalition, which is not exhaustive, lists hundreds of local programs. Surveys by the Robert Wood Johnson Foundation have documented the existence of more than 2,000 organizations that characterize their mission as providing family support.

State-sponsored Efforts

In the mid- to late 1980s, statewide parent support initiatives were launched in various parts of the country, including Missouri's Parents as Teachers program, Maryland's Friends of the Family and Family Support Centers, Connecticut's Parent Education and Support Centers, and Minnesota's Early Childhood and Family Education Program. These programs differ in their content, structure, staffing, and relative degrees of central authority and local autonomy. Maryland has primarily targeted teen parents and their families; the other three states offer services to all parents with young children. But each of them offers a basic menu of core services, and all allow some local flexibility.¹³ These and other programs constitute persuasive evidence that family support principles can be translated into effective, politically viable policies at the state level.¹⁴ A recent typology of family support programs documented state-sponsored family support programs in twenty-one states. These large-scale efforts provide services at numerous sites, with a view toward eventually offering them on a statewide basis.¹⁵

Federal Efforts

Several federal educational initiatives aim to strengthen parent involvement. One, the Even Start Program (part of the Elementary and Secondary Education Act of 1965), helps mothers

and fathers develop parenting and literacy skills while providing good-quality early childhood programs. Recent non-legislative activities undertaken by the Clinton administration have included building a Family Involvement Partnership for Learning, which pulls together groups from many sectors to find ways to deal with family support issues.

Types of Family Support Programs

Family support and parent education programs have many sponsors and funders. They may be organized by faith organizations, schools, hospitals, or health clinics. They may include child care centers, parent hot lines, visiting nurse services, mental health centers, pediatric intervention teams, correctional facilities, Big Brothers or Big Sisters programs, crisis centers, community action agencies, employment and training centers, and dozens of other organizations. These agencies and programs have different histories, grow out of different disciplines, and draw their staffs from different educational backgrounds. For this reason, they conceptualize their work differently. The common link is that the services they provide are designed to strengthen parents' ability to care for themselves and their children.

Meeting participants noted that people tend to be most receptive to information or advice at times of decision or transition. For this reason, the timing of family support/parent education services is crucial. Three key transition points for young parents and young children are birth and the perinatal period; the initial adjustment to out-of-home care; and the transition to school. Most family support programs target at least one of these transitions. Depending on the timing and nature of the intervention, programs may be home-based, institution-based, or multifaceted.

Home-based programs. Rooted in the friendly visitor tradition of the last century, the concept of home visitation rests on the premise that to foster the early development of children, particularly at-risk children, one needs to work with parents in their home, observing their interactions with their child in a natural setting and helping them to create an environment from the outset that will support the child's healthy development. The services may be offered through community-based organizations, preschools, health clinics, or neighborhood family-child centers. The visitors may be nurses, social workers, or parent aides.

Some family support programs use home visits as the sole or main type of intervention; in fact, these programs appear to be proliferating.¹⁶ They may vary in terms of the goals they are pursuing, the particular information or skills they stress, the frequency and duration of

visits, and the characteristics of the visitors and the clients. But most home visiting programs focus on parents' ability to provide the basic requirements for food, shelter, and health care and to meet children's emotional, intellectual, and social needs. They teach and demonstrate how to enhance parent-child interactions, create a safe, appropriate home environment, and access health care and other services.

Because they occur in the home where family life takes place, home visitation programs offer many advantages, which were discussed in some depth at the November meeting. Home visits allow clients to receive services without traveling to an office or arranging for child care. They encourage a very broad view of a family and place childrearing practices in the context of their particular community and circumstances. By demonstrating their willingness to go to the family's turf, visitors build a trusting relationship and create a "therapeutic alliance" — a supportive, ongoing relationship that fosters parents' growth. In all of these ways, home visits can potentially shift the ecology of family life, helping parents make the kinds of changes that they themselves want to make.

Meeting participants also observed that home visits also have some drawbacks. In high-crime areas, they may pose dangers to visitors. They may also be perceived as intrusive or intimidating by parents, who may not want to expose their home lives to the scrutiny of strangers. The substance, scope, or quality of visitors' work may be difficult to supervise. In addition, home visits often present professional dilemmas, such as how to establish trust without encouraging dependency. Some organizations now make use of "personal visits," which may take place at home or at a church, a neighborhood family center, a restaurant, or wherever the family and the visitor can get together.

Institution-based programs. Other family support programs are based in institutions, such as child care centers, schools, community colleges, or health clinics. These institutions may integrate family support with their core services, either making their existing services more family supportive or adding a family support component to their spectrum of services. Among the more intensive efforts are school-based programs for young mothers and their babies. These programs usually supplement instruction, provided in appropriate classroom settings, with personal guidance and mentoring from teachers, nurses, and social workers. During pregnancy, the students receive routine prenatal care and are under the supervision of nurses. The school curriculum includes subjects like planning for self-sufficiency and delaying subsequent pregnancy. This type of program has been shown to increase the

likelihood of healthy pregnancies and having healthy infants, while reducing the risk of welfare dependence. Students who begin the program early in their pregnancy show the best results.¹⁷

Multifaceted programs. Discussion at the Carnegie Corporation meeting reflected the widespread conviction among family support advocates that neither home-based services nor institution-based services, as stand-alone strategies, are sufficient. A decade of research indicates that the most effective efforts take a more comprehensive approach, providing a range of services at home and in the community. Some of these programs, particularly those sponsored by state governments, are large in scope; others are more limited. But most provide a basic menu of core services, including prenatal care and counseling; parent education covering child development and a wide range of parenting skills; home visits; drop-in centers; parent support groups; structured playtime for parents and children; information and referrals; and counseling. Some programs also provide parent employment training and counseling, health care, and child care for infants and toddlers.

Examples of Family Support Programs

Among the larger, more well-established family support programs are the following:

Parents As Teachers (PAT). A program for parents of children up to three years of age, PAT is the largest comprehensive family support program in the nation. The PAT model emphasizes regular home visits and individual contact with the parents. The state of Missouri requires every school district to offer the program. An evaluation of PAT in thirty-seven Missouri school districts found that participating three-year-olds scored above the national norms on language and on school-related success.

Healthy Families America (HFA). This Chicago-based program adapted the innovative Healthy Start initiative that originated in Hawaii a decade ago. Established in 1992 by the National Committee to Prevent Child Abuse, in partnership with Ronald McDonald House Charities, HFA is the nation's fastest-growing family support program. It has spread to more than 170 communities in twenty-nine states and the District of Columbia. HFA provides home visitor services to new parents and stresses continuing staff education and credentialing. It has implemented a quality assurance plan for all sites and is now developing a family support research network.

Birth to Three. Founded in 1978 in Eugene, Oregon, Birth to Three brings new parents together to share experiences, learn about child development, form a support network, and gain access to community resources. Programs are community- or school-based and are run by professional staff assisted by volunteers. The program is open to all families in Oregon and, to date, has involved more than 10,000 families.

Home Instruction Program for Preschool Youngsters (HIPPY). HIPPY serves parents of four- and five-year-olds in over two hundred communities in twenty-two states. Parent aides visit participating families at home twice a month over a two-year period; they present and model a curriculum of activities for parents to follow with their children. Twice-monthly group meetings led by a professional program coordinator help parents share educational approaches to use with their children. A study that followed participating children through their school careers until grade ten concluded that HIPPY has a positive, sustained impact on achievement and adjustment in school.

Avance. Founded in Texas in 1973, Avance serves low-income Mexican American families and their young children. It offers classes for mothers and fathers, day care for the children, and in-home visits from educators. Evaluations show that as a result of their participation in the program, parents provide more educationally stimulating and emotionally supportive home environments for their children, use less restrictive and punitive discipline, and make greater use of community resources.

MegaSkills Program. This is a less intensive model that offers workshops for parents to help them carry out learning activities at home. It has trained more than 4,200 workshop leaders from forty-five states. Evaluations of children whose parents have received MegaSkills training show improvements in the children's achievement test scores, attendance, time spent doing homework, and time spent with parents.

Minnesota Early Learning Design (MELD). This Minneapolis-based organization helps new parents improve their child-rearing skills and promotes children's development by disseminating training and curriculum programs that have been adopted in more than 150 educational and social agencies in twenty-five states. MELD's parenting education programs have been used successfully to support the healthy growth and development of children with disabilities, new immigrants, and adolescent mothers. Research on these programs has revealed reduced family isolation and improved parenting skills.

Parent-Child Centers. This initiative originated in the 1960s as a key component of the Head Start program. The program was cut back dramatically in the 1970s but has grown slowly over the past two decades. In 1992 there were 106 centers serving roughly 20,000 children under the age of three. The program combines home visits beginning during pregnancy; activities geared to teen parents and their families; high-quality child care; and early intervention for children with special needs.

IMPACT OF FAMILY SUPPORT AND PARENT EDUCATION: THE EVIDENCE

Research conducted over the last three decades suggests that a significant portion of the problems afflicting the nation's children can be tied to parental behavior — in particular, the health-related behaviors of pregnant women — and to the quality of care that parents provide to their children.¹⁸ The question remains: Can family support and parent education programs strengthen parents' ability to care for their children and thus improve results for children? The evidence is promising but not conclusive. Comprehensive, multifaceted family support programs are difficult to evaluate: they encompass many variables, and they try to gear services to the needs of individual families. Because different programs work with children of different ages and target different kinds of families, it is difficult to compare them. For these reasons, there has been little systematic research on their effectiveness.

On the other hand, evaluations of more narrowly focused programs — those stressing home intervention and parent education — indicate that their effects can be impressive. Effective programs begin with prenatal care; they are comprehensive, intensive, and long lasting. Such programs appear to be particularly helpful to low-income, single, adolescent mothers, whose children are at high risk for academic failure and a multitude of other problems. Research shows that it is possible, although difficult, to improve results for these children while reducing the risk of welfare dependence, antisocial behavior problems, and violence.¹⁹

Meeting participants noted that home intervention programs appear to be a particularly promising approach. Studies conducted over the last ten years have produced some evidence, based on a small number of high-quality research and demonstration programs and well-evaluated service programs, that regular home visits can enhance children's, and sometimes parents', development. Two large studies conducted in Elmira, New York, and Memphis, Tennessee, suggest that early childhood home visitation services can reduce poor pregnancy

results and dysfunctional caregiving as well as lower the risk of welfare dependence and youth violence among low-income families. Home visitation programs also appear to be cost-effective. One study showed that, by the time they reached age four, children in low-income families who received home visitation from the prenatal period through the second year of life cost the government \$3,313 less than did their counterparts who received no services.²⁰

The research further suggests that the effects of home intervention programs during the preschool years can persist over an extended period. Some longitudinal studies show that IQ gains associated with such programs persist into the elementary school years. These gains do tend to fade after several years, but researchers note that the boost during the crucial “school-readiness” years may contribute to subsequent achievement.²¹

Efforts that focus on helping parents become stronger partners in their children’s learning have been shown to have a significant positive impact on children’s cognitive development, school performance, and social functioning. Numerous studies over the last three decades have shown the promise of programs designed to assist parents of preschool children, including family literacy programs, projects that integrate adult and early childhood education, and family intervention programs designed to help parents become better partners in their children’s schooling.²²

THE CHALLENGE: MOVING FROM PROGRAMMATIC TO SYSTEMATIC EFFORTS

The literature on family support and parent education refers frequently to an evolving family support “movement.” This usage reflects the fact that many researchers and practitioners in the evolving field of family support are joining forces — in professional organizations and publications and at conferences and other public forums — to urge a shift in emphasis from programmatic family support efforts to a more systemic approach. Family support advocates have begun to press decision makers in many spheres of public and private activity to infuse, into their organizations’ policies and practices, a set of family support principles that include: 1) an emphasis on prevention, resulting in programs that do not just treat problems but seek to prevent them; 2) an ecological approach, resulting in programs that take into account the needs and conditions of the child, family, *and* community; 3) a developmental view of parents, resulting in programs that support the growth and learning of parents as well as children; and 4) a belief in the universal value of family support, resulting in programs that can strengthen and empower all kinds of families.²³

Organizations can also infuse into their policies and programs some of the best practices of effective parent education programs, including efforts to establish and maintain ongoing relationships with parents; gear services to the strengths, styles, and needs of individual families; model positive parent-child interactions; teach new parenting skills; increase understanding of child development; provide a network of social support with other parents; and facilitate parents' access to community resources.

The family support "movement" proceeds from the premise that family support and parent education cannot succeed as isolated efforts. In particular, families living in poverty and in conditions of constant stress have urgent needs that stand-alone programs or parenting classes alone cannot meet. To serve these families, parent education and family support programs must be embedded in a coordinated array of community-based services including, but not limited to, health care, child care, literacy classes, and job training.

A number of the larger, more well-established programs have attempted to move in the direction of systemic reform by providing training and technical assistance to community-based agencies or school districts that wish to provide more support to the families they serve.²⁴ Their aim is to move, over time, to a model of family support that encompasses all of the services available in a given locality. In this sense, the family support movement is allied with "coordinated services" efforts in education, which have gained momentum in recent years. Informed by a growing network of advocates and practitioners, the coordinated services movement tends to focus on school-community linkages, envisioning the school as a hub of services — including education, health, recreation, and social services — for all the residents in its vicinity.²⁵

The family support movement seeks to reconfigure delivery systems as well, with an emphasis on services to young families. Existing services derive from multiple antecedents and many disciplines and are supported by many different funding streams.²⁶ The crazy quilt of delivery systems now in place, particularly for poor children, rarely meets the needs of the "whole child" or the "whole family."²⁷ The comprehensive, multifaceted programs that are now operating in many parts of the country have taken strides in that direction, by reaching out to local service providers and helping them to incorporate family support principles into their day-to-day work. But they cannot address directly the obstacles that tend to undermine efforts at coordinating and transforming delivery systems, such as categorical financing, interagency turf battles, and political conflict.

Despite these limitations, comprehensive programs are putting down roots in many parts of the country and offer many opportunities for scaling up family support and moving toward a more systemic approach.

PART II. LESSONS LEARNED

THE MAJOR SERVICE SECTORS

Scaling up family support is not an end in itself. It is, rather, a broad strategy for investing in the next generation and thereby protecting and strengthening the nation. To succeed, the endeavor must engage every sector of American society. With this in mind, the participants at the Carnegie Corporation meeting undertook a sector-by-sector review of efforts to support families, delineating lessons that may inform the process of going to scale. In the process, the group posed two key questions: First, is it possible to take an existing delivery system and, by adding or strengthening family-oriented services, convert it into an effective family support and parenting education program? And second, is it possible to mesh the efforts of numerous sectors into a network of services designed to strengthen families and build parental competence?

Child Care

Most preschool children — by some estimates as many as 98 percent — are in out-of-home child care at some point before they begin kindergarten. Because they have contact with so many families, child care providers are ideally positioned to deliver a variety of family support services. Child care providers may be based in schools, homes, health facilities, or community institutions such as churches. Many of them, wherever they are based, share a commitment to early prevention, a willingness to work with families, and an awareness of the developmental stages of parenting. Some of the larger, better-designed child care programs, such as Head Start, have strong parent involvement components. Many smaller programs and providers also make efforts to support families, particularly through parent education. Some see parent education as part of their mission from the start; others come to parent education as a secondary focus.

For all of these reasons, meeting participants suggested that child care, as a service sector, should be a strong contributor to the process of scaling up family support. A number

of organizations are making active efforts to infuse family support principles into early care and education projects. For example, the Parent Services Project, which seeks to strengthen child care providers' capacity to support parents and families, has attracted both government and foundation funding and is now functioning at more than one hundred sites around the nation.

These efforts are encouraging. Without additional support and resources, however, few child care providers today are in a position to take on new challenges. As *Starting Points* documented, the vast majority of existing preschool programs provide substandard care and lack the funding they need to improve quality. Most cannot hire enough adults in proportion to the children in their care or pay salaries higher enough to attract or retain highly qualified teachers or administrators. Until these hurdles are overcome, child care cannot fulfill its promise as a key provider of family support services.

School-based Programs

Parent education is a process by which one generation transmits values and cultural patterns to another. It begins long before prospective parents make their first prenatal visit. For this reason, schools can play a key role in preparing young people to become good parents. Many Americans are convinced that government, through its schools, should not be in the business of promoting a particular set of values, mores, or lifestyles, and that other institutions, such as faith institutions or community-based organizations, should have more influence in this effort.

Nevertheless, because families tend to be smaller and more isolated than in past decades, and because family life is more pressured, many parents welcome the role that public institutions are playing in parent education, which in public schools is often called "family life education." While a vocal group of conservative parents vigorously opposes family life education, the majority of parents — according to one survey as many as 75 percent — say that they support this trend.²⁸

Parents are not alone. Most state agencies and professional organizations also embrace the notion that children and adolescents should receive age-appropriate family life education and education for parenting. Despite their support, there has been little systematic research on school-based preparation for parenthood. Its prevalence can be described only in the broadest terms: forty-seven states have laws or policies that mandate or recommend some level

of family life or human sexuality education between kindergarten and grade twelve. Of these states, thirty-nine have developed general curriculum guidelines. Few are comprehensive in their coverage of key topics.²⁹

Even so, young people manage to receive little education for parenthood in the public schools. Usually, the topic of parenting is presented only briefly, and only to the upper grades. There are relatively few comprehensive, developmentally oriented family life education programs. Where they do exist, scaling them up has proven difficult because of fiscal constraints as well as political opposition. Moreover, there is little consensus on the content of such programs, and most states leave the specifics up to local school districts and communities. Meeting participants commented that standards, where they have been written, tend to be too prescriptive; they may institute a one-size-fits-all approach that cannot sufficiently accommodate cultural variation or reflect a community's wide spectrum of attitudes and values. Schools may be able to avoid this pitfall by working in close partnership with community-based organizations as they design and implement parenting education initiatives.

Some participants at the Carnegie Corporation meeting predicted that family life curricula would be better accepted if they were redesigned as solidly academic courses in human development or life sciences. In this form, they are less likely to be offered as electives, sacrificed to "back-to-basics" movements, or eliminated as "frills" when budgets are cut. Others observed that programs like family life or human sexuality or even health education remain on the margins of the school curriculum because schools do not test for them. Still others pointed out that parenting education curricula will not be widespread in schools until teachers are given focused, specific preparation to teach them, both in schools of education and in-service programs.

