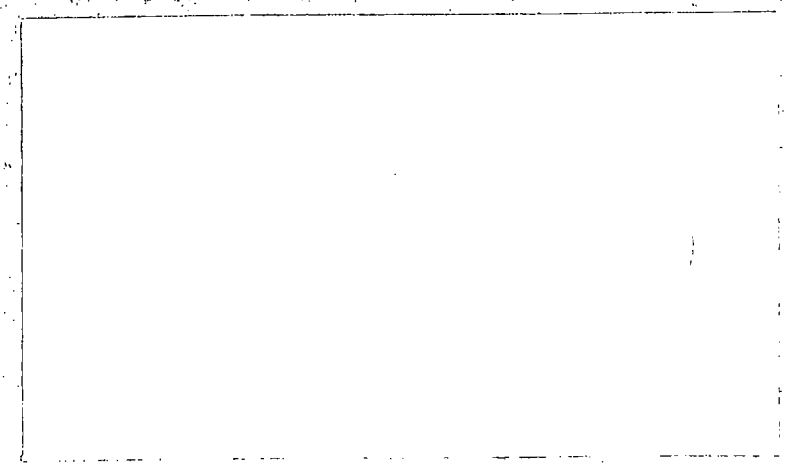

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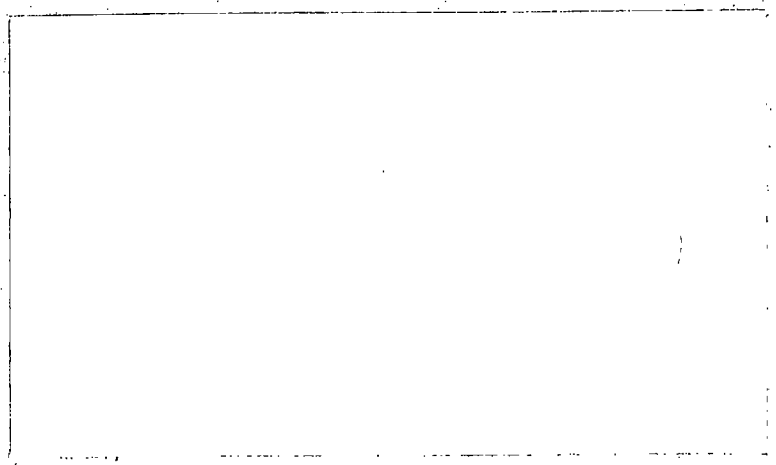

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REDEFINING CHILD AND FAMILY SERVICES: DIRECTIONS FOR THE FUTURE

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CONTENTS

I. REDEFINING CHILD AND FAMILY SERVICES

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

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

New Realities: A Challenge to the Status Quo

The first reality is that children are now and will continue to be a smaller proportion of the population[1]. At the same time, children are more likely to be poor than the members of any other age group[2] and the percentage of the child population belonging to minority groups is growing[3]. An increasing percentage of children will be at a disadvantage because of poverty and the diminished education and employment opportunities minorities often confront. In the face of these challenges, when adult, <u>each</u> child of today will have to play a significant role to sustain and enrich our social, economic, and political institutions at a time of insistent and accelerating change.[4]

The second reality that guides our thinking is profound changes in family structure and functioning, changes that strain the personal resources many families have for caring for their children. Owing to high rates of

divorce and an increase in out-of-wedlock births, the percentage of children who live with one parent has almost tripled since 1960.[5] For single parents, the drains on energies are great and the available material, social, and psychological resources to devote to children are often limited. Many more children are also living in households in which their sole parent or both parents are working. About 63 percent of children now have mothers in the labor force.[6] When work and the tasks of maintaining a home are accomplished, adult family members may have less time, energy, and emotional resilience to invest in their children[7].

Over the last 75 years there has been a dramatic decline in the size of both immediate and extended American families resulting in a more intense and unrelieved child-raising obligation for nuclear families and a decrease in opportunities for children to experience cross-generational interaction and support in their lives.[8] Families also may be unable to rely on informal social networks in communities as a result of significant geographic mobility.[9] Mobility means that families often face periods of isolation while they make connections in new communities, and the movement of families out of communities can disrupt ties for those who remain.

The third reality that guides our thinking is the current nature of social services. Existing social services focus primarily on responding to children's problems or to deficits in family functioning and are available only after difficulties have become chronic or severe. Services are provided in fragmented, problem-oriented categories such as child welfare, mental health, juvenile justice, special education, substance abuse services, and services for chronic illness or for physical and developmental disabilities. As a condition of receiving assistance, children and parents are required to

restrict the help they seek to the narrow range of categorical problems that a service defines as its domain. These specialized services often grow out of particular disciplinary or professional orientations and are provided through bureaucratic structures that make it difficult to recognize or respond to the range of a child's needs. To a large extent, Federal and State law, funding, and practice have reinforced this narrowly defined, problem-centered approach.

The Need for a New Response

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

While this paper is about reforms in the definition and delivery of social services, we want to acknowledge at the outset that redefined and reconfigured services are far from the only resources needed to support child development and family functioning. To become competent, caring adults able to contribute to their own well-being and the well-being of others, children need a range of resources in their lives. In broad outlines children need the presence in their lives of at least one responsively caring, invested adult, their parents need jobs that produce adequate incomes, and families need to live in communities that offer stable, secure housing, decent education and health care, and physically safe environments that foster networks of social

support and social control among adults and children. In addition to these other things, children also need the supports that a reconfigured system of social services could provide. They need access to activities, facilities, and events beyond home and school through which to build competencies and make connections and contributions to people, places, and prospects that are part of a larger civic world. Children and parents also need adequate response to personal problems as they develop. It is these last two dimensions, organized opportunities that build competencies and respond to problems through a reconfigured system of social services about which we are writing. Although social services alone cannot create responsive communities, reconceived and reconfigured services can be partners in doing so.

Reforming Social Services

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

To date our social services policy and programming has assumed that in the absence of defined, "categorical" problems children are developing adequately.[10] While it is important to respond to special problems as they occur, the absence of such problems is not adequate evidence that young people are developing the capacities they need to function as caring, competent adults. The demands on parents and the challenges facing children suggest that families need resources and supports for enhancing the development of children beyond only their own personal, immediate assets. Even if family structure, marital instability, and parental employment were not factors complicating the time and attention parents have to devote to children, the complex and changing demands of the social and technological world children are growing into make it imperative that society provide opportunities through which children can build the capacities and skills they need to function adequately as young people and later as adults.

We are proposing a redefinition of social services comparable to shifts that are underway in health services. In addition to responding to critical and chronic health care problems, health promotion has begun to be addressed within the health care field. It is important that the provision of social services be reconceived to promote development, as well as respond to problems. In social services, as in health care, programming and practices that promote development and those that solve problems have a direct and interdependent relationship to each other: individuals with solid capacities may be resilient in otherwise problem-generating circumstances, and strengthening capacities in those with problems is an important factor in overcoming them.

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

Our Vision: Three Key Ideas

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

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

the benefit of specialized, problem-oriented services that children and parents are using.

Second, primary services should play a central role in a larger, more purposefully organized infrastructure of child and family services. In our conception, social services should be redefined to include the developmentally-oriented primary services as full partners with the traditional problem-oriented specialized services. The aim of this comprehensive infrastructure of services should be to enhance the development of all children and the functioning of families and to respond to problems as they occur. These services--both primary and specialized--should function as part of a coherent, organized infrastructure of services to support children and parents.

Third, primary and specialized services can best function together at the community level. A focus on geographic communities is central to the reorientation in services we are proposing because communities are the worlds within which most of children's lives take place and within which children and families first seek sources of enrichment and support. Geographic communities are the jurisdiction in which the planning and provision of services can be made most responsive to children and families and in which the connections between citizens and service providers needed to make this happen can best be created and sustained.

Communities can create a comprehensive infrastructure of services by engaging in community-based planning involving citizens, civic interests, and service providers to set goals and priorities for meeting child and parent interests and needs and to plan for creating the array of services related to reaching these goals, by stimulating the provision of services that jointly

engage primary and specialized service providers, and by developing mechanisms that facilitate access and make services function together as a system for individual children and parents. The reforms we have in mind can be instrumental in stimulating and contributing to the creation of responsive, caring communities, a long-term, larger benefit than the reform of services alone.

Service reform is immensely complex and difficult and should be undertaken only if current conceptions and the policies and programs that flow from them fall seriously short of responding to child and family interests and needs. In proposing reform, we are aware of the significant obstacles it faces, including the need for determination and political will to sustain attention to reform, the counterweight of disparate disciplinary perspectives and vested interests, and the changes in leadership, legislation, and larger social climate that can undermine reform once underway.

While the need to create a broadly conceived infrastructure of services is applicable across all communities, strategically accomplishing the development of that infrastructure in different kinds of communities is likely to be different and to pose quite different challenges. The challenges of implementing these reforms will depend on factors such as the strength of citizen and civic leadership within a community, the level and quality of existing primary and specialized services, the particular goals for children and families considered most urgent, and the extent to which organizations and individual leaders have a collaborative or combative history. The strategy of where and how to begin creating a responsive infrastructure will clearly differ in communities of different kinds. Some of the greatest challenges will be posed in depleted, inner-city communities in which child and family

needs are compelling and there is likely to be little if any infrastructure of existing services, either primary or specialized.

