Re-visioning Case Management: Partnering with Families and Communities to Create Meaningful Change
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Who We Are

The California Department of Social Services, Office of Child Abuse Prevention established Strategies in 1997 in response to the need for training and technical support for family resource centers emerging across the state. Strategies is a statewide alliance of three training and technical assistance teams that serve the Northern, Central, and Southern regions of California. Each team is housed within one of three nonprofit organizations: Youth for Change in Butte County, Interface Children & Family Services in Ventura County, and Children’s Bureau in Los Angeles and Orange Counties. Regional staff work closely together to provide a seamless array of services statewide and are kept informed by the daily lessons learned as organizations that provide family strengthening services.

Strategies has a notable history and depth of experience in the practice of case management, as it applies to the field of family strengthening. A significant number of Strategies’ staff have previously worked as case managers or supervisors of case managers. In addition, we have had the privilege of listening to participants, staff, and directors of family strengthening organizations throughout California regarding their experiences, concerns, and appreciation for the practice of case management.

Our Purpose

Our purpose in offering this monograph is three-fold:

• To reframe case management as more than a direct service provided to individuals. We believe that case management must encompass a comprehensive approach to building strong families and communities. Such an approach focuses on recognizing and utilizing the strengths, assets, and resources of individuals, organizations, and communities.

• To offer a framework that will guide staff and organizations in reviewing, discussing, and possibly adapting this approach to their own work.

• To offer an approach that encourages organizations to be reflective and willing to intentionally transform themselves into learning organizations.

We have based this approach on the following values and beliefs:

1. Effective partnerships between individuals and organizations, and between individuals and their communities can lead to extraordinary results.

2. Every individual, family, organization, and community comes with strengths and contributions to make.

3. The effective and respectful relationship for which we strive with our participants is also reflected in the relationship of the worker with his/her organization.

4. This approach is not a prescribed formula. It is based on people exploring and considering how to make their organizations and communities healthier.

5. We value cultural proficiency and embrace it as a model for individual transformation and organizational change.

6. We respect, practice, and incorporate the Principles of Family Support (see Appendix 1 Table 1.) into this model.
In communities everywhere, individuals and families are working to overcome challenges so that they may achieve the dreams they have for themselves, their loved ones, and their communities. At the same time, organizations and their staff are striving to provide the best possible services to those seeking support.

Often overwhelmed with rising numbers of both new and returning families, coupled with rapidly declining resources, family strengthening organizations are increasingly questioning whether their case management services are effective in helping people make lasting improvements in their circumstances. From direct service staff to managers to funders to the families themselves, people are asking, is there a better way to engage families to make more meaningful and enduring change? A resource guide to help family strengthening organizations provide more effective case management seemed in order.

Determined to serve the field by finding the “right formula” that would ensure good case management practice, we delved into the extensive research regarding such practices. We visited organizations in the process of redesigning their case management programs and transforming the way they work with individuals and families.
Somewhere along the way, we began to realize how myopic, restrictive, and traditional our original thinking was regarding this monograph. **A paradigm shift occurs when a question is asked inside the current paradigm that can only be answered from outside it.**


Many agencies are effective at stabilizing people in crisis situations which is a critical first step. But then there’s the next essential step of reaching out to these families and providing them with opportunities to re-engage and become involved in the life of the school, the neighborhood... to be with others. “Join us for the FRC’s Thursday morning coffee hour. Work with us in the organic community garden and help the first graders learn about picking broccoli. Bring your kids to movie night in the park.” That’s the primary role we play with people in our neighborhood. A big part of feeling well and being healthy happens in social settings which are fun, relaxing and create a feeling of belonging.


…no matter how hard staff members try to help their clients, they are often stymied by the larger systems that seem to work against the people they are trying to serve. The individuals who staff these organizations recognize that there is more to their clients’ problems than self-destructive behavior or poor choices.

As we talked with those attempting to serve their families and communities in new and innovative ways, their message to us was consistent: “There is no blueprint for this kind of work; we are figuring it out as we go.”

This monograph is designed to offer ideas, highlights, and questions for consideration; it is not a training manual. We hope it will spark discussions and the exploration of new ideas regarding what it means to work with families, organizations, and communities in ways that bring about meaningful and long-term change for everyone.

Whether your agency is large or small, in a rural, suburban, or urban community, we encourage you to “start where you are” with the ideas presented here. Consider establishing an intentional learning community made up of staff, managers, participants, and board members to explore the thoughts and examples provided throughout this paper. Acknowledge what is already working well in your agency; make note of and celebrate the successes you and your team have experienced. Highlight those ideas that you would like to try and that make sense for your organization at this time.

**Key Messages**

Every individual, family, organization, and community comes with strengths and contributions to make. When these resources are tapped, effective partnerships are created and extraordinary things happen. As we read about, discussed, and explored these ideas with others, six key messages emerged.

1. Family support organizations play two critical roles in their communities: 1) to provide direct services to individuals and families, and 2) to build stronger communities. Without access to both direct services and a healthy community, families are often unable to make the long-term changes necessary to become self-reliant, contributing members of their communities.

2. Relationships are central to effecting change in individuals, families, organizations, and communities.

3. Comprehensive case management embeds itself in the belief that solutions already exist and that there are both recognized and hidden strengths, assets, and resources in every individual, family, organization, and community. This strengths-based approach means actively exploring the questions: “What’s possible? Who cares about me?” rather than the traditional questions of “What’s wrong? Who is to blame?”