Many educators argue against a stand-alone parenting education curriculum, urging an approach that imbeds preparation for effective parenthood into the overall pursuit of dispositions and behaviors that are desired for children. They say that parent education should not only be built into the formal curriculum; it should be infused as well into extracurricular activities and, indeed, into the ethos of the school itself.

Public schools may also play a role in the provision of family support services. They are, after all, common to every community and can often play a crucial role in bringing together all of the community's stakeholders. In some cases, school buildings are serving as

community centers; in other cases, schools are adopting the “full-service school” model.³⁰ The schools do not provide the services, but they share facilities with other agencies and community-based organizations and become a hub of services. A case in point is the Caring Communities Project in Missouri, which uses the school as the hub of a network for child care providers. The program has been well accepted. It has used the rhetoric of shrinking government and community-based decision making and ownership as the rationale for wrapping services around the school.

Welfare

The 1990s appear to be an opportune time for bold efforts in welfare. Welfare reform has been hoisted high on the national agenda and is likely to remain a critical social and economic issue in the years to come. Because the status of the nation’s children should be more central to the welfare reform debate, any consideration of family support must take this issue into account. According to one meeting participant, who is a government official steeped in the welfare debate, focus groups held around the country indicate a widespread belief that welfare reform efforts should focus on small children.

Missouri is an interesting case in point. The Missouri child welfare system provides parent education, mandating it for those parents in the child welfare system who have a confirmed history of abusing or neglecting their children. At the same time, Missouri offers many other parents a strong incentive to participate in parent education on a voluntary basis. It is the only state where involvement in the Parents As Teachers program counts toward the twenty hours per week of work required to maintain one’s standing in welfare.

Health

As a sector, health care is a very promising delivery system for family support and parent education and can be a vital contributor to any effort to scale up support for parents. It is, after all, an entry point for services or help. Of the 4 million births that take place each year in this nation, the vast majority occur in hospitals or at least in the presence of medical personnel. Moreover, good well-baby care includes periodic visits that provide an opportunity to expand parent education and support. Another strength of the health care system is the therapeutic alliance — a trusting relationship between provider and patient. Finally, the expansion of the health care system and the extension of its role to include counseling parents may be more palatable politically than the expansion of other kinds of services.

These are the pluses. At the same time, there are several factors that may limit the effectiveness of the health care system in providing family support. The growth of managed care and the pressure to contain costs have led to the rapid discharge of new mothers, sometimes within twenty-four hours of giving birth. As a result, an important opportunity is lost to work with parents at a critical time. The same forces have put pressure on pediatricians to move patients through their office at a rapid rate, leaving many questions unanswered and many anxieties unrelieved. There are fewer public health nurses to make home visits to newborns and provide support to parents. And finally, the fragmentation of health services means that a mother's health problems — including stress or depression — may not be treated, even though she takes her child for regular well-baby visits.

The key to scaling up family support, from the viewpoint of health care, is to change incentives in the system so that managed care organizations, such as health maintenance organizations (HMOs), are rewarded for taking on a broader role in relation to families. Since parents value expanded service, it may well prove to be a marketing advantage for these organizations. Over time, the routine provision of parent education and family support may be viewed as a strategy that is in the financial interests of health care providers. A first step is for these organizations to determine which support services that parents really want. Once this is established, health care providers must become more knowledgeable about these services or be able to make appropriate referrals. They must ensure that their personnel, including physicians, have the training they need to support and educate parents.

One innovative effort to infuse parent education into health care delivery has been supported by the New York-based Commonwealth Fund. Known as Healthy Steps for Young Children, this project integrates a parent education component into the basic package of services provided by hospitals and HMOs to families with new children. Healthy Steps seeks to expand pediatric primary care to include information on child development and guidance and support for parents beginning in the late prenatal period and continuing through the first three years of life. The project plans to pilot fifteen or more local initiatives, each a multiyear partnership of the Commonwealth Fund, a local funder, and a local health care provider.

Criminal Justice

Of the 80,000 women incarcerated in the nation's jails and prisons, 76 percent have at least two children. Most were the primary caregivers of their minor children before their incarceration. Many inmates will resume their parenting responsibilities when they are

released from custody, but they will do so under very trying circumstances. Most incarcerated mothers see their children infrequently and in stressful settings. (Male inmates tend to have more frequent contact with their children, because the children's mothers are more likely to arrange visits.) Not only the parents, but also the children, suffer from these constraints. Approximately 1.5 million children have at least one parent who is in prison. Studies have documented the traumatic effects on children of their parents' incarceration. Children of prisoners are five to six times more likely than their peers to become incarcerated later in their lives.³¹

In some places, the criminal justice system has taken up the challenge of providing family support and parent education to inmates and their children. The oldest such program functions at the Bedford Hills, New York, Women's Correctional Facility, which has established a nursery for mothers who give birth while incarcerated, a parenting center, and a children's center for visitors. Bedford Hills also offers a variety of parent education courses taught by qualified inmates. Other correctional facilities across the nation are beginning to create policies and programs that maintain contact between inmates and families, build parental competence, and facilitate family interaction through structured visiting (including extended visits with children). These efforts are only beginning, however.

MAINSTREAM INSTITUTIONS

Faith Institutions

Faith institutions are among the only places in the nation where more than one generation gets together at the same time on a regular basis, providing a natural setting for parent education and family support. From a historical viewpoint, faith institutions are uniquely positioned to play a key role in the effort to scale up successful parent education and family support initiatives.

Until the early twentieth century, churches were the major and sometimes the only institution in the nation that responded to the needs of children, especially those in crisis. Today, with the exception of public schools, congregations serve more children, youth, and families than any other institution in our nation. Many have developed family ministries, equipping lay church members to provide needed family support services, providing self-help support, and offering professional family counseling. While faith organizations usually have physical space and numerous volunteers, they are often strapped for funds. Many of these organizations are competing for smaller and smaller pools of money. Some communities that

lack the resources to support their own parishioners are beginning to tap wealthier congregations, seeking aid or sponsorship.

Recent changes in the church-going habits of many Protestants affect the churches' capacity to provide family support. Today's families look for churches where they will feel comfortable; they do not necessarily seek the denomination connected with their own upbringing. The fastest-growing churches may have no affiliation with a national church body or office. As a result, multiple strategies are needed to reach a large number of congregations efficiently. Good candidates for community planning efforts are interfaith and ecumenical coalitions. They often operate somewhat like a nonprofit but act as an umbrella group representing a number of churches. They sometimes also operate direct service programs — often with great efficiency.

Historically, predominantly black churches have grounded their family support efforts within families and within communities. Until recent decades, predominantly white churches, in contrast, have tended to care for needy children by removing them from the family and community and placing them in residential homes, orphanages, and foster care. Today, black churches remain very active in providing family support and offer huge potential for helping to scale up community-based services.

Nationwide there are at least 75,000 black churches, serving more than 24 million churchgoers. Many of these congregations reinforced their traditional community outreach role in the 1980s as funding for social programs for minorities and the poor dried up. A recent study known as the Black Church Family Project studied a representative sample of 635 black churches and found that two-thirds of them had at least one community outreach program. More than half of these programs address the needs of the family unit.³²

Increasingly, black churches are being asked to anchor services to communities that are in transition. The churches have, to some degree, been responding to these problems and appear to be a ready instrument for immediate transfer from public services to private community-based services. Crucial infrastructure questions must be addressed, however. When a religious community becomes a major provider, the dollar resources are often reduced and issues of quality and evaluation are given short shrift.

Funding is not the only issue. There are many churches, particularly smaller ones, that are very community oriented and would be ready and willing to offer family support, but they do not know how to do it. If they are to play a role in scaling up family support, faith institutions of all kinds need help to build capacity.

Business

The corporate sector's involvement in parent education and family support is a recent phenomenon that has grown out of employers' efforts to help employees arrange for child care. A survey conducted in 1982, for example, found that 600 companies nationwide provided employer-supported child care; by 1990, the number had grown to 5,600 companies. Human resource executives say that the top three reasons for providing family support services are employee morale, recruitment, and retention.³³

Today, the case is growing stronger for helping employees balance their work and family life. Research by companies like IBM and Johnson & Johnson has found that these supports result in a direct, measurable benefit to businesses. Businesses are building a portfolio of success stories. There are many model programs and examples of businesses' successful community investment projects. Indeed, companies are competing with each other to excel in this area. One chief executive officer was recently asked what he would say to a peer who resisted the idea of family support. He answered: "I'd hope he was a competitor and then I'd keep my mouth shut."

Corporations are beginning to engage consultants to advise them specifically on family and workplace issues. This is consistent with the trend toward outsourcing many human resource functions. Some of these consultants began as child care resource and referral agencies — the main concern of business ten years ago — and then developed a much broader focus, helping corporations create more family-friendly policies and environments and change their business culture to introduce the flexibility needed by working parents. Numerous companies have asked consultants to help them integrate into their employee benefit packages a range of family support services, such as prenatal classes, parenting seminars, and hotlines. Many corporations also offer referral services, but a few are concluding that it is not enough to refer employees to care in the community, because there may not be enough care, or the quality of care may not be good enough. These companies have begun making investments in the long-term process of building the supply and increasing the quality of local services.

These trends are encouraging, but meeting participants emphasized that family support is by no means universal in the business community. Large companies tend to address family concerns, but many employers remain relatively unresponsive to parents' problems or needs. Moreover, in this period of corporate downsizing, the contingent workforce, made up of employees who do not receive benefits of any kind, is growing. It is now 38 percent of the workforce and is expected to grow to about 43 percent. These workers have little access to employer-sponsored family support services.

The bottom line is that businesses have made strides over the last decade toward family-friendly policies, but they have a long way to go. A recent study by the Families and Work Institute found that most companies now provide maternity leaves and offer parents flexible work schedules, such as part-time schedules or flextime. Only 28 percent offer child care leaves for mothers, however, and only 13 percent sponsor on-site child care centers. The steepest obstacle to change appears to be concern about cost and equity. Many corporate decision makers continue to view family support as a "frill" that has no place in today's tough environment, where only lean-and-mean companies can compete successfully. They are also concerned about the problem of offering benefits only to one segment of their workforce. They fear that if they provide support and education to parents with young children, they will be forced to offer equivalent benefits to other employees as well, such as those with ailing parents or troubled adolescents.

The Media

Parenting skills and information are no longer passed between generations or over backyard fences as readily as they once were. Americans are therefore looking to the media to provide parenting know-how, as they do for information about so many aspects of life.

In recent years there has been a marked increase in the publication of handbooks for parents. Of the hundreds of books and publications on parenting available at any given moment in bookstores and libraries, most address new parents. Periodicals with large circulations, such as *Parents Magazine*, with a circulation of nearly 2 million a month, not only offer advice to new mothers and fathers but also have the capacity to generate research by surveying their readers.

At the same time, newsrooms are undergoing great change, driven by financial pressures and declining readerships, and are looking for consumer relevancy and community

connections. One result is the development of civic journalism. There are new models of reporting on children all around the country, and full-time "children's beats" are enjoying a marked increase. A recent study of sixty-one newspapers and news services by the Casey Journalism Center found that more than half have added children's and/or family beats in the last three years. The news media today are devoting more space and resources than ever before to this beat, offering "news-you-can-use" for parents and stories that search for explanations of the forces in society that imperil children and families.

The electronic media can also play a role in strengthening parent education. Videotapes hold great promise for parenting education, since four out of five American homes have a VCR, and high-speed tape duplication has made it economically feasible to think of videotapes as give-aways. A case in point: McDonalds and the New York City Department of Mental Health have produced a videotape aimed at reaching at-risk adolescent parents with information and messages geared to preventing abuse. Commercial talk radio is another potentially powerful outlet for parenting education, and it has the advantage of being interactive.

Meeting participants identified a number of gaps that the media need to close. Stories on parenting tend to focus on young children; parents of adolescents receive far less attention, information, and support. Television and radio coverage of parenting issues could be more consistent. Child development specialists often make guest appearances on TV and radio, but at present there is no national talk show that focuses on child development and parenting. And finally, media critics note that both print and electronic media need to broaden their concept of parenthood to include fathers more consistently.

GOVERNMENT

Federal Government

Federal initiatives in the realm of family support and family preservation have generally been pursued within the framework of education, welfare reform, child care, and youth programs. There have been some recent efforts to strengthen services to families with young children, notably the Even Start Program, the introduction of Early Head Start as part of the Head Start reauthorization bill, and the 1993 Family Preservation and Family Support Act.

The current political climate dictates against dramatic federal efforts in the realm of education. Today, major federal initiatives in education are unlikely to succeed unless they are

voluntary, amenable to considerable flexibility, and based on local- and state-driven solutions. They also need to be comprehensive, with family involvement in learning as part of a broad set of comprehensive solutions. They need to allow states and communities that have bold action plans to seek waivers to decategorize education programs, allowing a more comprehensive approach.

Despite clear limitations, the federal government can be a catalyst for change by supporting, modeling, linking, and assessing efforts to provide family support. In particular, it can support a “visioning” process; fund research; facilitate and support collaboration; describe and ensure equity; and offer training, technical assistance, and leadership development.

State Governments

The impetus for expanding family support over the last decade has occurred, for the most part, at the local and state levels. As a result, many states have continued to take innovative approaches to family support issues. Some have created programs that establish stand-alone, community-based family resource centers and/or home visiting programs; others have built family support initiatives into efforts to reform the educational, welfare, and public health systems. Family support principles — including an emphasis on family-centered, preventive, comprehensive, community-based services — have also been built into state authorizations for existing programs operated by numerous state agencies. All of these actions reflect the growing recognition by state policymakers that their constituents are worried about the severe stress experienced by many families and want state government to respond with services that are accessible, effective, and closely connected to the actual needs and strengths of families and communities.

Meeting participants observed that, in order to expand family support, state governments need to be active in five areas:

- 1) *Providing leadership.* State governments must create a vision that leads to a strategic planning process, providing incentives, standards, and supports and sustaining commitment to ongoing initiatives despite changes in administration. The state can create an environment for innovation by partnering with other sectors, including the private nonprofit sector, the corporate sector, and local government.

- 2) *Establishing a policy framework.* State agencies can often succeed by taking a single, relatively simple concept and then making a sustained, systematic effort to build around it.

Vermont has done this, for example, with Success by Six, which wraps its family support efforts around a home visiting program. As they develop policies and programs, states need to make a commitment to going to scale, using cross-system approaches that take into account all the services provided in the state, not just those identified as family support programs.

3) *Ensuring an adequate and stable funding base.* States must analyze and publicize areas in which current investments are not paying off; increase investments overall, including through the creative use of federal dollars; look for opportunities to invest in prevention; and demonstrate that government can make responsible choices.

4) *Developing partnerships at the local level.* States provide a lawful structure for local efforts. At the same time, they must build relationships with local government, including school districts and neighborhood organizations. By offering reinforcement and public approbation to promising local initiatives, states can make it possible for best practices to go to scale.

5) *Assuring quality.* Today, many states are introducing or reinforcing a results-based approach to program planning and implementation. But in setting standards, states must also provide the assistance that local agencies and organizations need to meet those standards. Local initiatives need information and assistance with planning, training, financing, evaluation, and the use of electronic tools to coordinate efforts.

Local Governments

There is growing consensus among policymakers and taxpayers alike that grass-roots, community-based human services make more sense than categorical programs, with their top-down planning. It is recognized that, to function effectively, family support programs require substantial planning at the local level where the families who need the services will access them and use them. And yet, as things now stand, three out of four American cities have no formal written policies or plans for services to families.³⁴

Local governments bring numerous advantages to the task of establishing or expanding family support services. They are often better able than other sectors to come up with flexible initiatives that respond to emerging needs, and they are usually better positioned to take risks with funding and program development. They can form partnerships with local businesses, school districts, charitable organizations, and nonprofit organizations. They can act as role models and test new initiatives by piloting programs for their own employees. Finally, local governments are in a good position to build family support principles into local economic development strategies.³⁵

In more and more communities around the nation, both elected officials and private citizens are recognizing the link between the well-being of families and the vitality of the town or city or county as a whole. In particular, they are realizing that when families fail or flee, a community's economic prospects plummet. And yet, faced with severe fiscal constraints, many policymakers are reluctant to launch new family support initiatives.

But even financially pressed communities can strengthen family support by reviewing the existing services delivered by a wide variety of local government agencies and finding ways within those systems to better serve families. They can devise strategies for building the kinds of relationships among existing institutions and agencies, such as schools, libraries, health services, police forces, and recreation departments, that will support the healthy development of all of their children. They may want to start by evaluating the "family friendliness" of current policies and practices, with a view toward strengthening those that make the locality a good place for families to live and eliminating those that do not. In some cases, relatively simple changes can make a big difference, such as shifting the hours when agencies are open to match the realities of families' lives.

This kind of appraisal is certainly doable and can lead to a more comprehensive assessment of the needs of children and families if there are individuals and organizations prepared to carry it out. If not, then expanding family support requires a long-term commitment to developing leadership and to building, over time, a broad community coalition — in short, a constituency for change that comes together around a shared vision. The vision may be broad, based on a collaborative process that allows people to think together about how families can be better served, especially those with the greatest need. But it should also stress, at least at first, a single critical issue (prenatal care, or immunization, or affordable child care) that can help to focus community interest and activism.

The process of elaborating a vision should lead to a plan for cooperation across levels and departments. The plan should establish benchmarks, stating precisely what the community wants to achieve and how it can measure success. The plan may involve identifying, expanding, and linking effective community programs; it may call for innovation. In any case, it should identify every possible source of funds and other resources for family support projects — not only government sources, but also the philanthropic and business communities. Finally, the plan should encompass evaluation. An independent monitoring

process helps to ensure that a community's policies and practices — both old and new — move it toward the results defined during the visioning process.