While we acknowledge the obstacles, we believe that the inadequacy of our current response to the challenges facing children and parents warrants marshalling the effort to implement a broadened vision of social services and to identify and work toward overcoming the obstacles likely to face this or indeed any reform. In fact, we are emboldened to assert the practical possibilities of our ideas because the reforms we are proposing have already taken first life in a major demonstration. The Chicago Community Trust, the foundation that originally commissioned our work on the development of an alterative conception of social services, has created a $30 million Children, Youth, and Families Initiative to stimulate implementation of these reforms. In its first years, the Initiative is focusing the bulk of its grant-making in eight communities in the Chicago area, most of which are low-income, urban communities. The Initiative's multi-year test of these reforms is likely to yield significant learning about the promise of the ideas we are proposing to stimulate change and about the problems encountered along the way.

The remaining sections of this paper describe the rationale and substance of the alternative conception of social services we are proposing. First, because they are central to the redefinition we are advancing, we focus on the role, functions, and importance of primary services as we envision them. Second, we discuss how primary and specialized services can work together in communities as a common enterprise dedicated to promoting child development and family functioning as well as responding to problems; we also address the functions that have to occur within communities to bring this

about. Finally, we discuss implementation issues and strategies to consider in testing the vision we are proposing.

II. THE ROLE AND IMPORTANCE OF PRIMARY SERVICES

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

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

sources of help to vulnerable children and parents, and increase the effectiveness of specialized services.

We want to be clear that in calling organized activities in communities "primary services," we are not trying to change their nature or the nature of people's relationships with them; we are not interested in rigidifying them, or turning them into bureaucracies. We have chosen the term "primary services" to help us make and to underscore the point that both the developmentally-oriented activities that primary services offer and the problem-oriented responses of specialized services should be part of an expanded conception of the overall organized social response that should be planned and provided for children and parents.

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

Enhancing Individual Capacities

Primary services offer children opportunities to develop and enhance fundamental capacities necessary in both childhood and adult life. Primary services can enable children to develop and maintain physical vitality, to make and sustain caring relationships, to be resourceful in applying knowledge and skills in effective action, and to gain a sense of connection to a larger community. Primary services respond to the developmental challenges children

face at different ages--as preschoolers, school-age children, and adolescents--and provide benefits that correspond to these stages of development.

Promoting Physical Vitality

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

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

For adolescents physical exercise is a way to become acquainted with and to adjust to rapid physical changes and is a significant source of release, mastery, and pleasure. Although many physical skills develop in the absence of organized programs, the needs for space, equipment, social arrangements, and instruction are seldom met except when organized opportunities are available.

Sustaining Caring Relationships

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

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

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

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

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

Enhancing Resourcefulness

Resourcefulness is the ability to act effectively in achieving goals for oneself and others. The components of resourcefulness are the possession of practical knowledge and skills, the ability to seek and sift information, to

learn new things, and to apply knowledge and skills in effective action. Primary services provide varied opportunities through which children can develop and test the effectiveness of their growing physical, mental, and social capacities. Opportunities to demonstrate resourcefulness build children's sense of competence and reinforce their willingness to take on more demanding challenges and to develop the capacities needed to master them.

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

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

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

Mastery of skills valued by adults is particularly important in building an adolescent's sense of competence and self-esteem. Primary services provide avenues through which young people can contribute to the well-being of others and exercise skills that are valued by adults. Adolescents can apply their skills in a wide array of roles and settings: they can enter the debate on social issues, participate in the operation of local organizations, and provide direct help to individuals. Contributions of these kinds can strengthen a young person's self-esteem, consolidate skills, and provide exposure to the demands and rewards of work.

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

Expanding A Sense of Connection to a Larger Community

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

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

For school-age children and adolescents, a sense of social connectedness is developed in groups where common interests are shared and in groups where children are linked to the traditions of past generations. A sense of social connectedness can build children's awareness of being part of a familiar, responsive world beyond family and school. Ongoing groups provide an arena in which young people can experience the expectations and rewards of accommodating personal interests to common interests, an accommodation on which the functioning of a democratic society depends.

A sense of social connectedness may be taken for granted in many families, but for those who lack close relatives or other social connections, a link to community groups can make a great difference in their ability to cope with life events, including the challenges of parenting. A sense of ongoing connection to social groups is especially important for a child who is facing adversity or for a family experiencing a particularly difficult challenge or change in circumstances.

Responding to Changes in Other Socializing Contexts

Primary services are only one of the socializing contexts important in children's lives. These contexts include families, communities, schools, and workplace opportunities for adolescents. Together they provide the settings in which children develop and together they jointly influence children's outcomes. In addition to strengthening individual development, primary

services can play a key role in responding to changes in other socializing contexts. Changes in families, communities, schools, and workplace opportunities increase the importance of primary services.

Families

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

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

For many single-parent families, as well as for an increasing proportion of two-parent families, the task of raising children is made more difficult by

poverty. For young people in poverty, primary services can help compensate for disadvantage by facilitating the development of skills and providing access to opportunities and to adult role models that are often otherwise unavailable. For families living in dangerous environments, primary services can provide safe havens in which children can be protected from exposure to negative influences, including random violence and pressures toward involvement in drug use, gangs, and early sexual activity. Beyond a protective influence, primary services provide a capacity-building orientation and set of opportunities in depleted communities. They provide avenues for engaging the energies of youth and adults in generative activities that can help counteract the sense of opression and contribute to changing the balance of what is present in otherwise depleted communities. We talk more about the integral role primary services can play in helping to rebuild depleted communities in Section IV, on implementation.

Communities

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

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

Schools

Schools are the universal developmentally-oriented institution for children in communities. As such, schools, and increasingly preschools, have been expected to take up the slack left by changes in other socializing influences on children. Schools are struggling to meet increasingly complex obligations for children's learning and development. Primary services can complement what schools provide and offer an alternative to further increasing the obligations schools are expected to assume.

Primary services offer hands-on opportunities to apply academic learning in practical situations that can consolidate academic skills and strengthen interests in continued learning. These opportunities can be especially

important for children who are not doing well academically or socially and who may have a tenuous attachment to school.

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

Workplace Opportunities

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

Providing Natural Sources of Help

People turn naturally to primary services for sources of advice and assistance. When individuals have unmet needs, their help seeking begins with people and resources that are familiar to them. Beyond reliance on self or family, people generally turn, in order, to friends, neighbors, primary organizations, and finally to specialized service agencies (Stagner and Richman, 1986). One reason people turn naturally to primary services for assistance is the sense of individual choice and control over the interaction that characterize relationships with primary services. Children and parents can turn for assistance to organizations offering primary services without having first to define the kinds of problems for which they are seeking help or to certify their eligibility.

Helping Vulnerable Children

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

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

Primary services have a variety of ways in which they can help children experiencing difficulties. Through informal and planned conversations and activities, primary services provide opportunities for participants to talk

about experiences with peers and adults in ways that can help interpret and make sense of experiences and that can provide a framework for mastery.

Programs often have special roles--managing equipment, leading activities, taking responsibility for younger children--to which children are appointed; these roles can confer a sense of special status and can involve extra time with and additional attention from both peers and adult staff. Roles such as these may be used by staff to give special attention to children in times of need. Staff can use their helping capacities to reach out to children and unobtrusively support them. And, when necessary, staff can sensitively assist families in seeking more specialized help.

Responding to Children with Special Needs

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

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

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

Increasing the Effectiveness of Specialized Services

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

At considerable expense and effort, specialized services may engineer substitutes for normative social settings. These social or recreational activities--day trips, special outings, sporting events--can be used as opportunities for children to practice skills they have learned. However, attempts to mimic the primary system are often less effective then incorporating children with problems in normative settings. This is true, in part, because children with special needs who attend only alternative programs are restricted to involvement with a group of peers with similar problems so

that what is considered normative behavior often becomes skewed. Children may also be less engaged in these situations because they feel that they are not participating in what they know to be the "real" world.

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

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

III. A NEW DEFINITION OF CHILDREN'S SERVICES: PRIMARY AND SPECIALIZED SERVICES IN A COMPREHENSIVE COMMUNITY ENTERPRISE

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

Broadening the Conception of Primary Services

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

Primary services are now thought of as a variety of separate recreational and social activities for children. They are not ordinarily conceived of as playing an instrumental role in children's development or as increasing the effectiveness of other institutions important in children's

lives. A fuller awareness of the potential of primary services is a prerequisite to any serious planning or investment in them. It is important for policy makers, planners, and providers to understand that primary services can form an infrastructure of resources for children and families that can operate more effectively if they are viewed, planned for, and provided in relation to each other and to specialized services.

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

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

primary service providers can also lead to recognition of opportunities for collaboration in achieving goals for children and families.

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

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

Increasing the Availability of Primary Services

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

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

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

Creating New Primary Services. Primary service offerings can be enhanced by adding primary service programs missing in a community and by creating new forms of services. An expanded array of primary services can be created by exploring greater use of existing facilities (such as schools,

parks, libraries, churches, and other community facilities). Collaborations among agencies with available facilities and those with available equipment and staff, or the capacity to train and supervise new staff, are one way to facilitate development of primary service programs.

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

Primary service programs may be begun through the initiative of a small group of parents or other adult volunteers. Facilitating the development of programs based on the ideas and initiative of youth is another avenue through which to expand available primary services. Youth or parent-led initiatives may be aided by existing agencies, government, foundations, corporations, or others. This assistance can include supplying physical space in which programs can meet, providing seed money grants for planning or program implementation, and offerning administrative supports such as clerical, legal, or accounting assistance, or creating mechanisms through which entities such as foundations can support unincorporated programs and through which programs can be protected from liability exposure.

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

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

Enhancing Staff Capacities

Primary services are quite diverse, and their staffing patterns are equally diverse, even within one type of primary service. Many primary services are small operations led by one or a few paid or volunteer staff with

little or no formal training in child development. Even the best-trained staff in the most developmentally-oriented organizations are unlikely to have knowledge about or experience with children who have special needs.

Some of the best-educated staff in primary service programs view themselves primarily in terms of their professional credentials, as social workers, librarians, ministers, or physical education teachers. Some staff identify with the mission of a particular primary service, age group, or activity, and they may refer to themselves as group workers or youth workers rather than by a profession such as social work or a vocation such as coaching.

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

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

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

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

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

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

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

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

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

Although staff and volunteers tend to be thought of as adults, children and youth are potential resources who should not be overlooked. Pre-

adolescents can be very helpful in programs for younger children as well as contributors to programs for the elderly. Adolescents and older youth can contribute in numerous ways. Providing young people with some training and certificates of accomplishment can alone improve and underscore the value of their work and provide proof of their work skills that could be recognized by employers who hire youth.

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

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

of peers as resources for program ideas and resources for refining their approach and practices with young people.

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

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

One option for the design of primary service training is to develop an entry-level credential along the lines of the Child Development Associate (CDA) credential created in the early days of Head Start at a time when federal day care guidelines were being developed. The CDA credential is a

nationally endorsed set of competencies--knowledge and practice skills--that can be acquired through a tutorial relationship between a child care worker and a qualified mentor. The CDA helped establish the foundation for the child care field as a vocation leading to a variety of professional options in early childhood education, and other specialties. The CDA has been criticized because it does not provide "credits" that would be accepted by a community college: a Youth Development Associate (YDA) credential could be developed in a manner that gives it credit value in a community college.

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

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

services to play a larger, more deliberate role in enhancing child and family development and in providing natural sources of help.

Specialized Services As Part of a Single Enterprise

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

Specialized services may be directed at limitations within a child's own functioning, such as emotional, physical or developmental disabilities, educational handicaps, delinquency, or alcohol and substance abuse. Some specialized services are directed at children's problems that result from interactions within a child's family or from limitations in parent functioning. These services address problems such as parent-child conflicts, dependency, neglect, and physical or sexual abuse. Within each of these groups of services, some are involuntarily imposed by legislative mandates, including juvenile justice services and child welfare services for dependent, neglected, or abused children (Kulla and Richards, 1991).

Just as primary services need strengthening to be able to effectively play the broadened role we envision, specialized services need attention to

problems in their design and delivery, particularly in the public specialized service systems. In fact there is a significant movement toward reform within the specialized service sector. There appears to be a convergence in this move for reform on a set of ideas or principles about the characteristics of the service reponse to child and family problems. First, the response should encompass the range of child and family needs across the traditional categories of funding and disciplinary perspectives. Second, it should build on individual strengths rather than focus exclusively on the identification and treatment of deficits. Third, with a state role in standard setting, monitoring, and financing, this response should provide greater community authority in the design and delivery of services, in ways more flexibly tailored to the needs of children in the context of their families and of families in relation to the communities in which they live. We are in full agreement with these principles. If used to guide reform, they would result in specialized services that would mesh with our conception of a responsive community infrastructure for children and families.

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

children and parents, and collaboration among them to make that recognition a reality.

Much of the argument for collaboration in the current debate about social service reform focuses on the need to integrate services for children and parents with multiple problems and critical levels of distress. We agree that facilitating access to services and making them responsive to families struggling with an array of problems, often with limited financial and other resources, is critical, and, in a later section proposing development of helping functions, we suggest ways in which we think this can be brought about. While recognizing the importance of collaboration for this purpose, we are proposing broader alliances for a broader purpose. Participating in this common enterprise means sharing a vision of the reach and range of responses that primary and specialized providers can jointly provide and of the powerful contribution they can jointly make to accomplishing their common aims for all children and parents, including those in distress.

In what follows we discuss a focus on communities as the context in which to create a comprehensive infrastructure of services and what steps must be taken in communities in order to bring this about. These steps include the development of community-based planning and decision making--by citizens and civic interests as well as providers--to plan an array of primary and specialized services responsive to child and parent interests and needs, the support of services that engage both primary and specialized providers, and the creation of mechanisms that make services accessible to individual children and parents. These things taken together can create a social service infrastructure that is comprehensive and coherent and that can contribute to creating responsive, caring communities.

Communities as the Arena for a Comprehensive Service Enterprise

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

More than for most other people, the various contexts in which children develop tend to cluster in the communities in which they live. At least through elementary school, children's interactions with friends, schools, religious organizations, teams, clubs, and other associations usually occur close to home. Beyond the convenience of relying on local resources and services, there are benefits to children from overlap in membership and expectations among the settings they experience. Children's development is most effectively supported where there are connections among the adults who play roles in children's lives and where the messages children receive from the various settings in their lives are consistent (Ianni, 1989, Coleman and Hoffer, 1987, Suttles, 1972).

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

they provide. Evidence of gaps in available resources and services and problems of fragmentation are also most evident at the local level.

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

Defining Geographic Communities

Because the concept of "community" has varied meanings, it is important to define what we have in mind in saying that communities are the appropriate territory for creating a service infrastructure. By community we mean a geographically bounded territory within which people live. It is a locality that can provide a shared frame of reference growing from a dynamic pattern of interactions, a shared history, and common interests. At minimum, these interests arise from living within the same territory, sharing the same institutions and services, and facing the common obstacles and opportunities presented by these resources (Levi and Litwin 1986, Warren, 1978).

Life within a geographic community can be seen as a social system in which functions central to daily living occur: goods and services that are part of daily life are provided and consumed; knowledge, values, and behavior patterns are transmitted, particularly to children; influence is exercised to regulate behavior in conformity with accepted norms; and access is provided to participation in joint activities, to opportunities to create and maintain interpersonal relationships, and to sources of mutual support (Warren, 1978). In Section IV we discuss criteria that can be applied in defining and

selecting local communities for the purposes of creating a common service enterprise.

What is Needed To Create a Common Enterprise

In what follows we discuss the steps needed to bring primary and specialized services together so that they function as a broadly defined, responsive infrastructure of social services for children and families. While this discussion focuses on the reforms needed to create an infrastructure of social services, enhancing the development of children and families and responding to their problems ultimately requires the engagement of a range of individuals and institutions in communities, including those primarily concerned with education and health care. In some communities, other needs, such as economic and physical development, have to be addressed if social service reforms are to achieve their potential benefits for children and parents. The process of reform we are proposing can accommodate the expanded goals and group of actors of a broader reform initiative.

Three critical steps are necessary to accomplish the alliance of primary and specialized services as parts of a common service infrastructure. First, communities need to create a plan for the provision of services that identifies the interests and needs of children and families and the current and proposed contribution of providers to meeting them. Second, within this planning framework, primary and specialized providers need to work together in developing activities and delivering services. Third, mechanisms need to be fashioned that facilitate access to and use of services, that make services function together for individual children and parents.

Service Planning

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

To function best, service planning needs to engage more than even the most extensive group of service providers alone. Planning is best done in the service of goals that reflect desired outcomes for children rather than process or procedural objectives. If goals reflect the outcomes a community desires for its children, they can serve as a unifying force for all service providers, guide the planning of services and the allocation of resources, and establish targets that providers can be held jointly accountable for achieving. Ideally, service planning should be a civic process in which service providers participate but do not dominate.

Positioning a community to plan for the provision of services has two aspects. The first is understanding the community's children and parents and the particular constellation of their interests and needs. The second, needed to complement this information about "demand," is information about a community's existing "supply" of resources and services.[11]

Understanding Child and Parent Interests and Needs. The interests and needs of children and parents should be the starting point for efforts to develop a community-based service infrastructure. Planners' conversations

with children and parents can be occasions for gathering and transmitting information of several kinds. First and foremost, children and parents can speak for themselves about how they see and define their interests and needs.[12] Surveys can be used to identify existing patterns of child and parent participation in primary and specialized services and to seek information on unmet needs and the priorities children and parents attach to meeting them. Surveys can also be used to illuminate child and parent knowledge of existing services and barriers to their use; to identify youth and adults interested in participating in a community planning process or in volunteering in the development or operation of primary or specialized services; and to allow families to express an interest in contacts from primary or specialized service providers. At the same time, interactions with families as part of a survey can be opportunities for transmitting information--about the existence of a community planning initiative or about the availability of existing services, for example.

The following categories are important to consider in gathering information from and about children and families for planning purposes.

Basic demographic data on families and family characteristics: Relevant information on families includes family structure, number and ages of children, presence and availability of adults, educational and employment status of family members, and special child or family characteristics or conditions, such as disabilities, divorce, unemployment, or other challenging circumstances.

Interests and needs of family members: Child and parent interests in using primary and specialized services should be identified, as should their current patterns of service participation. Children's

skill levels and preferences for participation in organized and competitive activities as compared to more informal or individualized involvement should be ascertained for planning primary services. Child and parent priorities should be identified.

Services that are not available and obstacles that interfere with or prohibit use of existing services: It is important to identify interests that cannot be pursued or needs that are not met because opportunities are lacking or because there are obstacles to accessing existing services. Barriers to the use of existing services should be identified, including lack of knowledge about them, waiting lists, costs of activities or equipment, eligibility criteria, lack or cost of transportation, or problems of safety or security such as the presence of gang activity or other unsafe or intimidating factors.

Sources of information about available services: Formal and informal sources through which children and parents learn about existing services can be identified, including, for example, friends and neighbors, newspapers, radio or television programs and announcements, community bulletin boards, and notices circulated by schools and other organizations. Once planners and providers understand the avenues though which children and parents learn of services, existing routes for transmitting service information can be used more effectively or efforts to broaden information routes can be undertaken.