PART III. GOING TO SCALE

DEFINING “SCALING UP”

Today there are thousands of scattered initiatives across the nation aimed at strengthening parental competence and helping young families thrive. A multitude of parent education programs operate under many guises. Scaling up these efforts does not only mean showcasing, evaluating, and expanding effective initiatives; it means reaching a population that is large enough to allow testing of the program's capacity to improve results on a systemwide basis; and also implementing the program in a sufficiently large jurisdiction to test it in a variety of settings, where diverse obstacles will be encountered.³⁶ Ultimately, scaling up involves creating the infrastructure for nationwide high-quality services for families and building a professional field of effective initiatives that are nailed into policy and resources.

In a fully scaled-up system of supportive services, the vast majority of people who need services and are eligible to receive them would be reached. As one meeting participant noted, even 96 percent penetration does not suffice if the 4 percent who are not served represent a particular group that has demonstrable need. A long-range plan therefore should, over time, move the nation toward the goal of making services available to every family that wants to take advantage of them.

Many sectors of the society and as many organizations and individuals as possible must be engaged on behalf of parents and their young children — a process that may involve the shifting down of responsibility from a central (federal or state) authority to local community groups. Because federal and state governments have historically played a strong role in assuring equity, this complex transfer of power may jeopardize the rights of disadvantaged or marginalized populations. This is not the inevitable outcome, however. States that are now in the process of scaling up parent support, like Missouri and Vermont, appear to be taking this danger into account and are building slowly with considerable attention to what happens to equity as devolution proceeds.

CREATING SYSTEMS OF SERVICES

Family support may be seen as both the provision of information and supports to families with young children and the creation of systems of services that enable families to get the help they need to raise their children. To be responsive to children and their parents, services must be linked because families' needs and strengths do not come in neat packages. Policymakers are beginning to recognize that effective parenting education and family support must be comprehensive in purpose. They are beginning to think about family support programs, including parenting education efforts, as part of broader efforts to reconfigure systems of service.

The challenge of "going to scale" raises a crucial issue: Is the priority to scale up family support as a set of discrete programs? Or should policymakers be working toward scaling up family support in the context of efforts to build a comprehensive system of services? Is it feasible in practice to start categorical and then build programs into systems?

Recent experience suggests that it is reasonable to start by scaling up successful programs. All of the states that have launched ambitious family support initiatives began by creating discrete programs within a particular system, usually education or social services. In each instance, the initiative is now "moving out"—that is, taking its place as part of broader, cross-agency efforts to support families and reform delivery systems.

SCALING UP PARTICIPATION

The challenge, broadly stated, is to rebuild communities so that supports are in place to meet the needs of children and families and to make or revise policy at the state and federal level to facilitate that process. For this to happen, family support principles must be infused into mainstream agencies and organizations at every level. They must be communicated in ways that will make sense to large numbers of people who may not be acquainted with them.³⁷

As part of that process, policymakers must address the question of whether family support and parent education services should be provided on a universal basis, or targeted to particular populations. This issue sparks heated debate, even within the family support movement. Historically, categorical approaches have often reached dead ends.

Some researchers, practitioners, and policymakers argue for universal programs, with different supports for different kinds of families, based on indicators showing that virtually all

families are under stress. A concern is that targeted family support echoes the biases of the charity organization movement of a century ago, by reflecting the assumption that poor people, people of color, and immigrants need parenting education in order to absorb the values, practices, and lifestyles of the dominant culture. Finally, supporters of universal services cite political considerations: many legislators are on record that they will only vote for universal programs that benefit all of their constituents.

Proponents of targeted services, on the other hand, argue for political realism. They assert that, in an era of scarce resources, services should be directed to the families and children who need them most — poor children and those demonstrably at risk of developmental delays, health problems, and school failure. They observe that the argument for universal services may not survive massive taxpayer resistance to increased social spending. As one participant commented, “Today the alternative to doing everything for everybody may be to do nothing for anybody.”

Finally, they note that the case for universal services rests on the premise that all parents and their children stand to benefit from access to family support services, particularly if those services are designed to meet parents’ needs as they themselves define them. Existing evaluations have not, however, been able to demonstrate conclusively the benefits of family support interventions for middle-class families.³⁸ This may reflect flaws in the evaluation design, rather than program weakness. In any case, the universal argument cannot be made persuasively until more evidence is gathered. The need for evaluation is not limited to the benefits for middle-class parents. In general, policymakers need more solid information on the impact of parent education and family support initiatives on various populations.

SCALING UP EVALUATION

Most evaluations of family support programs have been limited to a short time span — three to five years at most. To understand the impact of family support over time, the obstacles to change, and the kinds of programs that can overcome those obstacles, more long-term studies are needed.

There is a need to know whether programs designed for families with young children are likely to have a sustained effect on those children, including their own ability to be effective parents two or three decades later. Understandably, most politicians and the public are unwilling to wait twenty years to test a program’s impact. And given today’s budget

constraints, it is very difficult to secure funding for very long-term studies. As a result, big-picture evaluations may not be viable at the present time.

It is possible to document more fully and more effectively a range of indicators that shed light on the impact of family support. These data can help to shape new legislative and programmatic initiatives. Some researchers argue for “reinventing evaluation” — devising innovative knowledge development strategies that can help policymakers drive change and can give local communities the capacity they need to pursue effective, cost-effective strategies. Rather than asking whether family support works, researchers need to ask: What works best for whom?³⁹

LESSONS LEARNED FROM CURRENT EFFORTS

While continued research and evaluation efforts will help policymakers and practitioners target resources and improve results, enough is known about family support to counter the widespread perception that nothing works when it comes to improving the prospects for vast numbers of at-risk children. Indeed, the task of scaling up family support is already in progress in a number of states, including Maryland, Minnesota, Missouri, Kentucky, Tennessee, and Vermont, and in many communities. From these, a number of crucial lessons about the process have been learned:

- 1) *Scaling up high-quality programs in any significant way requires enormous investments of time, energy, and resources. An urgent priority is the creation of an infrastructure that strengthens and coordinates funding, training, quality control, and evaluation.*
- 2) *The federal government must not relinquish its stake in family support. States and local communities need assistance as they think through the best ways to approach complex infrastructure issues. In particular, family support and parent education require a broad perspective on training, capacity building, and evaluation.*
- 3) *It is impossible to overstate the critical importance of leadership and political skill, particularly the ability to read what will motivate policymakers and build political will. The political entrepreneurs who have successfully brought programs to scale have been attuned to the kinds of program design and strategy that would make their initiatives politically marketable within their states. It is essential to tailor advocacy for these kinds of programs to local political circumstances, and to fit them into the local political agenda.*

4) *Most states that are scaling up programs have been able to sell, to their legislatures and their state agencies, the notion that family support is a great way to invest in the future, to promote the human capital, and to contain escalating social spending.*

5) *All of the states that are successfully scaling up family support have dealt with volatile intrusion-into-family issues by ensuring a balance of power between localities and states. None has left itself open to the charge that the state is dictating to local people how they should raise their children.*

6) *Additional research is needed to support the process of planning, implementing, and scaling up high-quality programs.⁴⁰*

FOCUS ON QUALITY

The 1980s and 1990s have witnessed great progress in the field of family support and parent education. Concepts that once met wide resistance are now widely embraced by policymakers and service providers alike. It is now common wisdom in many quarters that, if the prospects for children are to be enhanced, the focus has to be on at least two and maybe three generations — on parents and children and grandparents. It is now widely accepted that parents, to succeed, need communities, not just a service or even a couple of services but a set of connections that encompass both the public and private sectors.

But these principles, even when they are reflected in planning efforts, mission statements, and pilot projects, do not always translate into policies or practices that support and preserve families.⁴¹ In fact, in a recent international study, the United States ranked in the lower half of Western industrialized countries in providing family support services.⁴² This country is not yet close to systematizing any effort toward comprehensive family support or parent education. Investments to preserve families remain small.⁴³ And generally speaking, strengthening families remains low on the nationwide public policy agenda.

The challenges are practical as well as political. Today, services to families and children, particularly those financed and regulated by the states, remain largely categorical and fragmented — a patchwork pieced together from the education, health, child welfare, juvenile justice, and mental health systems. Generally speaking, the fragmented, mainstream service system does not yet embrace family support principles; those services that do embody family support principles tend to be add-ons to this mainstream service system. Moreover, the most

vulnerable families and the most troubled young people tend to be served by the more categorical and traditional service systems. Despite rhetoric about family preservation, recent years have seen an increase in out-of-home placements of children into foster care, mental health facilities, and juvenile detention and training schools.⁴⁴

Good practice exists at thousands of family centers and parent support programs across the country, as well as in agencies and schools that embrace family support principles. But at this point, family support lacks clear-cut quality standards for program content, performance, and delivery. Articulating and codifying these standards is an extremely difficult task, because family support is, by definition, a multifaceted effort that seeks results in several domains at once: children, family, programs, communities, normative public agencies, and service delivery systems.⁴⁵

Efforts are now under way to define and implement quality standards. For example, in 1992 the Family Resource Coalition launched the Best Practices Project, an effort to specify standards of quality based on the most effective practices of existing community-based family support programs. This effort mines the knowledge and experience of leading researchers and practitioners, as well as focus groups, and will digest its findings into user-friendly guidelines for excellent practice in the field of family support.⁴⁶ Over the next decade, the challenge is to follow up on this and other efforts to define quality, by systematically infusing best practices into new policies and the programs they generate, so that, as a nation, the United States can move toward high-quality, integrated systems of family support and parent education.

#

ENDNOTES

1. U.S. Bureau of the Census, Economics and Statistics Administration, *Statistical Abstract of the United States, 1994*, 114th ed. (U.S. Department of Commerce, 1994).
2. Craig T. Ramey and Sharon Landesman Ramey, "Home Visiting Programs and the Health and Development of Young Children," *The Future of Children*, vol. 3, no. 3 (Winter 1993).
3. Sharon L. Kagan and Nancy Cohen, *Report of the Quality 2000 Initiative* (New Haven: The Bush Center in Child Development and Social Policy at Yale University, forthcoming).
4. U.S. Bureau of the Census, *Statistical Abstract of the United States, 1994*.
5. K. J. Pittman with M. Wright, *A Rationale for Enhancing the Role of the Non-School Voluntary Sector in Youth Development*, report prepared for The Carnegie Council on Adolescent Development Task Force on Youth Development and Community Programs (Washington, D.C.: Center for Youth Development and Policy Research, Academy for Educational Development, 1991).
6. U.S. Bureau of the Census, *Statistical Abstract of the United States, 1994*.
7. Jeanne E. Griffith, *The Children of Teenage Mothers*, report no. 87-94 EPW (Congressional Research Service, 1987).
8. Families and Work Institute, *Employers, Families, and Education: Facilitating Family Involvement in Learning* (New York, 1994).
9. Sharon L. Kagan, *Defining America's Commitments to Parents and Families: An Historical-Conceptual Perspective* (April 1994).
10. Sarah S. Brown, "Preparation for Parenthood," in *The Challenge of Parenting in the Nineties* (Washington, D.C.: The Aspen Institute, 1995).
11. Kagan and Cohen, *Report of the Quality 2000 Initiative*.
12. Arloc Sherman, *Wasting America's Future: The Children's Defense Fund Report on the Costs of Child Poverty* (Boston: Beacon Press, 1994).
13. Heather B. Weiss, "Building Villages: Lessons from Policy Entrepreneurs," in *Visions of Entitlement, The Care and Education of America's Children*, ed. Mary A. Jensen and Stacie G. Goffin (Purchase, N.Y.: State University of New York, 1993).
14. Frank Farrow, "Family Support on the Federal Policy Agenda," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).

15. Kagan and Cohen, *Report of the Quality 2000 Initiative*.
16. Heather B. Weiss, "Home Visits: Necessary But Not Sufficient," *The Future of Children*, vol. 3, no. 3 (Winter 1993).
17. David Olds, "Promising Preventive Interventions During Pregnancy, Infancy, and Early Childhood," in *The Challenge of Parenting in the Nineties* (Washington, D.C.: The Aspen Institute, 1995).
18. Ibid.
19. Ibid.
20. Ibid.
21. T. Kellaghan et al., "The Effectiveness of Family-Intervention Programs," in *Home Environment and School Learning: Promoting Parental Involvement in the Education of Children* (San Francisco, Ca.: Jossey-Bass, 1993).
22. Norm Fruchter, Anne Galletta, and J. Lynne White, "New Directions in Parent Involvement," in *Equity and Choice*, vol. 9, no. 3 (1993).
23. Kagan, *Defining America's Commitments to Parents and Families*.
24. Fruchter, Galletta, and White, "New Directions in Parent Involvement."
25. Joy G. Dryfoos, *Full-Service Schools: A Revolution in Health and Social Services For Children, Youth, and Families* (San Francisco, Ca.: Jossey-Bass, 1994).
26. Sharon L. Kagan, "On Building Parental Competence: The Nature of Contracts and Commitments," in *The Challenge of Parenting in the Nineties* (Washington D.C.: The Aspen Institute, 1995).
27. Robert I. Crowson and William Lowe Boyd, "Coordinated Services for Children: Designing Arks for Storms and Seas Unknown," in *American Journal of Education*, vol. 101 (1993).
28. Kathryn Young, "Education for Parenting," paper presented to the Carnegie Corporation of New York Conference on Scaling Up Family Support and Parent Education (November 16-17, 1994).
29. Ibid.
30. Dryfoos, *Full-Service Schools*.
31. Ann Adalist-Estrin, "Family Support and Criminal Justice," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).

32. Cleopatra Howard Caldwell, Angela Dungee Greene, and Andrew Billingsley, "Family Support Programs in Black Churches: A New Look at Old Functions," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).
33. Families and Work Institute, "Comparative Analysis of Work-Family Programs in Major Corporations," in *The Corporate Reference Guide to Work Family Programs* (New York: Families and Work Institute, 1991).
34. National League of Cities cited in Norman B. Rice, "Local Initiatives in Support of Families," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).
35. Rice, "Local Initiatives in Support of Families."
36. Ibid.
37. Sharon L. Kagan, "Defining and Achieving Quality in Family Support," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).
38. Olds, "Promising Preventive Interventions During Pregnancy, Infancy, and Early Childhood."
39. Kellaghan et al, "The Effectiveness of Family-Intervention Programs."
40. Weiss, "Building Villages: Lessons from Policy Entrepreneurs."
41. Charles Bruner, "State Government and Family Support: From Marginal to Mainstream," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).
42. Cited in Camille Sweeney, "Portrait of the American Child, 1995," *The New York Times Magazine* (October 9, 1995).
43. Kagan, *Defining America's Commitments to Parents and Families*.
44. Bruner, "State Government and Family Support."
45. Kagan, "Defining and Achieving Quality in Family Support."
46. Ibid.

REFERENCES

- Adalist-Estrin, Ann. "Family Support and Criminal Justice." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.
- Brown, Sarah S. "Preparation for Parenthood." In *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.
- Bruner, Charles. "State Government and Family Support: From Marginal to Mainstream." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.
- Caldwell, Cleopatra Howard, Angela Dungee Greene, and Andrew Billingsley. "Family Support Programs in Black Churches: A New Look at Old Functions." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.
- Carnegie Corporation of New York. *Starting Points: Meeting the Needs of Our Youngest Children*, 1994.
- Casey Journalism Center for Children and Families. *Covering Children*. Report from the conference, "The American Family: A Tradition Under Siege." College Park, Md.: Casey Journalism Center, University of Maryland, 1994.
- Crowson, Robert I., and William Lowe Boyd. "Coordinated Services for Children: Designing Arks for Storms and Seas Unknown." *American Journal of Education*, vol. 101 (1993).
- Daro, Deborah, and Richard J. Gelles. "Public Attitudes and Behaviors with Respect to Child Abuse Prevention." *Journal of Interpersonal Violence*, vol. 7, no. 4 (1992).
- Dryfoos, Joy G. *Full-Service Schools: A Revolution in Health and Social Services For Children, Youth, and Families*. San Francisco, Ca.: Jossey-Bass, 1994.
- Families and Work Institute. "Comparative Analysis of Work-Family Programs in Major Corporations." In *The Corporate Reference Guide to Work Family Programs*. New York: Families and Work Institute, 1991.
- . *Employers, Families, and Education: Facilitating Family Involvement in Learning*. New York: Families and Work Institute, 1994.
- Farrow, Frank. "Family Support on the Federal Policy Agenda." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and

- Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.
- Fruchter, Norm, Anne Galletta, and J. Lynne White. "New Directions in Parent Involvement." *Equity and Choice*, vol. 9, no. 3 (1993).
- Galinsky, E. and Friedman. *Education Before School: Investing In Quality Child Care*. New York: Families and Work Institute, 1993.
- Greenawalt, C. E. II. "Educational Outreach Programs." In *Educational Innovation: An Agenda to Frame the Future*, ed. C. E. Greenawalt. Lanham: University Press of America, 1994.
- Griffith, Jeanne E. *The Children of Teenage Mothers*. Congressional Research Service, report no. 87-94 EPW, 1987.
- Henderson, Anne T., and Nancy Berla. *A New Generation of Evidence: The Family Is Critical to Student Achievement*, 1994.
- Kagan, Sharon L. *Defining America's Commitments to Parents and Families: An Historical-Conceptual Perspective*, April 1994.
- . "Defining and Achieving Quality in Family Support." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.
- . "On Building Parental Competence: The Nature of Contracts and Commitments." In *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.
- Kagan, Sharon L. and Nancy Cohen. *Report of the Quality 2000 Initiative*. New Haven: The Bush Center in Child Development and Social Policy at Yale University, forthcoming.
- Kellaghan, T., K. Sloan, B. Alvarez, and B.S. Bloom. "The Effectiveness of Family-Intervention Programs." In *Home Environment and School Learning: Promoting Parental Involvement in the Education of Children*. San Francisco, Ca.: Jossey-Bass, 1993.
- Kessler, Suzanne. *The Parenting Program at Bedford Hills Correctional Facility: Interview with Judy Clark*, 1995, unpublished.
- Legters, Nettie and Robert Slavin. *Elementary Students At Risk: A Status Report*. Center for Research on Effective Schooling for Disadvantaged Students. College Park, Md.: Johns Hopkins University, 1994.
- Morrill, W. A. "Overview of Service Delivery to Children." *The Future of Children*, vol. 2, no. 1 (1992).