Potential community contributions: Surveys can determine the interests, talents, time, and equipment that children and parents would consider contributing if there were a way to do so.

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

Inventory of Existing Resources and Services. The purpose of compiling an inventory of available services is, in the first instance, to match it against child and parent interests and needs as the basis for community service planning. Viewed in terms of the interests and needs of a community's children and parents, the inventory would provide the basis for identifying gaps as well as redundancy in existing services.

Like a survey of children and parents, the process of compiling an inventory should integrate thinking and planning about primary and specialized services and provide opportunities for interchange between planners and service providers. Information can be gathered about the existing pattern of

contacts among providers as well as the nature and extent of their interest in additional collaboration. Data on existing community services gathered in developing an inventory can also serve as the basis for creating an ongoing community information and referral function. The purposes and importance of an information function of this kind are discussed in the following section.

Information on existing resources and services of several types should be considered in designing a service inventory.

Primary and specialized services: An inventory should identify the individuals and agencies within a community that provide primary and specialized services, including the nature of the services they offer, their locations, schedules, capacities, and user fees, as well as other criteria controlling access to services.

Facilities: An inventory should include information on community facilities. A facility is a physical setting such as a building or portion of a building, a park or other open space or equipped area that can be used either for organized or for informal, unstructured activities. Facilities may include space available for public use in a library or school, such as a public meeting room, a stage, or gym; a park district field house; basketball or tennis courts; or a public swimming pool. Facilities already used for child and family activities should be described in terms of capacity, location, program uses, extent of utilization, hazards or problems (e.g. need for repairs or cost of operation). It also is useful to inventory facilities that are rarely or never used for children but that may be underutilized much or all of the time, such as theaters or fire stations, vacant land or buildings.

Communities can use a variety of methods to assess the array of primary and specialized services. Inventories should begin with information in existing directories. This can be supplemented through interviews with leaders of major organizations and other key informants. Data can be collected directly from existing service providers through mailed or telephone surveys, through in-person interviews, or through a combination of these methods. Inventories of existing services can be compiled by survey researchers, staff of public or private agencies, or volunteers including youth.

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

Ideally a process should be developed for assessing the contributions of services toward improving outcomes for children and families. This process needs to begin by better defining the range of influences primary and specialized services can have on enhancing the development of children and the functioning of families and on addressing child and family problems. Methods for evaluating the quality of individual primary and specialized services and

for documenting the joint contribution they make to a community's children and families are both needed.

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

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

If survey or other data about the community and its residents indicates that significant percentages of children are facing challenging life

circumstances, primary and specialized providers can recognize and jointly respond to these circumstances. If there are substantial numbers of families with children moving into a community, responsive programming should provide multiple points of entry into activities for children with various skill levels and patterns of prior participation to encourage the inclusion of newcomers. If substantial numbers of children are living in families with problems of unemployment, divorce, or other stressful disruptions, service providers can use the normative settings primary services offer as the first level of response. Primary service programs can include more down time surrounding prime activities to allow for conversation with peers and adults or other supportive activities that enable children to surface and make some sense of the stress in their lives. With input or staffing by specialized providers, primary settings can organize more formal groups for children or parents to discuss and begin to address difficult life circumstances. Staff can be attentive to children or parents experiencing serious difficulties and suggest connections to more intensive and individualized help from a specialized service when that seems warranted.

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

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

Cooperation Among Primary and Specialized Providers

Cooperation among primary and specialized providers is central to creating a common enterprise. This cooperation can include consultation on program design, collaboration among primary and specialized providers to assist individual children, and the operation of joint programs.

Program Design. The differences between primary and specialized providers, in orientation, training, and practice knowledge, can be useful complements in the development of program ideas and practices.

As primary service providers design programs in keeping with their purposes--to enhance development, recognize and respond to children with emerging problems, and to incorporate children with special needs--they may benefit from the input of individuals with specialized expertise and experience. Specialists in child development can offer information that may

assist primary service providers in adapting and designing programs to respond appropriately to the developmental tasks children face at different ages.

Specialized providers can assist primary services staff in learning how to recognize children with emerging problems and in developing a range of ways to respond to children whose actions or affect indicate that they are experiencing difficulties or who confide that they are distressed. This expertise can be made available to primary services through staff training, consultation, and ongoing interaction with specialized providers.

Staff of primary services can be aided in designing programs able to accommodate children with specialized needs. Children who are mildly mentally retarded, who have serious learning disabilities, or who are physically, behaviorally, or emotionally handicapped often can participate in mainstream primary service activities if modest accommodations are made to compensate for their particular disabilities. Specialized providers can offer expertise on effective ways to achieve these accommodations, which may include providing additional staff or volunteers, augmenting staff training, supplying adaptive equipment, altering rules in organized activities, and alerting staff to reasonable expectations of program participants with particular limitations.

In parallel ways primary service providers can aid in the design and delivery of specialized services. In the settings they create and activities they offer, primary service staff are skilled at creating a sense of trust among peers and adults and a sense of common investment in a group effort. This atmosphere can make it possible for young people to begin to address personal and social problems and to be open to using more intensive, specialized help.

Specialized services can incorporate the orientation and activities of primary services in their program planning and provision. Specialized services such as counseling programs, group homes, and juvenile detention centers can incorporate recreational, social, or other normative group activities into their programs. In conceiving and constructing these activities, specialized services can benefit from the expertise of primary providers about the nature and purposes of these activities, how they should be structured and staffed, the possibilities for youth roles and relationships with adults in these activities, and what youth outcomes activities of these kinds can affect. For example, rather than looking to youth officers in juvenile detention centers to run a youth newspaper, a music club, or a leadership development program as an add-on to their routine duties, the purposes of engaging youth in both specialized problem solving and in promoting their development may be better served by bringing staff of primary services into the design and delivery of primary services in a specialized setting.

Assisting Individual Children. Primary services expertise can aid a specialized service provider in understanding how a particular child is functioning in the normative settings primary services provide, how the child interacts with peers and adults, what the child is able to master, and what his or her tolerances seem to be. In turn, specialized providers can enable staff of primary services to better understand and respond to individual children with emerging problems or problems requiring ongoing specialized services. For a child actively working with a specialized provider, a primary service program could be aided in understanding the child's strengths and

limitations and in learning how to complement the goals of that specialized help.

As staff of primary and specialized services come to know each other better, to learn about their existence and capacities to help children, they can become conduits for referrals to their counterparts when appropriate. For example, a physician, therapist, or juvenile court judge could refer a child to a sports team, youth orchestra, or mentoring program, and could help place adolescents as tutors in an afterschool program, as coaches in a Little League, or as guides in a local museum. Similarly, referrals and connections could be made from primary to specialized services for children or parents who may benefit from them.

Joint Programs. A specialized service or specialized service provider can be included as part of a primary service program and primary services can be offered in tandem with specialized help. These joint endeavors can entail hiring a specialized service provider as staff of a primary service or bringing specialized services into primary service settings. To take one example, a physical therapy program could be run in a Y as an adjunct to a regular swim program so that children have access to therapeutic swimming in a normative setting and can participate in both the primary and specialized aspects of swimming.

Similarly, a specialized service can integrate the substance, settings, and symbols of primary services into its programs to reinforce the goals of specialized helping. The peer support, leadership development, youth contribution, and skills development programming of primary services can be incorporated in foster care, mental health, juvenile justice, or other specialized services. The waiting rooms that exist in many specialized

service organizations provide one very focused opportunity for joining primary and specialized services. Collaboration with a primary service program could convert the waiting room into an opportunity for socialization, skill building, and social support for clients while offering specialists an opportunity to observe and interact with their clients in a relaxed or playful environment.

Agencies can offer a variety of both youth development activities and specialized services that address youth needs. These programs can be very broad in scope offering arts, sports, academic enrichment, community service and leadership development, among other primary services, as well as specialized services such as health care, employment training, counseling, and legal services. A broad, comprehensive array of services located in a single organization may be particularly appropriate for children living in communities with otherwise limited opportunities.

Conditions Needed to Sustain a Common Enterprise

The kinds of alliances we are suggesting are not trivial undertakings.[13] They require moving beyond differences in orientation about the role primary and specialized services see they are playing in children's lives and the relationship they believe they have to each other; they require developing a shared sense of purpose, a common language about purposes and practices, and they require time together to address problems as they emerge. The following are among the conditions needed to create and sustain a sense of common enterprise among primary and specialized services providers.

A shared purpose: Primary and specialized service providers need to forge a sense of common purpose, bringing their orientations and expertise as individuals and as organizations to the joint task of

promoting development and responding to problems. Both primary and specialized providers need to draw on shared goals for children to which they are committed in working together. While we are not talking about abandoning the unique purposes of individual providers or agencies, we are talking about altering and extending those purposes through alliances among primary and specialized counterparts.

The local community context within which we propose that a service enterprise develop can facilitate the process of service providers arriving at shared purposes. By working within the same community, providers will be serving the same children and parents. They will be sharing an environment that presents the same opportunities and obstacles that they may be better able to leverage or solve by acting jointly. Local problems whose solution depends on collaborative action can stimulate alliances among providers and their joint actions can contribute to strengthening the communities in which they are working (Golden, 1991).

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

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

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

Making Services Work For Individual Children and Parents

Creating a common service enterprise depends not only on planning across the entire span of services, but also on having a mechanism that makes the full range of services accessible to individual children and parents. The assistance available to make services coherent and responsive to an individual

family should mirror the family's situation: as a family's needs increase in complexity or intensity, so should the mechanisms available to help. It is this help that can translate what might otherwise be discrete, unrelated services into a coherent, responsive service system for an individual child and family.

Analogous to service planning that provides a mechanism for creating a common service enterprise at the community level, mechanisms that create a coherent service enterprise for individual children and parents are the availability of information about existing services and the existence of individuals able to provide increasingly intensive help in creating strategies for use of and access to services.

An Information Bank. Information is a fundamental prerequisite for access to services and for their effective use. For many children and parents a resource providing information on available services would facilitate their choice of and access to services responsive to their interests and needs. Communities should have an information capacity through which families can learn about available primary and specialized services. A strong information resource is also essential to facilitate collaboration among providers and to help them make appropriate referrals to primary as well as specialized services.

An information bank can be a minimalist structure of reference information or a more fully developed operation that provides data to answer diverse questions about the particular interest and needs of individual children and parents. Among its functions would be cataloging and communicating data about primary and specialized services in the immediate and surrounding communities, including for and by whom they are provided, and when

and at what cost they are offered, along with other data relevant to choice and use. An inventory of existing services, maintained and updated over time, could be the basis from which an information bank could be developed.

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

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

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

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

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

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

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

In what follows we describe three helping functions: information specialist, family advocate, and case manager.[14] As we conceive of these functions, we believe that most people would have reason to use information specialists from time to time, many would have occasion to turn to a family advocate at some time in their lives, and a small number would require the services of a case manager.

Information Resource Specialists: For those families who want help in finding relevant information, an information resource specialist would engage in discussion, in person or by phone, to clarify their interests and needs and to provide information about the range of relevant primary and specialized services.

The first level of assistance from an information specialist would be technical and would involve demonstrating how to use the information bank or operating it for an individual. This service could be provided by salaried outreach workers or by trained volunteers. Retired or semi-retired professionals, including human service workers who are interested in continued involvement with their community, would be ideal recruits. In addition to helping focus questions and direct inquiry, they could be available at a

variety of locations to help consumers learn to use the information bank independently. Adolescents could serve as information specialists particularly for other young people in settings such as schools, libraries, or youth organizations.

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

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

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

Family Advocates: If families want help beyond learning what services

are available, an individual acting as an advisor or advocate could offer additional assistance. This process would help sort out problems and create a strategy for using assessments and other primary and specialized services that may match family interests and meet their needs.

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

For families who have difficulty negotiating a route to these or other services, the advocate would be available to negotiate on their behalf and, in the process, to model a problem-solving process. This may empower the family to consider and develop additional strategies as needed. Parents could return for further problem solving or seek additional counsel by phone until they have developed a satisfactory course of action.[15]

The advocate could help make linkages to community services but would not do their job. He or she could be available for a fee, or as a community service for a limited number of contacts annually. It will be a delicate matter to balance the constant neediness of some families, the needs generated by crises that can occur in any family, and the needs of families who may not be in crisis but who would benefit from timely help sorting out emerging problems.

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

The family advocate's life experience, openness, and problem-solving style may be as important as professional training or experience. No one can possibly have all the knowledge relevant to the range of questions that could arise. A capacity to sift data, to think flexibly, to draw on past experiences, and to know the community and its resources are all important ingredients for creative problem solving, which, more than anything else, is what the family advocate would offer, share with, and teach families. The advocate can best be described as having assessment skills melded to the role of the traditional caseworker who saw his or her task as viewing clients in their community context and empowering them to take charge of their lives. For families with multiple service needs and the incapacity to secure or

manage these services, the family advocate might refer the family to a case manager.

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

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

The case manager should have access to a flexible pool of funds with which to pay for arrangements that make a service strategy work--funds that act as the glue for a service plan--and that are unavailable from other sources. These payments might include expenditures for concrete needs such as transportation or baby sitting services or enrollment or equipment fees enabling a child or family to use either primary or specialized services. A case manager might also use these funds to assist primary service providers in making necessary accommodations to serve a child with special needs, by providing adaptive equipment, for example.

Ordinarily the appropriate training for a case manager would be a graduate degree in social work, psychology, nursing, or another human service

discipline, broad experience in primary and specialized services, creativity, diplomacy, and optimism.

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

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

Given the challenges facing children and families and the limitations of our current problem-focused service response, we have argued that it is time for a fundamental redefinition of social services. Services for children and families should be informed by a shift in both policy and practice, from an exclusive concern with responding to deficits to an orientation that also includes enhancing the development of children and the functioning of

families. This fundamental redefinition of services should enhance the role and presence of primary services, combine primary and specialized services into a common infrastructure, and focus on communities as the arena in which the planning and provision of services can be made responsive to child and family interests and needs. To the extent that citizen and civic interests are engaged in planning and overseeing the provision of services and that the array of resulting services are responsive to child and family interests and needs, the input and guidance of citizens and the satisfaction of consumers is likely to contribute to building an enhanced sense of community and a greater investment in sustaining it.

IV. TOWARDS ACHIEVING THIS VISION: IMPLEMENTATION ISSUES AND STRATEGIES

In this section we focus on the processes that can lead to implementation of the ideas outlined up to this point, and the structures that will help sustain changes that are brought about. While we return to discuss these issues in more detail, we want to acknowledge at the outset that there are a number of conceptual and practical challenges in implementing a vision as broad as the one we have presented. Some of these challenges are generic to the implementation of innovations; others specific to our premises. The ideas we propose will have to find their way into a mature, complex, and in many communities fragmented social service environment. Many of the pressures operating within this environment may mitigate against wholehearted commitment to innovation. We envision a reform process that would take years in most contexts, and at some point require real political commitment to institutionalize. It will require significant commitment to local democracy and governance, including the involvement of a range of community members, and in some cases a significant redeployment of public resources.

Certainly our proposals suggest a much greater awareness of the importance of primary services, and of creating responsive services--both primary and specialized--in a time when public resources are under great pressure. What it will take to finance and build the redefined service enterprise we envision will differ in different communities. In all cases the existing primary and specialized services already in communities will need to serve as the basic building blocks for a more broadly conceived and coherent service system. This system must harness the existing service authority and

financing in a community and build on that. We are not suggesting building a new infrastructure on top of or beside what already exists within communities. What it will take beyond harnessing the human and financial resources already being spent on primary and specialized services is one of the important lessons to be learned from demonstrations of these proposed reforms.

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

In disadvantaged communities with inadequate service infrastructures, much more will be needed including rebuilding the investment from public systems on both the primary and specialized sides. In these communities reform of social services would have to be connected in some way to reform of the larger social ecology of children's and families' lives: housing, employment and jobs, nutrition, health, education, and community safety. Building a responsive infrastructure of services that recognizes the legitimacy of primary services can both complement and strengthen reforms in these areas of basic human needs. A network of primary services offers the presence of a capacity building orientation and opportunities that can build on and mobilize the investment of children and adults in generative activities and in creating environments that help mitigate against the effects of poverty. Strategies to reclaim and rebuild an infrastructure of responsive

services can play an integral role in larger reforms within depleted communities.

The "problems" for which our proposed reforms are a "solution" are similar only in a general sense across communities. They are similar in that there are bureaucratic challenges, challenges inherent in institutional reform, and the like. In more specific ways, that is in terms of the social and psychological realities of children's and families' lives, and in terms of the specifics of community context, the "problems" vary significantly from one community to another. Each community is going to present different opportunities and constraints to reform, and have a different capacity to bring about and sustain changes.

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

The impetus for reform, the mandates with which reform begins, the purposes articulated for engaging in a reform process, patterns of participation in the process, and not least the nature of the local community and pre-existing service enterprise will all influence the way in which a local community relates to the ideas we have presented. Each community is

going to present different opportunities and constraints to reform, and have a different capacity to bring about and sustain changes in services. There are also different ways to envision initiating and undertaking a change process. The impetus for change can come from inside or outside the community. It can come from community leaders, providers, citizens or citizen groups, local or state government, enabling legislation, or a foundation. Change can focus initially on just a few discrete tasks involving just a few providers, or it can be conceptualized from the start as community-wide. The process can be narrowly held or broadly participatory. What constitutes the community can be defined in different ways. Each starting point, each strategy for bringing about change, each parameter set on the locus and scope of change, brings with it certain strengths and certain limitations. In what follows we illustrate a variety of alternative ways to move toward implementation of the ideas we have presented. Our intent is to acknowledge the diversity of possible starting points and processes for achieving these reforms.

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

the greatest benefits for children, families, and communities are likely to come from creation of an infrastructure within communities which includes the full range of reforms we have described.

We frame our discussion in this section by reiterating the arguments embodied in our third idea--that is, that communities are the most appropriate context for creating a responsive service enterprise. There are a number of reasons for focusing reform efforts at the community level. Communities are the level at which the quality of supports for families and the quality of connections among service providers are most obvious and salient. Dissonance, fragmentation, and cross-purposes are most clearly seen and felt at the community level. A community focus encourages providers to ask themselves what kind of a place the community is for children and families, and how they may be influencing the quality of life in the community. Those most affected by changes in services--both providers and consumers--are likely to be found in a local community. Finally, in a complex society with scores of competing interests and claims, the community seems to be a relatively more "governable" social unit than society as a whole.

At the same time, a community focus implies more variability in the starting point, the process, and the product of reform from community to community. Taking the community as the locus of reform requires those involved in reform to consider the boundaries of the local community, for their particular purposes. Questions of size and scale have to be balanced with the issue of political salience. Should the community be defined in a way to ensure political representation in city or county government? Taking the community as the locus of reform requires consideration of whom and what the community is made up, and of what the fault lines are, as well as the

common ground. Should the definition of boundaries promote, or even consider, class, ethnic, racial, and religious heterogeneity? How will local reform processes be linked to and influenced by institutions outside the local community? Should people who live outside the community but spend substantial time there be considered part of the community?