National Center for Educational Statistics. "Youth Indicators 1993: Trends in the Well-Being of American Youth." U.S. Department of Education, publication number NCES 93-242, October 1993.

National Education Goals Panel. *The National Education Goals Report: Building a Nation of Learners 1995*, vol. 1. Washington, D.C.: United States Government Printing Office, 1995.

Olds, David. "Promising Preventive Interventions During Pregnancy, Infancy, and Early Childhood." In *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.

Pittman, K. J., with M. Wright. *A Rationale for Enhancing the Role of the Non-School Voluntary Sector in Youth Development*. Report prepared for The Carnegie Council on Adolescent Development Task Force on Youth Development and Community Programs. Washington, D.C.: Center for Youth Development and Policy Research, Academy for Educational Development, 1991.

Population Reference Bureau. *The Challenge of Change: What the 1990 Census Tells Us About Children*, 1992.

Ramey, Craig T., and Sharon Landesman Ramey. "Home Visiting Programs and the Health and Development of Young Children." *The Future of Children*, vol. 3, no. 3 (Winter 1993).

Rice, Norman B. "Local Initiatives in Support of Families." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.

Rodriguez, Gloria G. "Avance Family Support and Education Program." *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.

Sherman, Arloc. *Wasting America's Future: The Children's Defense Fund Report on the Costs of Child Poverty*. Boston: Beacon Press, 1994.

Sweeney, Camille. "Portrait of the American Child, 1995." *The New York Times Magazine* (October 9, 1995).

Takanishi, Ruby. "Parenting Adolescents: What Legislators Can Do to Support Families." *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.

U.S. Bureau of the Census, Economics and Statistics Administration. *Statistical Abstract of the United States, 1994*. 114th ed. U.S. Department of Commerce, 1994.

U.S. Department of Education. *Strong Families, Strong Schools: Building Community Partnerships for Learning*, September 1994.

U.S. Department of Health and Human Services. *Child Health USA '93*, publication number HRSA-MCH-94-1, March 1994.

Vinovskis, M.A. "Family and Schooling in Colonial and Nineteenth-century America." *Journal of Family History*, vol. 12, no. 1, (1987).

Weiss, Heather B. *A Brief Overview of Contemporary 0-3 Parent Education and Family Support Programs*, 1994.

———. "Home Visits: Necessary But Not Sufficient." *The Future of Children*, vol. 3, no. 3 (Winter 1993).

———. "Building Villages: Lessons from Policy Entrepreneurs." In *Visions of Entitlement, The Care and Education of America's Children*. Ed. Mary A. Jensen and Stacie G. Goffin. Purchase, N.Y.: State University of New York, 1993.

Young, Kathryn. "Education for Parenting." Paper presented to the Carnegie Corporation of New York Conference on Scaling Up Family Support and Parent Education, November 16-17, 1994.

Zuckerman, Barry, and Berry T. Brazelton. "Strategies for a Family-Supportive Child Health Care System." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.

APPENDIX A

AGENDA

PARENT EDUCATION AND FAMILY SUPPORT: OPPORTUNITIES FOR SCALING UP November 16–17, 1994

WEDNESDAY, NOVEMBER 16, 1994

- PLACE:** Carnegie Corporation of New York
437 Madison Avenue
New York, New York 10022
- 12:00–1:00 p.m.** Lunch
- 1:00–1:30 p.m.** Welcome and Overview - David A. Hamburg
- 2:00–2:30 p.m.** Parent Education and Family Support: Lessons from Existing Initiatives - Heather Weiss
- 2:30–3:30 p.m.** Discussion
Moderator: David A. Hamburg
- 3:30–3:45 p.m.** Break
- 3:45–4:15 p.m.** Parent Education and Family Support: Illustrations from Mainstream Institutions - Kathryn Taaffe Young
- 4:15–5:15 p.m.** Discussion
Moderator: David A. Hamburg
- 6:30–8:30 p.m.** Informal Gathering and Dinner
The New York Palace
The Library and Drawing Room ~ 3rd floor

THURSDAY, NOVEMBER 17, 1994

8:00–8:30 a.m. Continental Breakfast

8:30–10:30 a.m. Linking Parent Education and Family Support to the Service Sectors

Moderator: Vivien Stewart

- Child Care
- Lynn Kagan
- Education
- Gordon Ambach
- Health
- Karen Davis
- Welfare
- Gary Stangler

Discussion

10:30–10:45 a.m. Break

10:45 a.m.–12:30 p.m. New Opportunities Within Mainstream Institutions

Moderator: Kathryn Taaffe Young

- Churches
- Reverend Carolyn Bullard-Zerweck
- Laura Dean Ford Friedrich
- Media
- Larry Kutner
- Ann Pleshette-Murphy
- Business
- Betty Southwick
- Deborah Stahl

Discussion

12:30–1:30 p.m. Lunch

1:30–3:30 p.m.

The Role of Government

Moderator: Michael H. Levine

- State
 - Con Hogan
 - Patrick McCarthy

- Federal
 - Olivia Golden
 - Terry Peterson

Discussion

3:30-4:30 p.m.

Mapping Strategies for Scaling Up Parent Education and Family Support

Moderator: Vivien Stewart

- Judy Jones

4:30 p.m.

Meeting Adjourned

APPENDIX B

LIST OF PARTICIPANTS

Parent Education and Family Support: Opportunities for Scaling Up November 16-17, 1994

1. Karen Alexander, Ph.D.
Psychologist
Bush Center in Child Development and Social Policy
Yale University
New Haven, Connecticut
2. Gordon Ambach
Executive Director, Council of Chief State School Officers
Washington, D.C.
3. Karen Bell
Associate Director of Child and Family Health
National Center for Children in Poverty
Columbia University
New York, New York
4. Leslie Mitchel Bond
Director, Healthy Families America
National Committee to Prevent Child Abuse
Chicago, Illinois
5. The Reverend Carolyn Bullard-Zerweck
Program Associate for Witness and Service
Greater Dallas Community of Churches
Dallas, Texas
6. Karen Davis, Ph.D.
Executive Vice President, The Commonwealth Fund
New York, New York
7. Frank Farrow
Director, Children's Services Policy
Center for Study of Social Policy
Washington, D.C.
8. Laura Dean F. Friedrich, M.Ed.
Director, Church/Community Consultation Services
CHILDSERV
Park Ridge, Illinois

9. Ellen Galinsky
Co-President, Families and Work Institute
New York, New York
10. Stacie Goffin, Ed.D.
Senior Specialist
Ewing Marion Kauffman Foundation
Kansas City, MO
11. Olivia A. Golden, Ph.D., M.A.
Commissioner, Administration on Children, Youth, and Families
United States Department of Health and Human Services
Washington, D.C.
12. Margaret A. Hamburg, M.D.
Commissioner of Health
New York City Department of Health
New York, New York
13. Ruby P. Hearn, Ph.D.
Vice President, Robert Wood Johnson Foundation
Princeton, New Jersey
14. Cornelius Hogan
Secretary, Agency of Human Services
Waterbury, Vermont
15. Judith E. Jones
Chairperson, Council of Advisors
National Center for Children in Poverty
School of Public Health
Columbia University and
Director of the Free to Grow Program
New York, New York
16. Sharon Lynn Kagan, Ed.D.
Senior Associate, Bush Center in Child Development
and Social Policy
Yale University
New Haven, Connecticut
17. Herant Katchadourian, M.D.
Professor, Psychiatry and Behavioral Sciences
Program in Human Biology
Stanford University
Stanford, California

18. Larry Kutner, Ph.D.
Journalist and Author
New York, New York
19. Shawn LaFrance
Program Officer, The Commonwealth Fund
New York, New York
20. Margaret E. Mahoney
President, The Commonwealth Fund
New York, New York
21. Patrick McCarthy, Ph.D.
Senior Associate, Child and Adolescent Health
The Annie E. Casey Foundation
Baltimore, Maryland
22. Ann Pleshette Murphy
Editor-in-Chief
Parent Magazine
New York, New York
23. Barbara Peters
The Partnership Group
New York, New York
24. Terry K. Peterson, Ph.D.
Counselor to the Secretary
United States Department of Education
Washington, D.C.
25. Edward Pitt
Director, Male Involvement Project
Families and Work Institute
New York, New York
26. Gloria G. Rodriguez, Ph.D.
President and Chief Executive Officer
Avance Family Support and Education Program
San Antonio, Texas
27. Betty J. Southwick
Director of Program Development
Work/Family Directions
Boston, Massachusetts

28. Deborah Stahl
Director, Family Care Development Fund
AT&T
Morristown, New Jersey
29. Gary Stangler
Director, Missouri Department of Social Services
Jefferson City, Missouri
30. Layla P. Suleiman
Associate Director of Programs
Family Resource Center
Chicago, Illinois
31. Cathy Trost
Director, The Casey Journalism Center for
Children and Families
College of Journalism
University of Maryland
College Park, Maryland
32. Heather Weiss, Ed.D.
Director, Harvard Family Research Project
Graduate School of Education
Harvard University
Cambridge, Massachusetts
33. Susan N. Wilson
Executive Director, Network for Family Life Education
Center for Social and Community Development
Rutgers University
New Brunswick, New Jersey
34. Mildred M. Winter
Executive Director
Parents As Teachers National Center, Inc.
St. Louis, Missouri

~ *Carnegie Corporation of New York Staff*

1. David A. Hamburg, President
2. Barbara D. Finberg, Executive Vice President
and Program Chair, Special Projects Committee
3. Vivien Stewart, Senior Advisor to the President and
Program Chair, Education and Healthy Development of Children and Youth
4. Michael H. Levine, Program Officer
Education and Healthy Development of Children and Youth
5. Gloria Primm Brown, Program Officer
Education and Healthy Development of Children and Youth
6. Karin P. Egan, Program Officer
Education and Healthy Development of Children and Youth
7. Anthony W. Jackson, Program Officer
Education and Healthy Development of Children and Youth
8. Kathryn Taaffe Young, Director of Studies
Task Force on Meeting the Needs of Young Children
9. Antony Ward, Executive Director
Task Force on Learning in the Primary Grades
10. Fred M. Hechinger, Senior Advisor
11. Susan V. Smith, Program Associate
Education and Healthy Development of Children and Youth
12. Nidia Marti, Administrative Assistant
Education and Healthy Development of Children and Youth
13. Bonnie J. Piller, Secretary
Task Force on Meeting the Needs of Young Children
14. Kathleen Sheridan, Secretary
Education and Healthy Development of Children and Youth

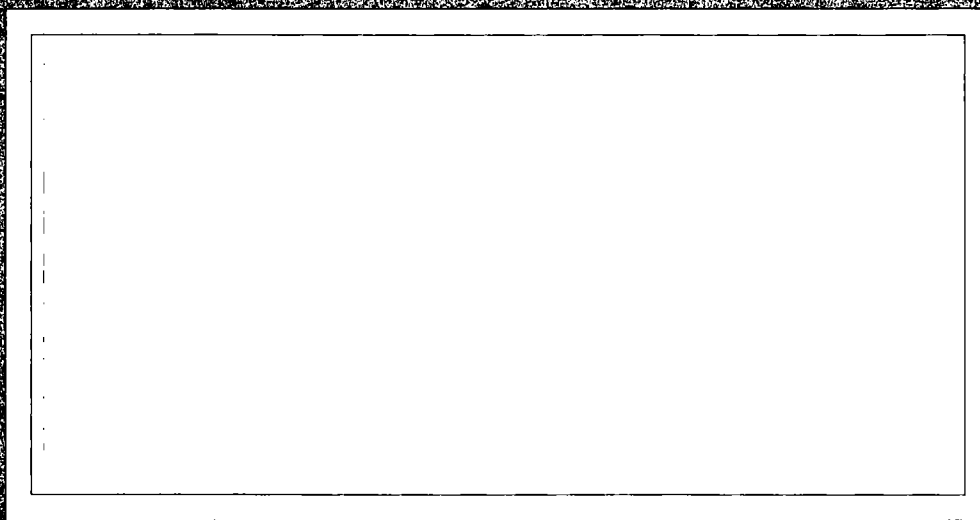
~ *Rapporteur*

15. Rima Shore
Brooklyn, New York

~ *Meeting Reporter*

16. Victoria McLaughlin
Miller Reporting

Carnegie Meeting Papers



**FAMILY SUPPORT AND PARENT EDUCATION:
OPPORTUNITIES FOR SCALING UP**

By Rima Shore

**Report of a Meeting Convened
by Carnegie Corporation of New York
November 16-17, 1994**

From time to time Carnegie Corporation supports meetings on issues of importance that may or may not be closely related to its grant programs. Occasionally, reports of these meetings merit public dissemination.

CONTENTS

FOREWORD	<i>i</i>
INTRODUCTION	1
PART I. THE STATE OF THE ART	2
THE PROBLEM: A PATTERN OF NEGLECT	2
Meeting the Needs of Preschool Children	3
Concerns of Parents	4
Research on the Status of Children and Families	5
THE SOLUTION: BUILDING PARENTAL COMPETENCE	6
Local Efforts	6
State-sponsored Efforts	6
Federal Efforts	6
Types of Family Support Programs	7
Examples of Family Support Programs	9
IMPACT OF FAMILY SUPPORT AND PARENT EDUCATION: THE EVIDENCE ..	11
THE CHALLENGE: MOVING FROM PROGRAMMATIC TO SYSTEMIC EFFORTS	12
PART II. LESSONS LEARNED	14
THE MAJOR SERVICE SECTORS	14
Child Care	14
School-based Programs	15
Welfare	17
Health	17
Criminal Justice	18
MAINSTREAM INSTITUTIONS	19
Faith Institutions	19
Business	21
The Media	22
GOVERNMENT	23
Federal Government	23
State Governments	24
Local Governments	25

PART III. GOING TO SCALE	27
DEFINING "SCALING UP"	27
CREATING SYSTEMS OF SERVICES	28
SCALING UP PARTICIPATION	28
SCALING UP EVALUATION	29
LESSONS LEARNED FROM CURRENT EFFORTS	30
FOCUS ON QUALITY	31
ENDNOTES	33
REFERENCES	36
APPENDIX A: Agenda	
APPENDIX B: List of Participants	

FOREWORD

Parenthood is a very big job — a huge investment of time, energy, and sustained attention to childraising; and a great learning experience. But the process is far from simple — and now it is more complicated than ever.

In the United States, the structure and function of families have undergone profound changes in just the past thirty years. Some of these changes represent new opportunities and tangible benefits. Others place the well-being of children in such jeopardy as to pose a problem for the entire society. One striking change from the perspective of child development is the widespread entry of mothers of preschool and school-age children into the paid workforce — now reaching about 60 percent. Another change is the growth of teenage parenthood. Although the birthrate for adolescents has leveled off, each year teenagers give birth to nearly half a million babies. Yet another drastic change is the large number of children growing up with only one parent; indeed, most American children today spend at least part of their childhood in a single-parent family.

By and large, young people moving toward parenthood today are far less experienced in the care of children than were their grandparents; they spend less time with their children than previously; and a majority of parents report they are less willing than were their parents to make key sacrifices for the next generation.

However much the American family has been transformed in the latter twentieth century, it is still the fundamental unit responsible for the health, education, and general well-being of children. Whatever has happened to it, the family is still the central organizing principle of the society. But families do not function in isolation. To be successful, they need an appropriate social environment — one that provides supportive social networks, a firm sense of community, mutual aid, and a feeling of belonging.

In view of the drastic family dislocations of recent decades, the traditional sources of family support have been seriously weakened. Increasingly, other institutions and organizations of society are stepping in with programs to help prepare young people for responsible parenthood, build parental competence, and strengthen the family through new supportive systems. The potential of these programs to fill in the gaps and help meet the basic needs of families and children is enormous. But they must become more widely available.

In November 1994, Carnegie Corporation drew together a group of experienced professionals in the domains of parent education and family support to review the experience of programs offered by schools, health care institutions, faith organizations, the private sector, nonprofit organizations, and government to strengthen parents' ability to care for themselves and their children and to consider the requirements for "scaling up."

We are most grateful for the participation of these experts over two days of intensive discussion. We further thank Rima Shore for preparing this extremely fine report synthesizing

the proceedings and the relevant literature, and Michael Levine, program officer in the Corporation's Children and Youth program, for overseeing the development of the report. Kathryn Taaffe Young, senior program officer at Commonwealth Fund, played an important role in organizing the conference. It is our hope that the report will stimulate serious thought and practical action on ways to bring parent education and family support to all who need it.

David A. Hamburg, President
Carnegie Corporation of New York

FAMILY SUPPORT AND PARENT EDUCATION: OPPORTUNITIES FOR SCALING UP

By Rima Shore

Report of a Meeting Convened
by Carnegie Corporation of New York
November 16-17, 1994

Most Americans live and raise children in family units. In fact, the United States population encompasses more than 67 million families with children under the age of eighteen.¹ To be sure, these families vary in structure, size, and self-description. But to a great extent people in every sector of American society are recognizing that the conditions and experiences that most directly affect children's lives are embedded in the contexts of families. Decision makers are acknowledging that if their policies are to address the urgent needs of children, families must be systematically supported.²

Today, some of the resources traditionally available to young families — the kind of help and skills shared among large extended families and close-knit communities — are no longer within the reach of many Americans. A wide range of institutions and agencies, private and public, have been working to fill the void. They now offer an array of services and interventions designed to strengthen families and to impart the knowledge and skills that can help parents fulfill their role with greater confidence and competence.

On November 16-17, 1994, Carnegie Corporation of New York convened a meeting to discuss the lessons learned from existing initiatives and to examine strategies for scaling up successful efforts. This meeting gathered individuals with expertise in some aspect of family support or parent education: independent researchers, academics, government policymakers, decision makers from the various service sectors, and leaders representing faith organizations, the media, and business. This report compiles the ideas, facts, trends, conclusions, and recommendations that emerged at the meeting, drawing as well on background documents and relevant data.

Part I of this report outlines the case for strengthening families, provides a broad overview of existing family support and parent education efforts, summarizes findings on the effectiveness of these programs, and discusses the challenge of moving from programmatic to more systemic efforts. Part II summarizes the lessons learned from existing initiatives in every sector of American life, including the major service sectors (child care, education, health, welfare, and criminal justice); mainstream institutions (faith institutions, business, and the media); and government (federal, state, and local). Part III presents the challenges of going to scale.