Selecting Communities in Which to Create a Service Enterprise

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

There are a number of criteria to consider in selecting a particular area as the boundary within which to develop a service system engaging both primary and specialized services. These criteria include: (1) the extent to which there is a sense of affiliation by area residents; (2) the area's geographic size; (3) the size of the child population; (4) the stability of boundaries over time; (5) coincidence with boundaries of other relevant

jurisdictions; and (6) whether the area possesses an existing governance entity.

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

A Sense of Affiliation. A sense of affiliation entails a perception of relation, affinity, and mutual interest among community residents, and of "belonging" to a community. A sense of affiliation arises through a number of possible avenues. It may come from sharing a history; through realization of common interests, or recognition of interdependence; or from having shared commitments to norms, values, attitudes, aspirations, traditions, or patterns of culture. A sense of affiliation is advantageous in creating a service system that draws on the resources of local individuals and institutions in responding to child and parent interests and needs. A sense of common interest and shared endeavor is a source of good will and motivation that can help in creating and sustaining the joint planning and provision of services on which a service enterprise will depend. A sense of affiliation is particularly relevant in circumstances in which generating and sustaining reforms depends heavily on the initiative and ongoing investment of local residents.

Size of the Geographic Area. The geographic area in which an enterprise is created should facilitate access to services: larger areas may inhibit

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

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

Stability of Boundaries. Creating a responsive service enterprise is dependent on knowing the children and parents who live within it and understanding their interests and needs. Generating the collaborations between primary and specialized services on which this enterprise is premised requires that service providers know each other and build a history of working together to meet common goals. Both of these prerequisites--shared knowledge of children and parents and working relationships among providers--are harder to create and sustain if the boundaries of the enterprise, its people, and providers keep shifting.

Coincidence with Other Relevant Boundaries. To the extent that a potential area for developing a service enterprise encompasses the boundaries

of relevant public services and voluntary organizations, the investment of these institutions in joint planning and collaboration should be enhanced. If an organization's service district is only partly encompassed within the boundaries of a newly-defined reform initiative, its organizational interest will be only partly invested in what happens within this evolving enterprise. If an organization's service area is split among several community planning and governance areas, its own service planning and provision may be fragmented.

Reforming contracts between service providers and state agencies such as child welfare, mental health, and developmental disabilities, so that they are geographically based could enhance collaboration among service providers and support community-based service reforms. Contracts could be written not to serve a total number of children as at present but to serve a defined geographic area. Present contracting arrangements inhibit cooperation among agencies because agency staff are required to work over geographic areas too extensive to enable them to know or routinely interact with staff of many other service organizations. In addition children are likely to be served in ways that disrupt community ties.[16] Geographically-based service contracts would give agencies a vested interest in helping to generate and sustain other resources in the community that are needed by the children they serve and would thus stimulate a natural interest in community-based service planning.

While it is unlikely that the boundaries of all relevant services will be encompassed within proposed community boundaries, it may be possible to pay particular attention to those services or organizations considered critical for accomplishing immediate goals for children and parents.

Existing Governance Entity. It may be advantageous if the boundaries of a potential service enterprise contain an existing governance entity that is elected or created in a representative manner. It would be an added plus if this governing body has existing mechanisms for citizen input as well as experience in the administration or provision of primary or specialized services.

An area with a governance entity that has control of financial resources is also advantageous. For example, a village government could use a portion of its budget funds to stimulate interest in the development of a service infrastructure among providers, policy makers, and the broader public. Resources of a local governing body such as staff or facilities can also be useful as in-kind contributions to infrastructure development.

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

The process of designating communities in which to develop a service system will differ depending on whether reforms are to be uniformly instituted across an entire region or whether selected communities are to be identified

for the purposes of the demonstration and testing of these proposed ideas. In applying a set of criteria across a region there is likely to be considerable variation in the extent to which areas exhibit key characteristics. In a demonstration approach, there is more flexibility to draw geographic boundaries in order to maximize those criteria considered central to the reform or to look for existing community areas that demonstrate these characteristics. There are risks to this approach, however, in that boundaries of convenience may be drawn to exclude families in socially and economically marginal areas.

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

In some circumstances, leadership for reform may suggest community boundaries. For example, if leadership lodges in a mayor, with a group of citizens, or in a consortium of parishes, these leaders bring with them the boundaries of the geographic areas they represent. If the leadership for reform represents areas that fall short of matching selection criteria for

defining community boundaries, some of these shortcomings can be addressed: a city can be subdivided for the purposes of creating local governance entities or areas too small to create and sustain service planning and provision can amalgamate with adjacent partners.

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

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

It is important to see how the ideas we have proposed play out in a variety of settings if we are to understand the power of these ideas to stimulate reform. There is an array of issues that need to be understood: the obstacles and opportunities in creating and sustaining a comprehensive service enterprise in communities of different sizes, types, and locales, and in settings in which leadership originates at the local level or is stimulated from outside; the threshold number of children and array of services needed to

sustain the planning and provision of a responsive network of services; what community governance entities function well, what obstacles they encounter, and how they address them; what outcomes for children, parents, providers, and communities are reasonable to expect from these reforms. The aim of demonstrations in a variety of community settings is to use these initiatives as a group of natural experiments from which to learn what does and does not work well, for whom, and in what circumstances.

Impetus for Reform

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

Who initiates efforts to implement the ideas we have presented, and why they do so, has ramifications for the whole reform process. If, for instance, reform is initiated by a public or private institution outside a local community, there may be issues related to the community's motivation to undertake reform, who the local agency or group should be that leads the reform process, and what the perceived need for these specific changes really is locally. When an external institution initiates the change process it will have to address the question of whether the community has to demonstrate some degree of coherence before receiving funds. If reform is initiated by local

providers, whether on the primary or specialized side, there may be issues related to ownership by non-sponsoring providers, and opening up the process to non-providers. Conversely, if reform is initiated by community members outside the service enterprise, there may be issues related to providers' reasons for buying in to the process.

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

It is possible that an opportunity to implement the ideas we have presented in this report will be linked to other reform efforts planned or underway. For example, providers within a local community may be required by new laws or regulations to provide new functions, such as case management, or to work more closely across agencies to coordinate services. Or there may be

a new mandate to serve certain children differently or to serve children not served before. New mandates can be viewed simply as additional demands placed upon an already overburdened service system. Or they can be viewed as an opening to a broader process. In other words they can be viewed opportunistically--in the best sense of the word. Our ideas seem particularly well-suited to the many states and localities currently interested in strengthening the role of "community-based" services in the overall service enterprise. Few of the current proposals for such reform consider the potential of primary services to serve as a vehicle for redefining what children's services are all about.

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

Planning Processes and Their Implications

By planning processes we mean all the activities that lead to implementation of the ideas we propose in this monograph, and secondarily to the continuing activities that occur to refine and maintain implementation. Just as the impetus for reform can come from different sources, the process that occurs subsequent to that impetus can vary enormously. It can be self-initiated or stimulated by something outside the community. It can be

self-directed, or guided by a professional community development specialist or planner. It can be closely held or broadly participatory. It can be comprehensive or limited, time-bound or ongoing.

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

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

the planning process is about something broader than coordination between two institutions.

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

The composition and size of the planning group, like the purpose of planning, should also be viewed as evolutionary. Early on it often makes sense for the planning process to be guided by a relatively small group, in the interest of being able to get organized and move ahead. The new initiative needs a solid base, and this often means building a tentative

conceptual vision and political support among a like-minded group of people. At the same time, the initial planning group has to remain aware, has to continue reminding itself, that it is representing only a small portion of the community. Both the vision and the political allegiance will be tested, sometimes sorely tested, as the initiative widens to include more segments of the community.

One of the first tasks of those planning to implement the ideas we have outlined in this monograph will be to relate these general ideas to the existing social service environment and to the lives of children and families living in the particular community. Relating the general ideas to community realities is the first step in creating a coherent vision of what local reform is going to be all about. The planning group might develop a set of questions about children, families, and the service system as a starting point for its activities. Questions might range from which children have contact with which kinds of institutions, settings, and services currently, to what roles different providers play in children's lives, to what resources, from what sources, are coming into the community as a whole. Some of the basic information gathering should point toward illuminating the match (or mismatch) between the structure, funding, emphasis, and balance of existing local services on the one hand and what children and families say their needs and interests are on the other. All these threads then begin to lead to directions for change. Along with determining information to be collected, the planning group has to consider how it will gather information relevant to addressing some of these questions. (See our earlier discussion of community inventories for ideas about this.) The planning group also has to consider how and when it plans to pull different stakeholders and interests into the

planning process. Not least, it has to define its own task, what it as a group is trying to accomplish.

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

Leadership and Governance

It should be evident by this point that the implementation of our ideas would (1) lead to a new focus on the organization of services at the local level, (2) bring community members more fully into the service planning and governance processes, and (3) lead to new relationships among service providers. Both the process and the product of reform would have to be conceptualized and managed within the community, and this suggests some kind of governance processes and perhaps a governance entity. We do not normally think of services for children and families as being governed by one entity, nor as being governed at the community level. That is in part because of the

fragmented and categorical nature of services, and in part because we do not think of most services, especially specialized services, as bounded or "owned" by the community in which they are located. We would argue that local governance can be thought of as a lens for refocusing people's view of services, for defining a framework for altered relationships, and then as the glue that will hold the redefined local service system together. In this section we discuss the tasks and issues that should be considered in developing a governance approach to accompany our proposed reforms.

A Governance Entity

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

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

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

Institutional Base

There are two basic choices, as well as variations within each, in locating a governance entity institutionally within a local community. Such an entity can be based in and supported by an existing community institution, whether a human service agency, a church, a neighborhood organization, or an existing neighborhood council of some sort. In this case it has the advantage of existing institutional resources and capacities, and an already-organized constituency. At the same time it faces the task of pulling in other institutions and constituencies, and reassuring them that it is serving as an

honest broker, that the initiative is their initiative. As an alternative, the governance entity can be created as a free-standing entity. In that case it is not burdened by its pre-existing association with a defined perspective or constituency. It nonetheless faces a different kind of credibility-building challenge, this one in relation to the existing institutional environment. An initiative can also start out based in or tied to an existing institution or group, and later separate itself and become free-standing. The governing entity can also become incorporated or remain unincorporated. This last choice depends to some extent on whether the governance entity will want to control and manage funding.

Tasks and Responsibilities

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

to provide ongoing attention to a new initiative. This might be especially appropriate in cases in which a governing entity is responsible for managing the funds that are available to a reform effort, or perhaps even the overall funding of the newly constituted service system itself.

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

Composition, Selection Procedures, and Roles in a Governance Entity

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

Some "governors" could be elected or appointed to represent special interests, others the whole community. One could imagine setting criteria

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

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

A critical objective of establishing representativeness on a governing entity is to build a sense of local ownership in an initiative. People are less likely to feel a sense of ownership in something in which they have little or no voice. In general, no one segment of the community should dominate a governing body. The beliefs and interests of providers, children and parents, religious and civic leaders, elected officials, the business community, and so on should all be represented in a governance body. Of course, none of these segments is itself monolithic: not all children and parents have the same beliefs and interests, nor do all providers, or all the member of other groups. It should also be noted that "youth" should have their own representatives in a governing body, not just because they are "consumers", but because they have a responsibility to maintain their community.

With respect to continuity of governance, the group responsible for initiating reform may not be the same as the group that eventually governs an initiative. Change agents do not necessarily make the best ongoing leaders. Moreover, as noted above, it is important to broaden the base of the initiative over time. Defining representativeness has to be a negotiated task. This suggests that the core group involved in reform reach beyond its membership in considering this issue. Nonetheless, how representativeness in a governing entity is defined will usually depend to some extent on the initiating group's view of what communities are made up of and where direction for reform should come from.

Legitimacy

Legitimacy involves two related issues: first establishing the right of the governing entity to plan, make decisions, represent the community's

various interests, and so forth; second, being viewed by different segments of the community as the best place to accomplish these tasks. Legitimacy is both formally established and earned. It can be established by such means as elections, legislation, appointment and delegation of responsibility by those already having authority and legitimacy, and through personal involvement of those with authority and/or credibility in the community. For example, if the governing body is made up partly of those with an acknowledged longstanding commitment to the community's children, they bring "legitimacy" with them. Representatives of important institutions bring a certain kind of legitimacy also, albeit a somewhat narrower kind.

In its most important sense, legitimacy is not something that can be proclaimed. Those involved with a new initiative should expect that it will take a few years for that initiative itself, and the ideas underlying it, to earn the trust and understanding of the community. The key will be to cultivate some common ground, and keep expanding that common ground. At first, the common ground may be primarily a forum for different community interests to get together and talk. At that level, the whole enterprise is still about negotiation among special interests. At some point, those doing the talking have to be able to stop feeling required to represent some set of interests, and simply bring "themselves" to the forum. This is the first step in a process that should point toward an identification with the whole community in all its heterogeneity. The same process occurs in the field as different providers learn to work together more and more deeply, genuinely sharing responsibility, rather than engaging in a proceduralized dance, that is about limiting one's responsibility while maximizing one's discretion.

In a general way the activities of the governing entity contribute to building a sense of community. The governance entity becomes the embodiment of the abstract idea of the community's shared interests, as opposed to the interests of particular segments of the community. Paradoxically, while the governing entity is made up of the various interests within a community and its service system, it also represents the community as a whole in negotiating and working with specific interests. In their role as part of a governance entity, particular interests are forced to try to consider the interests of the overall community.

Boundaries

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

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

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

In many cases there may not be a larger process of organizational and finance reform surrounding the development and governance of a redefined local service system. Those involved in creating a new system are thus likely to have to deal with a variety of institutions, including state and local government, about resources, waivers, subsidies, legal mandates, and the like. External institutions in turn will want to be assured that there is some local body that is accountable for the ways in which resources are used, that can provide assurance that children's and families' due process and other legal rights are protected, and that can negotiate waivers and the like. In a different vein, people who live in one community often use resources in other communities. Thus there will also have to be negotiation with institutions in other communities regarding children from the affected area who use services in those other communities, and conversely children from those communities who

use services in the community being reformed. If a local provider, whether primary or specialized, is going to provide his or her services differently, and some of those services are used by children who live outside the community, what voice does that child's parents and community have in this decision? If the reformed community is going to use its resources differently, might this affect a family's ability to choose a specialized service located outside the community for a child with specialized needs?

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

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

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

Sources of Funding for Elements of a Redefined Service Enterprise

While a redefined service enterprise may be stimulated by private or public funds, much of the funding for ongoing activities within this enterprise will have to be public funds, if this system is to remain viable. When one looks at all the funds spent in a community on both primary and specialized services, even in a resource-scarce context, it is clear that there are substantial resources potentially available for the ideas we have proposed. The bulk of current funds, nonetheless, are categorical, and the implementation of our ideas implies the necessity of shifting some of these funds to non-categorical services and activities. Innovative funding

strategies have begun to emerge in different states and localities; these provide possible options for locally based reform. They include:

- Joint funding of particular local initiatives across systemic and agency lines; for example, mingling public education and United Way funds to provide private-agency-managed after school programs in local elementary schools

- Authority over use of state funds delegated to local authorities (through incremental decategorization, waivers, etc.)

- Frontline service financing through use of flexible dollars; that is, giving frontline workers access to funds to purchase services for families (Sar Levitan and colleagues have even proposed something equivalent to a voucher system, giving families an account that can be used to purchase services.)

- Using federal entitlement program funds (e.g. EPSDT, Title XX, Community Development Block Grants) in expanded ways

- Reconfiguring categorical funding streams into functional funding streams; for example, information and referral, case management, counselling, child care, youth work, and so forth (See State Communities Aid Association, 1991)

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

Governance and Funding

Complementing the question of how a reformed system of services is funded--that is, where the funds will come from, and what part of all funding for children's services they constitute--is the question of who will control

the deployment of funds. For example, it is possible to conceive of the governing body of the reformed system controlling all the funds (at least all the public funds) for services in a particular community, some of the funds, or even none of the funds. Funds sometimes chase children or sometimes go to district offices for use as they see fit. Under one scenario, all the state agencies serving a community might give the funds that would have gone to serve resident children or flowed through their local district office to the new governing body. This body may or may not channel that money back to the district office. Under a different scenario, the funds would still go to the district office, but contingent on evidence of its participation in the new system of services. Under still a different scenario, the governing body might directly control certain types of funds but not others.

Obstacles and Challenges

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

usually geared toward maintenance. In other words, it will take a lot of energy and imagination not only to implement the ideas we have proposed, but even to conceptualize what a re-configured and expanded service enterprise will be like.

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

Too often reform is imposed on communities, agencies, and frontline providers from the outside. Nobody asks those most affected what the key issues are, how reform might be undertaken, or what some of the expectable obstacles are. In other words, there is not enough of what Richard Elmore has called "backward mapping," starting with what is currently happening between families and providers, asking what is shaping that, and then what is shaping that, up the line (Elmore, 1982). While the planning and governance dimensions of our proposals address this issue to some extent, it will be critical to overcome the temptation to assume the problem being addressed by a reform effort is understood, rather than trying to figure out what the problem is.

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

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

There are a number of challenges related to our focus on the local community as the place to re-think and re-do services. We noted earlier that establishing the boundaries of the community will be an issue, not least because each person or institution at the table will be working from different boundaries. Almost any choice made will seem overly inclusive to some and

overly exclusive to others, and perhaps nonsensical to still others. One way to deal with the inherent arbitrariness of this decision is to make the initial definition of what constitutes the community an interim definition, subject to modification based on experience with the new initiative. Related to the question of boundaries is the question of how to construct the "community" out of its constituent elements. There is no such thing as an overarching institution or group in a community, one that can be said to symbolize the whole community. Each represents some interest or constituency or segment of the community. The challenge is to make the governance of a local initiative more than simply a negotiation among those representing various segments of a community for a piece of a reconfigured service pie, to make the idea of a common enterprise more real than rhetorical. Those involved have to give up at least part of their autonomy in the service of building something new.

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

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

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

demonstrate through their involvement that they want a role in service priority-setting and governance.

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

While each community context presents different challenges to the implementation of our ideas, the challenges in inner-city communities are likely to be qualitatively greater. Historically, primary services have been a key part of the "developmental infrastructure" of inner-city communities (Price, 1989). But today institutional sources of nurturance, supervision, and socialization for children are thinning out in the inner-city.

We have talked earlier about the compatibility and importance for depleted communities, of linking reforms in social services with reforms aimed at rebuilding a community's physical and economic infrastructure as well. The challenge of reinvesting in and building a base of primary services in inner-city communities is likely to be substantial in itself.