PART I. THE STATE OF THE ART

THE PROBLEM: A PATTERN OF NEGLECT

The springboard for the discussion of scaling up family support programs was the 1994 report issued by Carnegie Corporation of New York, *Starting Points: Meeting the Needs of Our Youngest Children*. *Starting Points* presented the scientific evidence that has accumulated over the last decade confirming what parents and teachers have long suspected — that children's early care and environment have a decisive, lasting effect on their later development, including not only their physical development but also their intellectual and emotional growth. It documented a pattern of neglect that threatens the well-being of young children and of the society they will inherit.

Starting Points found that when women and men are prepared for the opportunities and responsibilities of parenthood, they are more likely to provide the care and create the conditions that promote healthy development. It emphasized that the kinds of knowledge that can help parents give their children a good start in life — knowledge about child development and child health, for example — does not come naturally; nor is it always available from relatives or neighbors. For this reason, virtually all parents can benefit from the kinds of information and guidance that help them understand and respond to their children's physical, intellectual, and emotional growth, particularly in the first three years of life when development proceeds at such a dizzying pace. This finding is borne out by the fact that, across the nation, families at all income levels and in all kinds of communities — urban, suburban, and rural — are taking advantage of existing family support services.³

Meeting the Needs of Preschool Children

While parents of school-age children can certainly profit from family support, parents of infants and toddlers may benefit the most. And since the number of children under age five has increased sharply in recent years, rising by 18.6 percent from 1980 to 1993, more and more parents are struggling to meet preschoolers' needs.⁴ At times, those needs seem relentless. Compared to the young of other species, human children are remarkably helpless. The very survival of the human species therefore hinges on adequate parenting throughout an extended childhood (although parents who are trying to comfort a wailing newborn at three A.M. or reason with a thrashing three-year-old who will not get into her car seat may have more doubts about their own survival than that of their child).

And yet, parents must do much more than safeguard their children's (and their own) physical health and safety; they must also provide for their emotional, intellectual, social, and spiritual development and well-being. As their children grow, parents must continue to provide a sense of safety and structure, belonging, self-esteem and self-reliance, intimacy and relatedness, and competence.⁵

Parents must accomplish all of this while running busy households and holding down jobs. Today, approximately 60 percent of mothers are in the work force. Half of those have babies under one year of age. The number of mothers of preschoolers in the labor force has doubled over the last quarter century. In 1993, there were 9.6 million working women with preschool children.⁶

Parenthood can overwhelm even the most mature mothers and fathers; it is certainly stressful for the nation's large number of very young parents. Very recently, the birthrate for adolescents has decreased slightly, although the problem remains serious. Each year teenage mothers give birth to nearly 500,000 babies. Today, 3.3 million children live with adolescent mothers. These young mothers have a particular need for parent education and support. They are much less likely than other mothers to take advantage of prenatal care, and those under age seventeen are more likely to have low-birthweight children — with all of the health and developmental problems associated with that condition. In general, children born to teenage parents, especially those living with their mothers alone, appear to be more likely than other children to have continuing health problems.⁷

For all of these reasons, *Starting Points* recommended that community-based parent education and support be available on a voluntary basis to all parents with children under age three. It called for programs that increase understanding of child development and parent-child relationships, provide models of parenting, and teach parenting skills. The report stressed the importance of continuity — maintaining ongoing relationships with parents; flexibility — creating services and supports geared to the strengths, styles, and needs of individual families; and outreach — linking families with other parents and with community resources.

Concerns of Parents

Few jobs are more vital to the well-being of children and society as a whole than parenthood; yet few jobs are undertaken with so little solid information or training. Many Americans have more resources in their homes for operating a new appliance, such as user manuals, on-screen instructions, or toll-free customer support numbers, than for coping with a new baby.

This might not be alarming if parents and children were faring better. But participants at Carnegie Corporation's meeting pointed to numerous, well-documented signs that many American families are in crisis and that the trajectory toward trouble may be set even before birth. Some of this evidence comes from parents themselves. Torn between the need or desire to work and to care for their children, many mothers and fathers are worried — sometimes guilt-ridden — that they do not have more time, more energy, more patience. Two-thirds of employed parents with children under eighteen say that they do not have enough time for their children.⁸ More than half — 55 percent — say that they are not doing as good a job at childrearing as their own parents did.⁹

American parents are hungry for information and advice, a fact that has not been lost on publishers, which have stocked bookstore shelves with scores of titles on pregnancy and childbirth, child health and development, and childrearing. Parenting magazines, numbering close to one hundred separate publications, are thriving. Many parents are also going on-line, perusing electronic bulletin boards for advice about teething or toileting, finding child care, or coping with sleep deprivation. A measure of parents' desperation is their eagerness to call helplines. A single 800 number supported by corporate employers has been called by more than two million parents. Even some of the corporate decision makers who established the helpline have expressed surprise that so many parents are willing to rely on the guidance of

strangers. In short, vast numbers of Americans, representing every socioeconomic and ethnic group, are worried about their parenting and are eager for information and support.

Research on the Status of Children and Families

Over the last two decades, research on the status of children and families in the United States has confirmed parents' fears: that in too many cases our children's most basic needs are not being met in their family settings. The data gathered in *Starting Points* indicate that despite a great deal of knowledge about caring for young children the nation is not yet able to assure their physical safety or survival. The risk to children's health and safety begins before birth. In 1990, one in four pregnant women received inadequate prenatal care, and the number of mothers who receive virtually no care during pregnancy is rising.¹⁰ As a result, the United States has a worse low-birthweight rate than thirty other nations and a worse infant mortality rate than nineteen. Childhood injuries are the leading cause of death among children ages one through four. Many of these injuries are accidental; too many are not. In 1990 more than 2.5 million children were reported as being abused or neglected in the U.S. One in three victims of child abuse was a baby less than a year old.

Millions of other small children may be physically safe and healthy but may face other kinds of risks that jeopardize their emotional, social, and cognitive development. Recent studies have found that the vast majority of child care programs in this country — 70 to 80 percent — are of mediocre or poor quality. The quality is even worse for infants and toddlers. The services available are too fragmented and too poorly funded to provide adequate coverage or quality to meet the needs of an expanding and changing preschool population.¹¹

These and other problems cut across all social and economic strata but are more common among children of poor, teenaged, and single parents and among women who have rapid successive pregnancies. Many of these problems can be linked to poverty. For example, children from low-income homes are at significantly higher risk for infant mortality, low birthweight, physical or mental disabilities, fatal accidents, and common health problems such as asthma, frequent diarrhea, pneumonia, or decayed or missing teeth.¹² These findings are especially sobering in view of the fact that the number of children living in poverty is large and growing. Today, one in four infants and toddlers under the age of three — nearly 3 million children — lives in a family with an income below the federal poverty level.

THE SOLUTION: BUILDING PARENTAL COMPETENCE

The challenge posed by *Starting Points* is to identify, replicate, and expand programs and services that build parental competence and strengthen families. The group that gathered in November 1994 took up this challenge.

Most individuals and institutions committed to family support and parent education envision a future in which these services are available to every family that wants or needs them. While that remains a distant goal, enormous strides have been made over the last decade.

Local Efforts

A national database of family support programs from the Family Resource Coalition, which is not exhaustive, lists hundreds of local programs. Surveys by the Robert Wood Johnson Foundation have documented the existence of more than 2,000 organizations that characterize their mission as providing family support.

State-sponsored Efforts

In the mid- to late 1980s, statewide parent support initiatives were launched in various parts of the country, including Missouri's Parents as Teachers program, Maryland's Friends of the Family and Family Support Centers, Connecticut's Parent Education and Support Centers, and Minnesota's Early Childhood and Family Education Program. These programs differ in their content, structure, staffing, and relative degrees of central authority and local autonomy. Maryland has primarily targeted teen parents and their families; the other three states offer services to all parents with young children. But each of them offers a basic menu of core services, and all allow some local flexibility.¹³ These and other programs constitute persuasive evidence that family support principles can be translated into effective, politically viable policies at the state level.¹⁴ A recent typology of family support programs documented state-sponsored family support programs in twenty-one states. These large-scale efforts provide services at numerous sites, with a view toward eventually offering them on a statewide basis.¹⁵

Federal Efforts

Several federal educational initiatives aim to strengthen parent involvement. One, the Even Start Program (part of the Elementary and Secondary Education Act of 1965), helps mothers

and fathers develop parenting and literacy skills while providing good-quality early childhood programs. Recent non-legislative activities undertaken by the Clinton administration have included building a Family Involvement Partnership for Learning, which pulls together groups from many sectors to find ways to deal with family support issues.

Types of Family Support Programs

Family support and parent education programs have many sponsors and funders. They may be organized by faith organizations, schools, hospitals, or health clinics. They may include child care centers, parent hot lines, visiting nurse services, mental health centers, pediatric intervention teams, correctional facilities, Big Brothers or Big Sisters programs, crisis centers, community action agencies, employment and training centers, and dozens of other organizations. These agencies and programs have different histories, grow out of different disciplines, and draw their staffs from different educational backgrounds. For this reason, they conceptualize their work differently. The common link is that the services they provide are designed to strengthen parents' ability to care for themselves and their children.

Meeting participants noted that people tend to be most receptive to information or advice at times of decision or transition. For this reason, the timing of family support/parent education services is crucial. Three key transition points for young parents and young children are birth and the perinatal period; the initial adjustment to out-of-home care; and the transition to school. Most family support programs target at least one of these transitions. Depending on the timing and nature of the intervention, programs may be home-based, institution-based, or multifaceted.

Home-based programs. Rooted in the friendly visitor tradition of the last century, the concept of home visitation rests on the premise that to foster the early development of children, particularly at-risk children, one needs to work with parents in their home, observing their interactions with their child in a natural setting and helping them to create an environment from the outset that will support the child's healthy development. The services may be offered through community-based organizations, preschools, health clinics, or neighborhood family-child centers. The visitors may be nurses, social workers, or parent aides.

Some family support programs use home visits as the sole or main type of intervention; in fact, these programs appear to be proliferating.¹⁶ They may vary in terms of the goals they are pursuing, the particular information or skills they stress, the frequency and duration of

visits, and the characteristics of the visitors and the clients. But most home visiting programs focus on parents' ability to provide the basic requirements for food, shelter, and health care and to meet children's emotional, intellectual, and social needs. They teach and demonstrate how to enhance parent-child interactions, create a safe, appropriate home environment, and access health care and other services.

Because they occur in the home where family life takes place, home visitation programs offer many advantages, which were discussed in some depth at the November meeting. Home visits allow clients to receive services without traveling to an office or arranging for child care. They encourage a very broad view of a family and place childrearing practices in the context of their particular community and circumstances. By demonstrating their willingness to go to the family's turf, visitors build a trusting relationship and create a "therapeutic alliance" — a supportive, ongoing relationship that fosters parents' growth. In all of these ways, home visits can potentially shift the ecology of family life, helping parents make the kinds of changes that they themselves want to make.

Meeting participants also observed that home visits also have some drawbacks. In high-crime areas, they may pose dangers to visitors. They may also be perceived as intrusive or intimidating by parents, who may not want to expose their home lives to the scrutiny of strangers. The substance, scope, or quality of visitors' work may be difficult to supervise. In addition, home visits often present professional dilemmas, such as how to establish trust without encouraging dependency. Some organizations now make use of "personal visits," which may take place at home or at a church, a neighborhood family center, a restaurant, or wherever the family and the visitor can get together.

Institution-based programs. Other family support programs are based in institutions, such as child care centers, schools, community colleges, or health clinics. These institutions may integrate family support with their core services, either making their existing services more family supportive or adding a family support component to their spectrum of services. Among the more intensive efforts are school-based programs for young mothers and their babies. These programs usually supplement instruction, provided in appropriate classroom settings, with personal guidance and mentoring from teachers, nurses, and social workers. During pregnancy, the students receive routine prenatal care and are under the supervision of nurses. The school curriculum includes subjects like planning for self-sufficiency and delaying subsequent pregnancy. This type of program has been shown to increase the

likelihood of healthy pregnancies and having healthy infants, while reducing the risk of welfare dependence. Students who begin the program early in their pregnancy show the best results.¹⁷

Multifaceted programs. Discussion at the Carnegie Corporation meeting reflected the widespread conviction among family support advocates that neither home-based services nor institution-based services, as stand-alone strategies, are sufficient. A decade of research indicates that the most effective efforts take a more comprehensive approach, providing a range of services at home and in the community. Some of these programs, particularly those sponsored by state governments, are large in scope; others are more limited. But most provide a basic menu of core services, including prenatal care and counseling; parent education covering child development and a wide range of parenting skills; home visits; drop-in centers; parent support groups; structured playtime for parents and children; information and referrals; and counseling. Some programs also provide parent employment training and counseling, health care, and child care for infants and toddlers.

Examples of Family Support Programs

Among the larger, more well-established family support programs are the following:

Parents As Teachers (PAT). A program for parents of children up to three years of age, PAT is the largest comprehensive family support program in the nation. The PAT model emphasizes regular home visits and individual contact with the parents. The state of Missouri requires every school district to offer the program. An evaluation of PAT in thirty-seven Missouri school districts found that participating three-year-olds scored above the national norms on language and on school-related success.

Healthy Families America (HFA). This Chicago-based program adapted the innovative Healthy Start initiative that originated in Hawaii a decade ago. Established in 1992 by the National Committee to Prevent Child Abuse, in partnership with Ronald McDonald House Charities, HFA is the nation's fastest-growing family support program. It has spread to more than 170 communities in twenty-nine states and the District of Columbia. HFA provides home visitor services to new parents and stresses continuing staff education and credentialing. It has implemented a quality assurance plan for all sites and is now developing a family support research network.

Birth to Three. Founded in 1978 in Eugene, Oregon, Birth to Three brings new parents together to share experiences, learn about child development, form a support network, and gain access to community resources. Programs are community- or school-based and are run by professional staff assisted by volunteers. The program is open to all families in Oregon and, to date, has involved more than 10,000 families.

Home Instruction Program for Preschool Youngsters (HIPPY). HIPPY serves parents of four- and five-year-olds in over two hundred communities in twenty-two states. Parent aides visit participating families at home twice a month over a two-year period; they present and model a curriculum of activities for parents to follow with their children. Twice-monthly group meetings led by a professional program coordinator help parents share educational approaches to use with their children. A study that followed participating children through their school careers until grade ten concluded that HIPPY has a positive, sustained impact on achievement and adjustment in school.

Avance. Founded in Texas in 1973, Avance serves low-income Mexican American families and their young children. It offers classes for mothers and fathers, day care for the children, and in-home visits from educators. Evaluations show that as a result of their participation in the program, parents provide more educationally stimulating and emotionally supportive home environments for their children, use less restrictive and punitive discipline, and make greater use of community resources.

MegaSkills Program. This is a less intensive model that offers workshops for parents to help them carry out learning activities at home. It has trained more than 4,200 workshop leaders from forty-five states. Evaluations of children whose parents have received MegaSkills training show improvements in the children's achievement test scores, attendance, time spent doing homework, and time spent with parents.

Minnesota Early Learning Design (MELD). This Minneapolis-based organization helps new parents improve their child-rearing skills and promotes children's development by disseminating training and curriculum programs that have been adopted in more than 150 educational and social agencies in twenty-five states. MELD's parenting education programs have been used successfully to support the healthy growth and development of children with disabilities, new immigrants, and adolescent mothers. Research on these programs has revealed reduced family isolation and improved parenting skills.

Parent-Child Centers. This initiative originated in the 1960s as a key component of the Head Start program. The program was cut back dramatically in the 1970s but has grown slowly over the past two decades. In 1992 there were 106 centers serving roughly 20,000 children under the age of three. The program combines home visits beginning during pregnancy; activities geared to teen parents and their families; high-quality child care; and early intervention for children with special needs.

IMPACT OF FAMILY SUPPORT AND PARENT EDUCATION: THE EVIDENCE

Research conducted over the last three decades suggests that a significant portion of the problems afflicting the nation's children can be tied to parental behavior — in particular, the health-related behaviors of pregnant women — and to the quality of care that parents provide to their children.¹⁸ The question remains: Can family support and parent education programs strengthen parents' ability to care for their children and thus improve results for children? The evidence is promising but not conclusive. Comprehensive, multifaceted family support programs are difficult to evaluate: they encompass many variables, and they try to gear services to the needs of individual families. Because different programs work with children of different ages and target different kinds of families, it is difficult to compare them. For these reasons, there has been little systematic research on their effectiveness.

On the other hand, evaluations of more narrowly focused programs — those stressing home intervention and parent education — indicate that their effects can be impressive. Effective programs begin with prenatal care; they are comprehensive, intensive, and long lasting. Such programs appear to be particularly helpful to low-income, single, adolescent mothers, whose children are at high risk for academic failure and a multitude of other problems. Research shows that it is possible, although difficult, to improve results for these children while reducing the risk of welfare dependence, antisocial behavior problems, and violence.¹⁹

Meeting participants noted that home intervention programs appear to be a particularly promising approach. Studies conducted over the last ten years have produced some evidence, based on a small number of high-quality research and demonstration programs and well-evaluated service programs, that regular home visits can enhance children's, and sometimes parents', development. Two large studies conducted in Elmira, New York, and Memphis, Tennessee, suggest that early childhood home visitation services can reduce poor pregnancy

results and dysfunctional caregiving as well as lower the risk of welfare dependence and youth violence among low-income families. Home visitation programs also appear to be cost-effective. One study showed that, by the time they reached age four, children in low-income families who received home visitation from the prenatal period through the second year of life cost the government \$3,313 less than did their counterparts who received no services.²⁰

The research further suggests that the effects of home intervention programs during the preschool years can persist over an extended period. Some longitudinal studies show that IQ gains associated with such programs persist into the elementary school years. These gains do tend to fade after several years, but researchers note that the boost during the crucial “school-readiness” years may contribute to subsequent achievement.²¹

Efforts that focus on helping parents become stronger partners in their children’s learning have been shown to have a significant positive impact on children’s cognitive development, school performance, and social functioning. Numerous studies over the last three decades have shown the promise of programs designed to assist parents of preschool children, including family literacy programs, projects that integrate adult and early childhood education, and family intervention programs designed to help parents become better partners in their children’s schooling.²²

THE CHALLENGE: MOVING FROM PROGRAMMATIC TO SYSTEMATIC EFFORTS

The literature on family support and parent education refers frequently to an evolving family support “movement.” This usage reflects the fact that many researchers and practitioners in the evolving field of family support are joining forces — in professional organizations and publications and at conferences and other public forums — to urge a shift in emphasis from programmatic family support efforts to a more systemic approach. Family support advocates have begun to press decision makers in many spheres of public and private activity to infuse, into their organizations’ policies and practices, a set of family support principles that include: 1) an emphasis on prevention, resulting in programs that do not just treat problems but seek to prevent them; 2) an ecological approach, resulting in programs that take into account the needs and conditions of the child, family, *and* community; 3) a developmental view of parents, resulting in programs that support the growth and learning of parents as well as children; and 4) a belief in the universal value of family support, resulting in programs that can strengthen and empower all kinds of families.²³

Organizations can also infuse into their policies and programs some of the best practices of effective parent education programs, including efforts to establish and maintain ongoing relationships with parents; gear services to the strengths, styles, and needs of individual families; model positive parent-child interactions; teach new parenting skills; increase understanding of child development; provide a network of social support with other parents; and facilitate parents' access to community resources.