The financial health, the quality of program operations, and in many cases the survival of child- and youth-serving agencies in the inner city have become increasingly tenuous. The many reasons for this include increasingly tight budgets and the growing difficulty of finding qualified staff at the salary levels offered in youth-serving agencies. The primary problem, though, is the inherent difficulty of sustaining a healthy institution in an environment that tends to drain and undermine institutions of any sort.

At the same time that primary service institutions are under growing pressure, the need for them in the inner-city is expanding. The attributes that characterize good primary services--caring, available adults, safe predictable environments, developmentally-oriented activities, simple fun, the opportunity to test and explore ideas, feelings, and identities--take on added

importance in contexts in which children are getting too few of these things elsewhere. At the same time, the pressures associated with trying to be there in fundamental ways for so many children can be overwhelming, even when resources are not inadequate.

Some of the implications for considering reform in inner-city communities include:

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

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

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

- special efforts to involve institutions outside the community in supporting local reform. These include government, philanthropic institutions, and major human service providers, among others

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

While the challenges of implementing these reforms will be great, and potentially greatest in depleted communities, we believe that it is a challenge worth meeting. The efforts to implement the ideas we have proposed in Chicago should provide insights and learning about whether and how these challenges can be met. What is critical we think, is that communities,

funders, government, and others adopt an exploratory and experimental spirit, assuming our ideas as a starting point and conceptual framework.

Understanding the Difference These Reforms Can Make

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

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

Once outcomes have been clarified, an equally important issue is defining the measures that reflect progress toward meeting these outcomes, for

example, measures that reflect evolution in the development of local leadership or the evolution of a collaborative community decision-making capacity. We risk declaring community-focused reforms a failure because we lack clarity about their outcomes and an inability to track intermediate markers of progress in reaching them.

Other issues to be addressed in developing a methodology to evaluate community-focused reforms are the fact that reform initiatives are projects that by their nature change as they develop over time and in some aspects of these reforms the process is the outcome. Creating a collaborative decision making entity within communities or developing the capacity of a variety of kinds of service providers to work jointly in the provision of services are illustrative of processes that represent intended outcomes in their own right.

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

Developing an effective evaluation methodology will require addressing the difficulties of defining "the intervention" given often wide variations among sites within the same reform initiative. Moreover much of the success of these initiatives will depend on the context of individual communities and on what occurs within them independent of the initiative, for example, on the

nature and extent of cooperation within a community and on other resources that may or may not exist or come into the community, that is, on events and circumstances that are less controllable than traditional social science variables.

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

V. CONCLUSION

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

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

Beyond these distinctions, the ideas we are proposing bear surface similarities, and important differences, to some of the common tenets shared by current proposals for service reform. Many current reform proposals encompass a shift in focus toward prevention. While a preventive focus moves away from the current service philosophy designed to solve problems that are chronic or severe, it maintains a deficit orientation: the prevention of problems. In contrast, we are proposing a fundamental shift in policy and practice to encompass services whose intent is enhancing the development of children and the functioning of families.

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

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

Numerous proposals for service reform focus on communities as an arena in which local norms, values, and preferences can be made known in ways that inform the design and delivery of services. We concur but propose a focus on

communities because of the potential for an important additional benefit: that the provision of services focused on communities and the process of local service planning and delivery holds the potential for community building. We believe our ideas can aid in the creation of communities that have redefined the nature and limits of their responsibilities to children and parents, engaging both individuals and institutions in the process of building caring communities. Caring communities and the policies that lead to them will both support the healthy development of children and the functioning of families and respond to problems as they occur.

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

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NOTES

1.Children made up over one-third (36%) of the U.S. population in 1960. (Rosewater, Ann, "Child and Family Trends: Beyond the Numbers," *Proceedings of the Academy of Political Science*, vol. 37 no.2 (New York, 1989), p.5.) Children are one-quarter (26%) of the total population today. (U.S. Bureau of the Census. *1990 Census*. STF-1A file.) By 2010, children may be just over one-fifth (23%) of the population in this country. (House Select Committee on Children, Youth and Families, *U.S. Children and Their Families: Current Conditions and Recent Trends, 1989*, (101st Congress, 1st session), p. 2-3.)

2.In 1990, 21% of children lived below the poverty line, compared to 12% of the elderly and 11% of adults. (U.S. Bureau of the Census, Current Population Reports, Series P-60, No. 175, *Poverty in the United States: 1990*, U.S. Government Printing Office, Washington, D.C. 1991, Table 3, p.18.) One-fourth of today's preschool children are likely to be poor in the year 2000. (Rosewater, p.9.)

3.Just over 25% of children were members of a minority group in 1980. (U.S. Bureau of the Census, *Census of the Population: 1980* General Population Characteristics, Part 1, United States Summary, U.S. Government Printing Office, Washington,D.C. Table 49. p. 1-52.) Demographers project that by 2010, over 40% of all children will be black, Hispanic, or members of another minority group. (Members of another minority group include American Indian, Aleut, Asian and Pacific Islander (Japanese, Chinese, Vietnamese, etc.) and members of other groups (Cambodian, Laotian, Fiji Islander, etc.). Hispanics can be members of any racial group but in these figures minorities are defined as all groups other than non-Hispanic whites. U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 995, *Projections of the Hispanic Population: 1983 to 2080*, U.S. Government Printing Office, Washington, D.C., 1986, Table 2, p. 51, Table 7, p. 57, and personal communications with demographers at the U.S. Bureau of the Census.)

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

5. Since 1972, more than 1 million children each year have seen their parents divorce, a three-fold increase since 1950 (Bianchi, p.9.). One out of every two marriages is expected to end in divorce. (Cherlin, Andrew J. "The Weakening Link Between Marriage and the Care of Children" *Family Planning Perspectives*. vol. 20, no. 6 (1988), p.303.) The failure rate for second marriages is even higher (60%). (Rosewater, p.5.)

While only 9% of children lived with a single parent in 1960, by 1989 that figure had risen to 24% (Bianchi, p. 10 and U.S. Bureau of the Census, Current

Population Reports, Series P-20, No. 445, Marital Status and Living Arrangements: March 1989, U.S. Government Printing Office, Washington, D.C., 1990.)

Nearly half of American children are expected to live in a single-parent household at some time during childhood. (N. Zill and C. Rogers, 1988, "Recent Trends in the Well-Being of Children in the United States and Their Implications for Policy," in The Changing American Family and Public Policy, Andrew Cherlin, ed., Urban Institute Press Washington, D.C., p. 37.)

6. In just under twenty years, children with mothers in the labor force increased from 39% in 1970 to 63% in 1991. (Current Population Survey, U.S. Department of Labor, Bureau of Labor Statistics, update of Table 59 Handbook of Labor Statistics, August 1989 Bulletin 2340 unpublished data. This figure is the percentage of children who live in either married couple families or in families maintained by women whose mothers are in the labor force, that is working either full or part time or actively looking for work. This figure does not include children who are in families headed by men only. In 1991 approximately 3% of children living in families were in families headed by a single male parent.)

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

Close to 70% of employed mothers whose children are under six and almost three-quarters of mothers of school-age children are working full time. (Bureau of Labor Statistics, "March 1990 Current Population Survey", table 48 cited in National Commission on Children, p.22.)

7.Bianchi, Suzanne M., "America's Children: Mixed Prospects" *Population Bulletin*, Vol. 45, No. 1 (Washington, D.C.: Population Reference Bureau, Inc., June 1990) pp. 20-21.

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

9. At present, roughly 20% of all children move each year. (U.S. Bureau of the Census, *Geographical Mobility: March 1986 to March 1987*, Series P-20, No. 430 (April 1989), p.1-10.) Children between the ages of 1 and 4 are more likely to move than older children; over one-quarter of children under 4 move each year. (House Select Committee, p.34-35.)

10.In support of this view see *A New Vision: Promoting Youth Development* the testimony of Karen Johnson Pittman before the House Select Committee on Children, Youth and Families (September 30, 1991) in which she argues that we need a shift in youth policy from one that is problem focused to one that is promotional. See also Peter Scales, Empowering Youth for the Future in *New Designs for Youth Development* 6, no. 4

11.While the discussion of service planning is focused on planning for the provision of primary and specialized services, the process of a child and parent survey and an inventory of services as the basis of planning is a model that can be applied and extended to include other services including human services such as education and health care or economic and community development needs, services, and planning as well.

12.For discussion of a methodology for and the results of hearing directly from children and parents see Littell, Julia and Wynn, Joan. 1989. *The Availability and Use of Community Resources for Young Adolescents in an Inner City and a Suburban Community*. Chicago: Chapin Hall Center for Children at the University of Chicago.

13.With the growing interest in collaboration as a strategy for addressing the fragmented, single-problem focus of existing specialized services, there has been considerable attention to the environments in which collaboration can occur. In thinking about the conditions needed to create and sustain collaboration, we have drawn on the insights of Altman, Bruner, Edelman and Radin, Gardner, Golden, Melaville with Blank, and others and have extended the realm and discussion of collaboration beyond specialized providers to joint endeavors across both primary and specialized services that enable them to operate as parts of a common enterprise.

14.We are not happy with these titles because they only partially reflect the functions they entail and because of what they imply about families, for example, that they are "cases" that need to be "managed." Thus far, however, we have not found better titles.

15.Model protocols, problem checklists, and service history forms could be developed by an advisory group of service providers, or adapted from those used elsewhere. The family advocate would collect some basic family information as well.

16.Agencies providing foster care services, for example, are likely to place children not in the communities in which they had lived but in communities in which their foster homes are located. Rather than being concentrated within a community, these homes are now usually scattered so that when children are moved from one foster home to another they are also moved repeatedly to different communities necessitating changes of schools, friends, and other connections.

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