The family support "movement" proceeds from the premise that family support and parent education cannot succeed as isolated efforts. In particular, families living in poverty and in conditions of constant stress have urgent needs that stand-alone programs or parenting classes alone cannot meet. To serve these families, parent education and family support programs must be embedded in a coordinated array of community-based services including, but not limited to, health care, child care, literacy classes, and job training.

A number of the larger, more well-established programs have attempted to move in the direction of systemic reform by providing training and technical assistance to community-based agencies or school districts that wish to provide more support to the families they serve.²⁴ Their aim is to move, over time, to a model of family support that encompasses all of the services available in a given locality. In this sense, the family support movement is allied with "coordinated services" efforts in education, which have gained momentum in recent years. Informed by a growing network of advocates and practitioners, the coordinated services movement tends to focus on school-community linkages, envisioning the school as a hub of services — including education, health, recreation, and social services — for all the residents in its vicinity.²⁵

The family support movement seeks to reconfigure delivery systems as well, with an emphasis on services to young families. Existing services derive from multiple antecedents and many disciplines and are supported by many different funding streams.²⁶ The crazy quilt of delivery systems now in place, particularly for poor children, rarely meets the needs of the "whole child" or the "whole family."²⁷ The comprehensive, multifaceted programs that are now operating in many parts of the country have taken strides in that direction, by reaching out to local service providers and helping them to incorporate family support principles into their day-to-day work. But they cannot address directly the obstacles that tend to undermine efforts at coordinating and transforming delivery systems, such as categorical financing, interagency turf battles, and political conflict.

Despite these limitations, comprehensive programs are putting down roots in many parts of the country and offer many opportunities for scaling up family support and moving toward a more systemic approach.

PART II. LESSONS LEARNED

THE MAJOR SERVICE SECTORS

Scaling up family support is not an end in itself. It is, rather, a broad strategy for investing in the next generation and thereby protecting and strengthening the nation. To succeed, the endeavor must engage every sector of American society. With this in mind, the participants at the Carnegie Corporation meeting undertook a sector-by-sector review of efforts to support families, delineating lessons that may inform the process of going to scale. In the process, the group posed two key questions: First, is it possible to take an existing delivery system and, by adding or strengthening family-oriented services, convert it into an effective family support and parenting education program? And second, is it possible to mesh the efforts of numerous sectors into a network of services designed to strengthen families and build parental competence?

Child Care

Most preschool children — by some estimates as many as 98 percent — are in out-of-home child care at some point before they begin kindergarten. Because they have contact with so many families, child care providers are ideally positioned to deliver a variety of family support services. Child care providers may be based in schools, homes, health facilities, or community institutions such as churches. Many of them, wherever they are based, share a commitment to early prevention, a willingness to work with families, and an awareness of the developmental stages of parenting. Some of the larger, better-designed child care programs, such as Head Start, have strong parent involvement components. Many smaller programs and providers also make efforts to support families, particularly through parent education. Some see parent education as part of their mission from the start; others come to parent education as a secondary focus.

For all of these reasons, meeting participants suggested that child care, as a service sector, should be a strong contributor to the process of scaling up family support. A number

of organizations are making active efforts to infuse family support principles into early care and education projects. For example, the Parent Services Project, which seeks to strengthen child care providers' capacity to support parents and families, has attracted both government and foundation funding and is now functioning at more than one hundred sites around the nation.

These efforts are encouraging. Without additional support and resources, however, few child care providers today are in a position to take on new challenges. As *Starting Points* documented, the vast majority of existing preschool programs provide substandard care and lack the funding they need to improve quality. Most cannot hire enough adults in proportion to the children in their care or pay salaries higher enough to attract or retain highly qualified teachers or administrators. Until these hurdles are overcome, child care cannot fulfill its promise as a key provider of family support services.

School-based Programs

Parent education is a process by which one generation transmits values and cultural patterns to another. It begins long before prospective parents make their first prenatal visit. For this reason, schools can play a key role in preparing young people to become good parents. Many Americans are convinced that government, through its schools, should not be in the business of promoting a particular set of values, mores, or lifestyles, and that other institutions, such as faith institutions or community-based organizations, should have more influence in this effort.

Nevertheless, because families tend to be smaller and more isolated than in past decades, and because family life is more pressured, many parents welcome the role that public institutions are playing in parent education, which in public schools is often called "family life education." While a vocal group of conservative parents vigorously opposes family life education, the majority of parents — according to one survey as many as 75 percent — say that they support this trend.²⁸

Parents are not alone. Most state agencies and professional organizations also embrace the notion that children and adolescents should receive age-appropriate family life education and education for parenting. Despite their support, there has been little systematic research on school-based preparation for parenthood. Its prevalence can be described only in the broadest terms: forty-seven states have laws or policies that mandate or recommend some level

of family life or human sexuality education between kindergarten and grade twelve. Of these states, thirty-nine have developed general curriculum guidelines. Few are comprehensive in their coverage of key topics.²⁹

Even so, young people manage to receive little education for parenthood in the public schools. Usually, the topic of parenting is presented only briefly, and only to the upper grades. There are relatively few comprehensive, developmentally oriented family life education programs. Where they do exist, scaling them up has proven difficult because of fiscal constraints as well as political opposition. Moreover, there is little consensus on the content of such programs, and most states leave the specifics up to local school districts and communities. Meeting participants commented that standards, where they have been written, tend to be too prescriptive; they may institute a one-size-fits-all approach that cannot sufficiently accommodate cultural variation or reflect a community's wide spectrum of attitudes and values. Schools may be able to avoid this pitfall by working in close partnership with community-based organizations as they design and implement parenting education initiatives.

Some participants at the Carnegie Corporation meeting predicted that family life curricula would be better accepted if they were redesigned as solidly academic courses in human development or life sciences. In this form, they are less likely to be offered as electives, sacrificed to "back-to-basics" movements, or eliminated as "frills" when budgets are cut. Others observed that programs like family life or human sexuality or even health education remain on the margins of the school curriculum because schools do not test for them. Still others pointed out that parenting education curricula will not be widespread in schools until teachers are given focused, specific preparation to teach them, both in schools of education and in-service programs.

Many educators argue against a stand-alone parenting education curriculum, urging an approach that imbeds preparation for effective parenthood into the overall pursuit of dispositions and behaviors that are desired for children. They say that parent education should not only be built into the formal curriculum; it should be infused as well into extracurricular activities and, indeed, into the ethos of the school itself.

Public schools may also play a role in the provision of family support services. They are, after all, common to every community and can often play a crucial role in bringing together all of the community's stakeholders. In some cases, school buildings are serving as

community centers; in other cases, schools are adopting the “full-service school” model.³⁰ The schools do not provide the services, but they share facilities with other agencies and community-based organizations and become a hub of services. A case in point is the Caring Communities Project in Missouri, which uses the school as the hub of a network for child care providers. The program has been well accepted. It has used the rhetoric of shrinking government and community-based decision making and ownership as the rationale for wrapping services around the school.

Welfare

The 1990s appear to be an opportune time for bold efforts in welfare. Welfare reform has been hoisted high on the national agenda and is likely to remain a critical social and economic issue in the years to come. Because the status of the nation’s children should be more central to the welfare reform debate, any consideration of family support must take this issue into account. According to one meeting participant, who is a government official steeped in the welfare debate, focus groups held around the country indicate a widespread belief that welfare reform efforts should focus on small children.

Missouri is an interesting case in point. The Missouri child welfare system provides parent education, mandating it for those parents in the child welfare system who have a confirmed history of abusing or neglecting their children. At the same time, Missouri offers many other parents a strong incentive to participate in parent education on a voluntary basis. It is the only state where involvement in the Parents As Teachers program counts toward the twenty hours per week of work required to maintain one’s standing in welfare.

Health

As a sector, health care is a very promising delivery system for family support and parent education and can be a vital contributor to any effort to scale up support for parents. It is, after all, an entry point for services or help. Of the 4 million births that take place each year in this nation, the vast majority occur in hospitals or at least in the presence of medical personnel. Moreover, good well-baby care includes periodic visits that provide an opportunity to expand parent education and support. Another strength of the health care system is the therapeutic alliance — a trusting relationship between provider and patient. Finally, the expansion of the health care system and the extension of its role to include counseling parents may be more palatable politically than the expansion of other kinds of services.

These are the pluses. At the same time, there are several factors that may limit the effectiveness of the health care system in providing family support. The growth of managed care and the pressure to contain costs have led to the rapid discharge of new mothers, sometimes within twenty-four hours of giving birth. As a result, an important opportunity is lost to work with parents at a critical time. The same forces have put pressure on pediatricians to move patients through their office at a rapid rate, leaving many questions unanswered and many anxieties unrelieved. There are fewer public health nurses to make home visits to newborns and provide support to parents. And finally, the fragmentation of health services means that a mother's health problems — including stress or depression — may not be treated, even though she takes her child for regular well-baby visits.

The key to scaling up family support, from the viewpoint of health care, is to change incentives in the system so that managed care organizations, such as health maintenance organizations (HMOs), are rewarded for taking on a broader role in relation to families. Since parents value expanded service, it may well prove to be a marketing advantage for these organizations. Over time, the routine provision of parent education and family support may be viewed as a strategy that is in the financial interests of health care providers. A first step is for these organizations to determine which support services that parents really want. Once this is established, health care providers must become more knowledgeable about these services or be able to make appropriate referrals. They must ensure that their personnel, including physicians, have the training they need to support and educate parents.

One innovative effort to infuse parent education into health care delivery has been supported by the New York-based Commonwealth Fund. Known as Healthy Steps for Young Children, this project integrates a parent education component into the basic package of services provided by hospitals and HMOs to families with new children. Healthy Steps seeks to expand pediatric primary care to include information on child development and guidance and support for parents beginning in the late prenatal period and continuing through the first three years of life. The project plans to pilot fifteen or more local initiatives, each a multiyear partnership of the Commonwealth Fund, a local funder, and a local health care provider.

Criminal Justice

Of the 80,000 women incarcerated in the nation's jails and prisons, 76 percent have at least two children. Most were the primary caregivers of their minor children before their incarceration. Many inmates will resume their parenting responsibilities when they are

released from custody, but they will do so under very trying circumstances. Most incarcerated mothers see their children infrequently and in stressful settings. (Male inmates tend to have more frequent contact with their children, because the children's mothers are more likely to arrange visits.) Not only the parents, but also the children, suffer from these constraints. Approximately 1.5 million children have at least one parent who is in prison. Studies have documented the traumatic effects on children of their parents' incarceration. Children of prisoners are five to six times more likely than their peers to become incarcerated later in their lives.³¹

In some places, the criminal justice system has taken up the challenge of providing family support and parent education to inmates and their children. The oldest such program functions at the Bedford Hills, New York, Women's Correctional Facility, which has established a nursery for mothers who give birth while incarcerated, a parenting center, and a children's center for visitors. Bedford Hills also offers a variety of parent education courses taught by qualified inmates. Other correctional facilities across the nation are beginning to create policies and programs that maintain contact between inmates and families, build parental competence, and facilitate family interaction through structured visiting (including extended visits with children). These efforts are only beginning, however.

MAINSTREAM INSTITUTIONS

Faith Institutions

Faith institutions are among the only places in the nation where more than one generation gets together at the same time on a regular basis, providing a natural setting for parent education and family support. From a historical viewpoint, faith institutions are uniquely positioned to play a key role in the effort to scale up successful parent education and family support initiatives.

Until the early twentieth century, churches were the major and sometimes the only institution in the nation that responded to the needs of children, especially those in crisis. Today, with the exception of public schools, congregations serve more children, youth, and families than any other institution in our nation. Many have developed family ministries, equipping lay church members to provide needed family support services, providing self-help support, and offering professional family counseling. While faith organizations usually have physical space and numerous volunteers, they are often strapped for funds. Many of these organizations are competing for smaller and smaller pools of money. Some communities that

lack the resources to support their own parishioners are beginning to tap wealthier congregations, seeking aid or sponsorship.

Recent changes in the church-going habits of many Protestants affect the churches' capacity to provide family support. Today's families look for churches where they will feel comfortable; they do not necessarily seek the denomination connected with their own upbringing. The fastest-growing churches may have no affiliation with a national church body or office. As a result, multiple strategies are needed to reach a large number of congregations efficiently. Good candidates for community planning efforts are interfaith and ecumenical coalitions. They often operate somewhat like a nonprofit but act as an umbrella group representing a number of churches. They sometimes also operate direct service programs — often with great efficiency.

Historically, predominantly black churches have grounded their family support efforts within families and within communities. Until recent decades, predominantly white churches, in contrast, have tended to care for needy children by removing them from the family and community and placing them in residential homes, orphanages, and foster care. Today, black churches remain very active in providing family support and offer huge potential for helping to scale up community-based services.

Nationwide there are at least 75,000 black churches, serving more than 24 million churchgoers. Many of these congregations reinforced their traditional community outreach role in the 1980s as funding for social programs for minorities and the poor dried up. A recent study known as the Black Church Family Project studied a representative sample of 635 black churches and found that two-thirds of them had at least one community outreach program. More than half of these programs address the needs of the family unit.³²

Increasingly, black churches are being asked to anchor services to communities that are in transition. The churches have, to some degree, been responding to these problems and appear to be a ready instrument for immediate transfer from public services to private community-based services. Crucial infrastructure questions must be addressed, however. When a religious community becomes a major provider, the dollar resources are often reduced and issues of quality and evaluation are given short shrift.

Funding is not the only issue. There are many churches, particularly smaller ones, that are very community oriented and would be ready and willing to offer family support, but they do not know how to do it. If they are to play a role in scaling up family support, faith institutions of all kinds need help to build capacity.

Business

The corporate sector's involvement in parent education and family support is a recent phenomenon that has grown out of employers' efforts to help employees arrange for child care. A survey conducted in 1982, for example, found that 600 companies nationwide provided employer-supported child care; by 1990, the number had grown to 5,600 companies. Human resource executives say that the top three reasons for providing family support services are employee morale, recruitment, and retention.³³

Today, the case is growing stronger for helping employees balance their work and family life. Research by companies like IBM and Johnson & Johnson has found that these supports result in a direct, measurable benefit to businesses. Businesses are building a portfolio of success stories. There are many model programs and examples of businesses' successful community investment projects. Indeed, companies are competing with each other to excel in this area. One chief executive officer was recently asked what he would say to a peer who resisted the idea of family support. He answered: "I'd hope he was a competitor and then I'd keep my mouth shut."

Corporations are beginning to engage consultants to advise them specifically on family and workplace issues. This is consistent with the trend toward outsourcing many human resource functions. Some of these consultants began as child care resource and referral agencies — the main concern of business ten years ago — and then developed a much broader focus, helping corporations create more family-friendly policies and environments and change their business culture to introduce the flexibility needed by working parents. Numerous companies have asked consultants to help them integrate into their employee benefit packages a range of family support services, such as prenatal classes, parenting seminars, and hotlines. Many corporations also offer referral services, but a few are concluding that it is not enough to refer employees to care in the community, because there may not be enough care, or the quality of care may not be good enough. These companies have begun making investments in the long-term process of building the supply and increasing the quality of local services.

These trends are encouraging, but meeting participants emphasized that family support is by no means universal in the business community. Large companies tend to address family concerns, but many employers remain relatively unresponsive to parents' problems or needs. Moreover, in this period of corporate downsizing, the contingent workforce, made up of employees who do not receive benefits of any kind, is growing. It is now 38 percent of the workforce and is expected to grow to about 43 percent. These workers have little access to employer-sponsored family support services.

The bottom line is that businesses have made strides over the last decade toward family-friendly policies, but they have a long way to go. A recent study by the Families and Work Institute found that most companies now provide maternity leaves and offer parents flexible work schedules, such as part-time schedules or flextime. Only 28 percent offer child care leaves for mothers, however, and only 13 percent sponsor on-site child care centers. The steepest obstacle to change appears to be concern about cost and equity. Many corporate decision makers continue to view family support as a "frill" that has no place in today's tough environment, where only lean-and-mean companies can compete successfully. They are also concerned about the problem of offering benefits only to one segment of their workforce. They fear that if they provide support and education to parents with young children, they will be forced to offer equivalent benefits to other employees as well, such as those with ailing parents or troubled adolescents.

The Media

Parenting skills and information are no longer passed between generations or over backyard fences as readily as they once were. Americans are therefore looking to the media to provide parenting know-how, as they do for information about so many aspects of life.

In recent years there has been a marked increase in the publication of handbooks for parents. Of the hundreds of books and publications on parenting available at any given moment in bookstores and libraries, most address new parents. Periodicals with large circulations, such as *Parents Magazine*, with a circulation of nearly 2 million a month, not only offer advice to new mothers and fathers but also have the capacity to generate research by surveying their readers.

At the same time, newsrooms are undergoing great change, driven by financial pressures and declining readerships, and are looking for consumer relevancy and community

connections. One result is the development of civic journalism. There are new models of reporting on children all around the country, and full-time "children's beats" are enjoying a marked increase. A recent study of sixty-one newspapers and news services by the Casey Journalism Center found that more than half have added children's and/or family beats in the last three years. The news media today are devoting more space and resources than ever before to this beat, offering "news-you-can-use" for parents and stories that search for explanations of the forces in society that imperil children and families.

The electronic media can also play a role in strengthening parent education. Videotapes hold great promise for parenting education, since four out of five American homes have a VCR, and high-speed tape duplication has made it economically feasible to think of videotapes as give-aways. A case in point: McDonalds and the New York City Department of Mental Health have produced a videotape aimed at reaching at-risk adolescent parents with information and messages geared to preventing abuse. Commercial talk radio is another potentially powerful outlet for parenting education, and it has the advantage of being interactive.

Meeting participants identified a number of gaps that the media need to close. Stories on parenting tend to focus on young children; parents of adolescents receive far less attention, information, and support. Television and radio coverage of parenting issues could be more consistent. Child development specialists often make guest appearances on TV and radio, but at present there is no national talk show that focuses on child development and parenting. And finally, media critics note that both print and electronic media need to broaden their concept of parenthood to include fathers more consistently.

GOVERNMENT

Federal Government

Federal initiatives in the realm of family support and family preservation have generally been pursued within the framework of education, welfare reform, child care, and youth programs. There have been some recent efforts to strengthen services to families with young children, notably the Even Start Program, the introduction of Early Head Start as part of the Head Start reauthorization bill, and the 1993 Family Preservation and Family Support Act.

The current political climate dictates against dramatic federal efforts in the realm of education. Today, major federal initiatives in education are unlikely to succeed unless they are

voluntary, amenable to considerable flexibility, and based on local- and state-driven solutions. They also need to be comprehensive, with family involvement in learning as part of a broad set of comprehensive solutions. They need to allow states and communities that have bold action plans to seek waivers to decategorize education programs, allowing a more comprehensive approach.

Despite clear limitations, the federal government can be a catalyst for change by supporting, modeling, linking, and assessing efforts to provide family support. In particular, it can support a “visioning” process; fund research; facilitate and support collaboration; describe and ensure equity; and offer training, technical assistance, and leadership development.

State Governments

The impetus for expanding family support over the last decade has occurred, for the most part, at the local and state levels. As a result, many states have continued to take innovative approaches to family support issues. Some have created programs that establish stand-alone, community-based family resource centers and/or home visiting programs; others have built family support initiatives into efforts to reform the educational, welfare, and public health systems. Family support principles — including an emphasis on family-centered, preventive, comprehensive, community-based services — have also been built into state authorizations for existing programs operated by numerous state agencies. All of these actions reflect the growing recognition by state policymakers that their constituents are worried about the severe stress experienced by many families and want state government to respond with services that are accessible, effective, and closely connected to the actual needs and strengths of families and communities.

Meeting participants observed that, in order to expand family support, state governments need to be active in five areas:

1) *Providing leadership.* State governments must create a vision that leads to a strategic planning process, providing incentives, standards, and supports and sustaining commitment to ongoing initiatives despite changes in administration. The state can create an environment for innovation by partnering with other sectors, including the private nonprofit sector, the corporate sector, and local government.

2) *Establishing a policy framework.* State agencies can often succeed by taking a single, relatively simple concept and then making a sustained, systematic effort to build around it.

Vermont has done this, for example, with Success by Six, which wraps its family support efforts around a home visiting program. As they develop policies and programs, states need to make a commitment to going to scale, using cross-system approaches that take into account all the services provided in the state, not just those identified as family support programs.

3) *Ensuring an adequate and stable funding base.* States must analyze and publicize areas in which current investments are not paying off; increase investments overall, including through the creative use of federal dollars; look for opportunities to invest in prevention; and demonstrate that government can make responsible choices.

4) *Developing partnerships at the local level.* States provide a lawful structure for local efforts. At the same time, they must build relationships with local government, including school districts and neighborhood organizations. By offering reinforcement and public approbation to promising local initiatives, states can make it possible for best practices to go to scale.

5) *Assuring quality.* Today, many states are introducing or reinforcing a results-based approach to program planning and implementation. But in setting standards, states must also provide the assistance that local agencies and organizations need to meet those standards. Local initiatives need information and assistance with planning, training, financing, evaluation, and the use of electronic tools to coordinate efforts.

Local Governments

There is growing consensus among policymakers and taxpayers alike that grass-roots, community-based human services make more sense than categorical programs, with their top-down planning. It is recognized that, to function effectively, family support programs require substantial planning at the local level where the families who need the services will access them and use them. And yet, as things now stand, three out of four American cities have no formal written policies or plans for services to families.³⁴

Local governments bring numerous advantages to the task of establishing or expanding family support services. They are often better able than other sectors to come up with flexible initiatives that respond to emerging needs, and they are usually better positioned to take risks with funding and program development. They can form partnerships with local businesses, school districts, charitable organizations, and nonprofit organizations. They can act as role models and test new initiatives by piloting programs for their own employees. Finally, local governments are in a good position to build family support principles into local economic development strategies.³⁵

In more and more communities around the nation, both elected officials and private citizens are recognizing the link between the well-being of families and the vitality of the town or city or county as a whole. In particular, they are realizing that when families fail or flee, a community's economic prospects plummet. And yet, faced with severe fiscal constraints, many policymakers are reluctant to launch new family support initiatives.

But even financially pressed communities can strengthen family support by reviewing the existing services delivered by a wide variety of local government agencies and finding ways within those systems to better serve families. They can devise strategies for building the kinds of relationships among existing institutions and agencies, such as schools, libraries, health services, police forces, and recreation departments, that will support the healthy development of all of their children. They may want to start by evaluating the "family friendliness" of current policies and practices, with a view toward strengthening those that make the locality a good place for families to live and eliminating those that do not. In some cases, relatively simple changes can make a big difference, such as shifting the hours when agencies are open to match the realities of families' lives.

This kind of appraisal is certainly doable and can lead to a more comprehensive assessment of the needs of children and families if there are individuals and organizations prepared to carry it out. If not, then expanding family support requires a long-term commitment to developing leadership and to building, over time, a broad community coalition — in short, a constituency for change that comes together around a shared vision. The vision may be broad, based on a collaborative process that allows people to think together about how families can be better served, especially those with the greatest need. But it should also stress, at least at first, a single critical issue (prenatal care, or immunization, or affordable child care) that can help to focus community interest and activism.

The process of elaborating a vision should lead to a plan for cooperation across levels and departments. The plan should establish benchmarks, stating precisely what the community wants to achieve and how it can measure success. The plan may involve identifying, expanding, and linking effective community programs; it may call for innovation. In any case, it should identify every possible source of funds and other resources for family support projects — not only government sources, but also the philanthropic and business communities. Finally, the plan should encompass evaluation. An independent monitoring

process helps to ensure that a community's policies and practices — both old and new — move it toward the results defined during the visioning process.

PART III. GOING TO SCALE

DEFINING “SCALING UP”

Today there are thousands of scattered initiatives across the nation aimed at strengthening parental competence and helping young families thrive. A multitude of parent education programs operate under many guises. Scaling up these efforts does not only mean showcasing, evaluating, and expanding effective initiatives; it means reaching a population that is large enough to allow testing of the program's capacity to improve results on a systemwide basis; and also implementing the program in a sufficiently large jurisdiction to test it in a variety of settings, where diverse obstacles will be encountered.³⁶ Ultimately, scaling up involves creating the infrastructure for nationwide high-quality services for families and building a professional field of effective initiatives that are nailed into policy and resources.

In a fully scaled-up system of supportive services, the vast majority of people who need services and are eligible to receive them would be reached. As one meeting participant noted, even 96 percent penetration does not suffice if the 4 percent who are not served represent a particular group that has demonstrable need. A long-range plan therefore should, over time, move the nation toward the goal of making services available to every family that wants to take advantage of them.

Many sectors of the society and as many organizations and individuals as possible must be engaged on behalf of parents and their young children — a process that may involve the shifting down of responsibility from a central (federal or state) authority to local community groups. Because federal and state governments have historically played a strong role in assuring equity, this complex transfer of power may jeopardize the rights of disadvantaged or marginalized populations. This is not the inevitable outcome, however. States that are now in the process of scaling up parent support, like Missouri and Vermont, appear to be taking this danger into account and are building slowly with considerable attention to what happens to equity as devolution proceeds.

CREATING SYSTEMS OF SERVICES

Family support may be seen as both the provision of information and supports to families with young children and the creation of systems of services that enable families to get the help they need to raise their children. To be responsive to children and their parents, services must be linked because families' needs and strengths do not come in neat packages. Policymakers are beginning to recognize that effective parenting education and family support must be comprehensive in purpose. They are beginning to think about family support programs, including parenting education efforts, as part of broader efforts to reconfigure systems of service.

The challenge of "going to scale" raises a crucial issue: Is the priority to scale up family support as a set of discrete programs? Or should policymakers be working toward scaling up family support in the context of efforts to build a comprehensive system of services? Is it feasible in practice to start categorical and then build programs into systems?

Recent experience suggests that it is reasonable to start by scaling up successful programs. All of the states that have launched ambitious family support initiatives began by creating discrete programs within a particular system, usually education or social services. In each instance, the initiative is now "moving out"—that is, taking its place as part of broader, cross-agency efforts to support families and reform delivery systems.

SCALING UP PARTICIPATION

The challenge, broadly stated, is to rebuild communities so that supports are in place to meet the needs of children and families and to make or revise policy at the state and federal level to facilitate that process. For this to happen, family support principles must be infused into mainstream agencies and organizations at every level. They must be communicated in ways that will make sense to large numbers of people who may not be acquainted with them.³⁷

As part of that process, policymakers must address the question of whether family support and parent education services should be provided on a universal basis, or targeted to particular populations. This issue sparks heated debate, even within the family support movement. Historically, categorical approaches have often reached dead ends.

Some researchers, practitioners, and policymakers argue for universal programs, with different supports for different kinds of families, based on indicators showing that virtually all

families are under stress. A concern is that targeted family support echoes the biases of the charity organization movement of a century ago, by reflecting the assumption that poor people, people of color, and immigrants need parenting education in order to absorb the values, practices, and lifestyles of the dominant culture. Finally, supporters of universal services cite political considerations: many legislators are on record that they will only vote for universal programs that benefit all of their constituents.

Proponents of targeted services, on the other hand, argue for political realism. They assert that, in an era of scarce resources, services should be directed to the families and children who need them most — poor children and those demonstrably at risk of developmental delays, health problems, and school failure. They observe that the argument for universal services may not survive massive taxpayer resistance to increased social spending. As one participant commented, “Today the alternative to doing everything for everybody may be to do nothing for anybody.”

Finally, they note that the case for universal services rests on the premise that all parents and their children stand to benefit from access to family support services, particularly if those services are designed to meet parents’ needs as they themselves define them. Existing evaluations have not, however, been able to demonstrate conclusively the benefits of family support interventions for middle-class families.³⁸ This may reflect flaws in the evaluation design, rather than program weakness. In any case, the universal argument cannot be made persuasively until more evidence is gathered. The need for evaluation is not limited to the benefits for middle-class parents. In general, policymakers need more solid information on the impact of parent education and family support initiatives on various populations.

SCALING UP EVALUATION

Most evaluations of family support programs have been limited to a short time span — three to five years at most. To understand the impact of family support over time, the obstacles to change, and the kinds of programs that can overcome those obstacles, more long-term studies are needed.

There is a need to know whether programs designed for families with young children are likely to have a sustained effect on those children, including their own ability to be effective parents two or three decades later. Understandably, most politicians and the public are unwilling to wait twenty years to test a program’s impact. And given today’s budget

constraints, it is very difficult to secure funding for very long-term studies. As a result, big-picture evaluations may not be viable at the present time.

It is possible to document more fully and more effectively a range of indicators that shed light on the impact of family support. These data can help to shape new legislative and programmatic initiatives. Some researchers argue for “reinventing evaluation” — devising innovative knowledge development strategies that can help policymakers drive change and can give local communities the capacity they need to pursue effective, cost-effective strategies. Rather than asking whether family support works, researchers need to ask: What works best for whom?³⁹

LESSONS LEARNED FROM CURRENT EFFORTS

While continued research and evaluation efforts will help policymakers and practitioners target resources and improve results, enough is known about family support to counter the widespread perception that nothing works when it comes to improving the prospects for vast numbers of at-risk children. Indeed, the task of scaling up family support is already in progress in a number of states, including Maryland, Minnesota, Missouri, Kentucky, Tennessee, and Vermont, and in many communities. From these, a number of crucial lessons about the process have been learned:

- 1) *Scaling up high-quality programs in any significant way requires enormous investments of time, energy, and resources. An urgent priority is the creation of an infrastructure that strengthens and coordinates funding, training, quality control, and evaluation.*
- 2) *The federal government must not relinquish its stake in family support. States and local communities need assistance as they think through the best ways to approach complex infrastructure issues. In particular, family support and parent education require a broad perspective on training, capacity building, and evaluation.*
- 3) *It is impossible to overstate the critical importance of leadership and political skill, particularly the ability to read what will motivate policymakers and build political will. The political entrepreneurs who have successfully brought programs to scale have been attuned to the kinds of program design and strategy that would make their initiatives politically marketable within their states. It is essential to tailor advocacy for these kinds of programs to local political circumstances, and to fit them into the local political agenda.*

4) *Most states that are scaling up programs have been able to sell, to their legislatures and their state agencies, the notion that family support is a great way to invest in the future, to promote the human capital, and to contain escalating social spending.*

5) *All of the states that are successfully scaling up family support have dealt with volatile intrusion-into-family issues by ensuring a balance of power between localities and states. None has left itself open to the charge that the state is dictating to local people how they should raise their children.*

6) *Additional research is needed to support the process of planning, implementing, and scaling up high-quality programs.⁴⁰*

FOCUS ON QUALITY

The 1980s and 1990s have witnessed great progress in the field of family support and parent education. Concepts that once met wide resistance are now widely embraced by policymakers and service providers alike. It is now common wisdom in many quarters that, if the prospects for children are to be enhanced, the focus has to be on at least two and maybe three generations — on parents and children and grandparents. It is now widely accepted that parents, to succeed, need communities, not just a service or even a couple of services but a set of connections that encompass both the public and private sectors.

But these principles, even when they are reflected in planning efforts, mission statements, and pilot projects, do not always translate into policies or practices that support and preserve families.⁴¹ In fact, in a recent international study, the United States ranked in the lower half of Western industrialized countries in providing family support services.⁴² This country is not yet close to systematizing any effort toward comprehensive family support or parent education. Investments to preserve families remain small.⁴³ And generally speaking, strengthening families remains low on the nationwide public policy agenda.

The challenges are practical as well as political. Today, services to families and children, particularly those financed and regulated by the states, remain largely categorical and fragmented — a patchwork pieced together from the education, health, child welfare, juvenile justice, and mental health systems. Generally speaking, the fragmented, mainstream service system does not yet embrace family support principles; those services that do embody family support principles tend to be add-ons to this mainstream service system. Moreover, the most

vulnerable families and the most troubled young people tend to be served by the more categorical and traditional service systems. Despite rhetoric about family preservation, recent years have seen an increase in out-of-home placements of children into foster care, mental health facilities, and juvenile detention and training schools.⁴⁴

Good practice exists at thousands of family centers and parent support programs across the country, as well as in agencies and schools that embrace family support principles. But at this point, family support lacks clear-cut quality standards for program content, performance, and delivery. Articulating and codifying these standards is an extremely difficult task, because family support is, by definition, a multifaceted effort that seeks results in several domains at once: children, family, programs, communities, normative public agencies, and service delivery systems.⁴⁵

Efforts are now under way to define and implement quality standards. For example, in 1992 the Family Resource Coalition launched the Best Practices Project, an effort to specify standards of quality based on the most effective practices of existing community-based family support programs. This effort mines the knowledge and experience of leading researchers and practitioners, as well as focus groups, and will digest its findings into user-friendly guidelines for excellent practice in the field of family support.⁴⁶ Over the next decade, the challenge is to follow up on this and other efforts to define quality, by systematically infusing best practices into new policies and the programs they generate, so that, as a nation, the United States can move toward high-quality, integrated systems of family support and parent education.

#

ENDNOTES

1. U.S. Bureau of the Census, Economics and Statistics Administration, *Statistical Abstract of the United States, 1994*, 114th ed. (U.S. Department of Commerce, 1994).
2. Craig T. Ramey and Sharon Landesman Ramey, "Home Visiting Programs and the Health and Development of Young Children," *The Future of Children*, vol. 3, no. 3 (Winter 1993).
3. Sharon L. Kagan and Nancy Cohen, *Report of the Quality 2000 Initiative* (New Haven: The Bush Center in Child Development and Social Policy at Yale University, forthcoming).
4. U.S. Bureau of the Census, *Statistical Abstract of the United States, 1994*.
5. K. J. Pittman with M. Wright, *A Rationale for Enhancing the Role of the Non-School Voluntary Sector in Youth Development*, report prepared for The Carnegie Council on Adolescent Development Task Force on Youth Development and Community Programs (Washington, D.C.: Center for Youth Development and Policy Research, Academy for Educational Development, 1991).
6. U.S. Bureau of the Census, *Statistical Abstract of the United States, 1994*.
7. Jeanne E. Griffith, *The Children of Teenage Mothers*, report no. 87-94 EPW (Congressional Research Service, 1987).
8. Families and Work Institute, *Employers, Families, and Education: Facilitating Family Involvement in Learning* (New York, 1994).
9. Sharon L. Kagan, *Defining America's Commitments to Parents and Families: An Historical-Conceptual Perspective* (April 1994).
10. Sarah S. Brown, "Preparation for Parenthood," in *The Challenge of Parenting in the Nineties* (Washington, D.C.: The Aspen Institute, 1995).
11. Kagan and Cohen, *Report of the Quality 2000 Initiative*.
12. Arloc Sherman, *Wasting America's Future: The Children's Defense Fund Report on the Costs of Child Poverty* (Boston: Beacon Press, 1994).
13. Heather B. Weiss, "Building Villages: Lessons from Policy Entrepreneurs," in *Visions of Entitlement, The Care and Education of America's Children*, ed. Mary A. Jensen and Stacie G. Goffin (Purchase, N.Y.: State University of New York, 1993).
14. Frank Farrow, "Family Support on the Federal Policy Agenda," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).

15. Kagan and Cohen, *Report of the Quality 2000 Initiative*.
16. Heather B. Weiss, "Home Visits: Necessary But Not Sufficient," *The Future of Children*, vol. 3, no. 3 (Winter 1993).
17. David Olds, "Promising Preventive Interventions During Pregnancy, Infancy, and Early Childhood," in *The Challenge of Parenting in the Nineties* (Washington, D.C.: The Aspen Institute, 1995).
18. Ibid.
19. Ibid.
20. Ibid.
21. T. Kellaghan et al., "The Effectiveness of Family-Intervention Programs," in *Home Environment and School Learning: Promoting Parental Involvement in the Education of Children* (San Francisco, Ca.: Jossey-Bass, 1993).
22. Norm Fruchter, Anne Galletta, and J. Lynne White, "New Directions in Parent Involvement," in *Equity and Choice*, vol. 9, no. 3 (1993).
23. Kagan, *Defining America's Commitments to Parents and Families*.
24. Fruchter, Galletta, and White, "New Directions in Parent Involvement."
25. Joy G. Dryfoos, *Full-Service Schools: A Revolution in Health and Social Services For Children, Youth, and Families* (San Francisco, Ca.: Jossey-Bass, 1994).
26. Sharon L. Kagan, "On Building Parental Competence: The Nature of Contracts and Commitments," in *The Challenge of Parenting in the Nineties* (Washington D.C.: The Aspen Institute, 1995).
27. Robert I. Crowson and William Lowe Boyd, "Coordinated Services for Children: Designing Arks for Storms and Seas Unknown," in *American Journal of Education*, vol. 101 (1993).
28. Kathryn Young, "Education for Parenting," paper presented to the Carnegie Corporation of New York Conference on Scaling Up Family Support and Parent Education (November 16-17, 1994).
29. Ibid.
30. Dryfoos, *Full-Service Schools*.
31. Ann Adalist-Estrin, "Family Support and Criminal Justice," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).

32. Cleopatra Howard Caldwell, Angela Dungee Greene, and Andrew Billingsley, "Family Support Programs in Black Churches: A New Look at Old Functions," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).
33. Families and Work Institute, "Comparative Analysis of Work-Family Programs in Major Corporations," in *The Corporate Reference Guide to Work Family Programs* (New York: Families and Work Institute, 1991).
34. National League of Cities cited in Norman B. Rice, "Local Initiatives in Support of Families," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).
35. Rice, "Local Initiatives in Support of Families."
36. Ibid.
37. Sharon L. Kagan, "Defining and Achieving Quality in Family Support," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).
38. Olds, "Promising Preventive Interventions During Pregnancy, Infancy, and Early Childhood."
39. Kellaghan et al, "The Effectiveness of Family-Intervention Programs."
40. Weiss, "Building Villages: Lessons from Policy Entrepreneurs."
41. Charles Bruner, "State Government and Family Support: From Marginal to Mainstream," in *Putting Families First: America's Family Support Movement and the Challenge of Change*, ed. Sharon L. Kagan and Bernice Weissbourd (San Francisco, Ca.: Jossey-Bass, 1994).
42. Cited in Camille Sweeney, "Portrait of the American Child, 1995," *The New York Times Magazine* (October 9, 1995).
43. Kagan, *Defining America's Commitments to Parents and Families*.
44. Bruner, "State Government and Family Support."
45. Kagan, "Defining and Achieving Quality in Family Support."
46. Ibid.

REFERENCES

- Adalist-Estrin, Ann. "Family Support and Criminal Justice." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.
- Brown, Sarah S. "Preparation for Parenthood." In *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.
- Bruner, Charles. "State Government and Family Support: From Marginal to Mainstream." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.
- Caldwell, Cleopatra Howard, Angela Dungee Greene, and Andrew Billingsley. "Family Support Programs in Black Churches: A New Look at Old Functions." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.
- Carnegie Corporation of New York. *Starting Points: Meeting the Needs of Our Youngest Children*, 1994.
- Casey Journalism Center for Children and Families. *Covering Children*. Report from the conference, "The American Family: A Tradition Under Siege." College Park, Md.: Casey Journalism Center, University of Maryland, 1994.
- Crowson, Robert I., and William Lowe Boyd. "Coordinated Services for Children: Designing Arks for Storms and Seas Unknown." *American Journal of Education*, vol. 101 (1993).
- Daro, Deborah, and Richard J. Gelles. "Public Attitudes and Behaviors with Respect to Child Abuse Prevention." *Journal of Interpersonal Violence*, vol. 7, no. 4 (1992).
- Dryfoos, Joy G. *Full-Service Schools: A Revolution in Health and Social Services For Children, Youth, and Families*. San Francisco, Ca.: Jossey-Bass, 1994.
- Families and Work Institute. "Comparative Analysis of Work-Family Programs in Major Corporations." In *The Corporate Reference Guide to Work Family Programs*. New York: Families and Work Institute, 1991.
- . *Employers, Families, and Education: Facilitating Family Involvement in Learning*. New York: Families and Work Institute, 1994.
- Farrow, Frank. "Family Support on the Federal Policy Agenda." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and

Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.

Fruchter, Norm, Anne Galletta, and J. Lynne White. "New Directions in Parent Involvement." *Equity and Choice*, vol. 9, no. 3 (1993).

Galinsky, E. and Friedman. *Education Before School: Investing In Quality Child Care*. New York: Families and Work Institute, 1993.

Greenawalt, C. E. II. "Educational Outreach Programs." In *Educational Innovation: An Agenda to Frame the Future*, ed. C. E. Greenawalt. Lanham: University Press of America, 1994.

Griffith, Jeanne E. *The Children of Teenage Mothers*. Congressional Research Service, report no. 87-94 EPW, 1987.

Henderson, Anne T., and Nancy Berla. *A New Generation of Evidence: The Family Is Critical to Student Achievement*, 1994.

Kagan, Sharon L. *Defining America's Commitments to Parents and Families: An Historical-Conceptual Perspective*, April 1994.

———. "Defining and Achieving Quality in Family Support." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.

———. "On Building Parental Competence: The Nature of Contracts and Commitments." In *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.

Kagan, Sharon L. and Nancy Cohen. *Report of the Quality 2000 Initiative*. New Haven: The Bush Center in Child Development and Social Policy at Yale University, forthcoming.

Kellaghan, T., K. Sloan, B. Alvarez, and B.S. Bloom. "The Effectiveness of Family-Intervention Programs." In *Home Environment and School Learning: Promoting Parental Involvement in the Education of Children*. San Francisco, Ca.: Jossey-Bass, 1993.

Kessler, Suzanne. *The Parenting Program at Bedford Hills Correctional Facility: Interview with Judy Clark*, 1995, unpublished.

Legters, Nettie and Robert Slavin. *Elementary Students At Risk: A Status Report*. Center for Research on Effective Schooling for Disadvantaged Students. College Park, Md.: Johns Hopkins University, 1994.

Morrill, W. A. "Overview of Service Delivery to Children." *The Future of Children*, vol. 2, no. 1 (1992).

- National Center for Educational Statistics. "Youth Indicators 1993: Trends in the Well-Being of American Youth." U.S. Department of Education, publication number NCES 93-242, October 1993.
- National Education Goals Panel. *The National Education Goals Report: Building a Nation of Learners 1995*, vol. 1. Washington, D.C.: United States Government Printing Office, 1995.
- Olds, David. "Promising Preventive Interventions During Pregnancy, Infancy, and Early Childhood." In *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.
- Pittman, K. J., with M. Wright. *A Rationale for Enhancing the Role of the Non-School Voluntary Sector in Youth Development*. Report prepared for The Carnegie Council on Adolescent Development Task Force on Youth Development and Community Programs. Washington, D.C.: Center for Youth Development and Policy Research, Academy for Educational Development, 1991.
- Population Reference Bureau. *The Challenge of Change: What the 1990 Census Tells Us About Children*, 1992.
- Ramey, Craig T., and Sharon Landesman Ramey. "Home Visiting Programs and the Health and Development of Young Children." *The Future of Children*, vol. 3, no. 3 (Winter 1993).
- Rice, Norman B. "Local Initiatives in Support of Families." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.
- Rodriguez, Gloria G. "Avance Family Support and Education Program." *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.
- Sherman, Arloc. *Wasting America's Future: The Children's Defense Fund Report on the Costs of Child Poverty*. Boston: Beacon Press, 1994.
- Sweeney, Camille. "Portrait of the American Child, 1995." *The New York Times Magazine* (October 9, 1995).
- Takanishi, Ruby. "Parenting Adolescents: What Legislators Can Do to Support Families." *The Challenge of Parenting in the Nineties*. Washington, D.C.: The Aspen Institute, 1995.
- U.S. Bureau of the Census, Economics and Statistics Administration. *Statistical Abstract of the United States, 1994*. 114th ed. U.S. Department of Commerce, 1994.
- U.S. Department of Education. *Strong Families, Strong Schools: Building Community Partnerships for Learning*, September 1994.

U.S. Department of Health and Human Services. *Child Health USA '93*, publication number HRSA-MCH-94-1, March 1994.

Vinovskis, M.A. "Family and Schooling in Colonial and Nineteenth-century America." *Journal of Family History*, vol. 12, no. 1, (1987).

Weiss, Heather B. *A Brief Overview of Contemporary 0-3 Parent Education and Family Support Programs*, 1994.

———. "Home Visits: Necessary But Not Sufficient." *The Future of Children*, vol. 3, no. 3 (Winter 1993).

———. "Building Villages: Lessons from Policy Entrepreneurs." In *Visions of Entitlement, The Care and Education of America's Children*. Ed. Mary A. Jensen and Stacie G. Goffin. Purchase, N.Y.: State University of New York, 1993.

Young, Kathryn. "Education for Parenting." Paper presented to the Carnegie Corporation of New York Conference on Scaling Up Family Support and Parent Education, November 16-17, 1994.

Zuckerman, Barry, and Berry T. Brazelton. "Strategies for a Family-Supportive Child Health Care System." In *Putting Families First: America's Family Support Movement and the Challenge of Change*. Ed. Sharon L. Kagan and Bernice Weissbourd. San Francisco, Ca.: Jossey-Bass, 1994.

APPENDIX A

AGENDA

PARENT EDUCATION AND FAMILY SUPPORT: OPPORTUNITIES FOR SCALING UP November 16-17, 1994

WEDNESDAY, NOVEMBER 16, 1994

- PLACE:** Carnegie Corporation of New York
437 Madison Avenue
New York, New York 10022
- 12:00-1:00 p.m.** Lunch
- 1:00-1:30 p.m.** Welcome and Overview - David A. Hamburg
- 2:00-2:30 p.m.** Parent Education and Family Support: Lessons from Existing Initiatives - Heather Weiss
- 2:30-3:30 p.m.** Discussion
Moderator: David A. Hamburg
- 3:30-3:45 p.m.** Break
- 3:45-4:15 p.m.** Parent Education and Family Support: Illustrations from Mainstream Institutions - Kathryn Taaffe Young
- 4:15-5:15 p.m.** Discussion
Moderator: David A. Hamburg
- 6:30-8:30 p.m.** Informal Gathering and Dinner
The New York Palace
The Library and Drawing Room ~ 3rd floor

THURSDAY, NOVEMBER 17, 1994

8:00–8:30 a.m. Continental Breakfast

8:30–10:30 a.m. Linking Parent Education and Family Support to the Service Sectors

Moderator: Vivien Stewart

- Child Care
- Lynn Kagan
- Education
- Gordon Ambach
- Health
- Karen Davis
- Welfare
- Gary Stangler

Discussion

10:30–10:45 a.m. Break

10:45 a.m.–12:30 p.m. New Opportunities Within Mainstream Institutions

Moderator: Kathryn Taaffe Young

- Churches
- Reverend Carolyn Bullard-Zerweck
- Laura Dean Ford Friedrich
- Media
- Larry Kutner
- Ann Pleshette-Murphy
- Business
- Betty Southwick
- Deborah Stahl

Discussion

12:30–1:30 p.m. Lunch

1:30–3:30 p.m.

The Role of Government

Moderator: Michael H. Levine

- State
 - Con Hogan
 - Patrick McCarthy

- Federal
 - Olivia Golden
 - Terry Peterson

Discussion

3:30-4:30 p.m.

Mapping Strategies for Scaling Up Parent Education and Family Support

Moderator: Vivien Stewart

- Judy Jones

4:30 p.m.

Meeting Adjourned

APPENDIX B

LIST OF PARTICIPANTS

Parent Education and Family Support: Opportunities for Scaling Up November 16–17, 1994

1. Karen Alexander, Ph.D.
Psychologist
Bush Center in Child Development and Social Policy
Yale University
New Haven, Connecticut
2. Gordon Ambach
Executive Director, Council of Chief State School Officers
Washington, D.C.
3. Karen Bell
Associate Director of Child and Family Health
National Center for Children in Poverty
Columbia University
New York, New York
4. Leslie Mitchel Bond
Director, Healthy Families America
National Committee to Prevent Child Abuse
Chicago, Illinois
5. The Reverend Carolyn Bullard-Zerweck
Program Associate for Witness and Service
Greater Dallas Community of Churches
Dallas, Texas
6. Karen Davis, Ph.D.
Executive Vice President, The Commonwealth Fund
New York, New York
7. Frank Farrow
Director, Children's Services Policy
Center for Study of Social Policy
Washington, D.C.
8. Laura Dean F. Friedrich, M.Ed.
Director, Church/Community Consultation Services
CHILDSERV
Park Ridge, Illinois

9. Ellen Galinsky
Co-President, Families and Work Institute
New York, New York
10. Stacie Goffin, Ed.D.
Senior Specialist
Ewing Marion Kauffman Foundation
Kansas City, MO
11. Olivia A. Golden, Ph.D., M.A.
Commissioner, Administration on Children, Youth, and Families
United States Department of Health and Human Services
Washington, D.C.
12. Margaret A. Hamburg, M.D.
Commissioner of Health
New York City Department of Health
New York, New York
13. Ruby P. Hearn, Ph.D.
Vice President, Robert Wood Johnson Foundation
Princeton, New Jersey
14. Cornelius Hogan
Secretary, Agency of Human Services
Waterbury, Vermont
15. Judith E. Jones
Chairperson, Council of Advisors
National Center for Children in Poverty
School of Public Health
Columbia University and
Director of the Free to Grow Program
New York, New York
16. Sharon Lynn Kagan, Ed.D.
Senior Associate, Bush Center in Child Development
and Social Policy
Yale University
New Haven, Connecticut
17. Herant Katchadourian, M.D.
Professor, Psychiatry and Behavioral Sciences
Program in Human Biology
Stanford University
Stanford, California

18. Larry Kutner, Ph.D.
Journalist and Author
New York, New York
19. Shawn LaFrance
Program Officer, The Commonwealth Fund
New York, New York
20. Margaret E. Mahoney
President, The Commonwealth Fund
New York, New York
21. Patrick McCarthy, Ph.D.
Senior Associate, Child and Adolescent Health
The Annie E. Casey Foundation
Baltimore, Maryland
22. Ann Pleshette Murphy
Editor-in-Chief
Parent Magazine
New York, New York
23. Barbara Peters
The Partnership Group
New York, New York
24. Terry K. Peterson, Ph.D.
Counselor to the Secretary
United States Department of Education
Washington, D.C.
25. Edward Pitt
Director, Male Involvement Project
Families and Work Institute
New York, New York
26. Gloria G. Rodriguez, Ph.D.
President and Chief Executive Officer
Avance Family Support and Education Program
San Antonio, Texas
27. Betty J. Southwick
Director of Program Development
Work/Family Directions
Boston, Massachusetts

28. Deborah Stahl
Director, Family Care Development Fund
AT&T
Morristown, New Jersey
29. Gary Stangler
Director, Missouri Department of Social Services
Jefferson City, Missouri
30. Layla P. Suleiman
Associate Director of Programs
Family Resource Center
Chicago, Illinois
31. Cathy Trost
Director, The Casey Journalism Center for
Children and Families
College of Journalism
University of Maryland
College Park, Maryland
32. Heather Weiss, Ed.D.
Director, Harvard Family Research Project
Graduate School of Education
Harvard University
Cambridge, Massachusetts
33. Susan N. Wilson
Executive Director, Network for Family Life Education
Center for Social and Community Development
Rutgers University
New Brunswick, New Jersey
34. Mildred M. Winter
Executive Director
Parents As Teachers National Center, Inc.
St. Louis, Missouri

~ *Carnegie Corporation of New York Staff*

1. David A. Hamburg, President
2. Barbara D. Finberg, Executive Vice President
and Program Chair, Special Projects Committee
3. Vivien Stewart, Senior Advisor to the President and
Program Chair, Education and Healthy Development of Children and Youth
4. Michael H. Levine, Program Officer
Education and Healthy Development of Children and Youth
5. Gloria Primm Brown, Program Officer
Education and Healthy Development of Children and Youth
6. Karin P. Egan, Program Officer
Education and Healthy Development of Children and Youth
7. Anthony W. Jackson, Program Officer
Education and Healthy Development of Children and Youth
8. Kathryn Taaffe Young, Director of Studies
Task Force on Meeting the Needs of Young Children
9. Antony Ward, Executive Director
Task Force on Learning in the Primary Grades
10. Fred M. Hechinger, Senior Advisor
11. Susan V. Smith, Program Associate
Education and Healthy Development of Children and Youth
12. Nidia Marti, Administrative Assistant
Education and Healthy Development of Children and Youth
13. Bonnie J. Piller, Secretary
Task Force on Meeting the Needs of Young Children
14. Kathleen Sheridan, Secretary
Education and Healthy Development of Children and Youth

~ Rapporteur

15. Rima Shore
Brooklyn, New York

~ Meeting Reporter

16. Victoria McLaughlin
Miller Reporting