4. Strengths-based case management requires an intentional process and a clear purpose for both the family and the worker. This includes an engagement to build a relationship, completion of a strengths-based assessment, goal identification, development of a family plan with action steps and ways to overcome obstacles, and celebration of accomplishments.
5. An organization that resolves to provide effective and meaningful comprehensive case management willingly commits time and resources to study the issues facing families and communities, as well as the promising practices being implemented to address such issues. The organization is responsible for ensuring professional development and self-care opportunities for each worker.

6. A strong community is a resource to staff and to those with whom they work. It provides both access to services and a place for people to become connected to others in positive and productive ways. A strong community offers opportunities for residents to contribute through healthy activities and civic engagement. Organizations work together to form partnerships that act as a web of support and opportunities for families and residents.

Family Strengthening and Case Management

In the early 1990s, Family Support America, a national organization dedicated to strengthening the field of family support, identified nine principles that articulate quality practices in the field. These principles are now widely accepted as providing the foundation for working with families and communities in a manner that is highly effective and strengths-based (see Appendix 1, Table 1. Principles of Family Support).

In 1998, the seminal work “Family Resource Centers: Vehicles for Change” was published. Family resource centers were held up as a key prevention strategy in strengthening families and communities. Many centers adopted the “Principles of Family Support” to guide them in the development of their programs and services (California Family Resource Center Learning Circle, 2000).

A Shift in Language

Over the last several years, there has been a noticeable shift in language from “family support” to “family strengthening.” It is beyond the scope of this paper to trace the etymology of these terms, but the underlying shift in emphasis is an important one for the field of family strengthening. The term “strengthening” implies building on existing strengths, even in times of difficulty and crisis. Ultimately, the goal of family strengthening is that families are better able to effectively address their challenges, thereby improving the quality of their individual and collective lives. They are then able to contribute to building strong communities by identifying assets and impacting areas that need change. Throughout this paper, the term family strengthening will be used to reflect this shift in emphasis.
The field of family strengthening is leading a conscious shift from what many refer to as the “traditional” model of case management (What’s missing?) to one that is deeply anchored in the strengths-based approach (What’s possible?). By its very nature, traditional case management practice is designed to focus on the management of “negative” behaviors and sometimes “difficult” clients. Assessment tools are commonly structured to identify problems being experienced by the participant, and to then create a plan that will resolve these individual problems and meet identified needs. A strengths-based approach is driven by the positive goals and desires which the participant has identified for himself and his/her family to strengthen the family and ultimately participate fully in the community.

Growing numbers of staff in the field are actively engaged in discussing the terminology of “case management,” considered by many to be demeaning. The names and descriptions assigned to case management functions often seem sterile and could be perceived as poorly reflecting the highly dynamic process of serving people. Guided by the values inherent within the “Principles of Family Support,” many organizations are now referring to case management activities as “service coordination,” “family coaching,” “family development,” “care management,” “family advocacy,” and “resource mapping,” to name a few. There is considerable interest in finding a language that is positive and supportive of individual and family empowerment for this important approach.

For the most part there is a general consensus that we should nurture the strengths of individuals—you can’t imagine the parents of Michael Phelps forcing him to do gymnastics instead of swimming because, although he was good at swimming, he was a terrible gymnast. Unfortunately, this commitment to identifying and nurturing the strengths of individuals has not translated into our work lives. Our work situations often operate in a deficit-based paradigm. This means that we expend a tremendous amount of energy focusing on what isn’t working—identifying gaps and needs and analyzing problems—and less time analyzing the assets, strengths and areas of success and impact. As a result we know a huge amount about the problems, but don’t have a clue where we could find the solutions.

Understanding the Comprehensive Approach to Case Management

The comprehensive case management framework recognizes that risk factors do not exist in isolation. They can be present within the individual and the family, as well as within the neighborhood or community. To make an effective and lasting difference in people’s lives, staff must work not only with the individual or family, but also within the neighborhoods and communities where they reside. Simply put, people cannot maintain healthy, thriving lives unless they live in healthy, thriving communities.

At the same time, individuals, families, and communities are unique and complex, possessing different inherent protective factors. The availability of varied and comprehensive resources, services, and opportunities for engagement is critical for individuals and families to be able to move successfully through difficult times, transform their lives and their communities, and achieve their dreams.

Organizations working from the comprehensive, strengths-based approach embed themselves in the belief that solutions already exist and that there are both recognized and hidden strengths, assets, and resources in every individual, family, organization, and community. When we intentionally partner with others and focus on discovering and linking these elements, individuals become healthier and gain confidence, families become more resilient and connected, organizations become more accountable, and communities are invigorated and experience increased well-being as a whole.
The New Framework
A Comprehensive Approach to Case Management: Family and Community Empowerment

Figure 1. The New Framework

The New Framework illustrates the philosophy of the comprehensive case management approach. Inherent in the framework is the understanding that the elements of family, community, and organization do not act independently of one another. Instead, they are purposefully integrated within the context of a learning organization to identify and access the strengths and assets of each element that contributes to strong families and communities.
This framework draws on approaches to case management that are well known and have extensive history such as the elements of working with the whole family and the importance of building relationships. We have added to the model the concept of the Learning Organization and integrating a focus on community. These approaches are clearly a result of others’ work, as we’ve cited, but have not necessarily been applied in a formal way to the practice of case management. We have simply brought all the elements together in one framework, creating the Comprehensive Approach to Case Management.

Relationships - The Core - Genuine and constructive relationships are the essential ingredients to effect change in families, organizations, and communities.

The Family Segment - Families, staff, and experts alike agree that a worker’s most critical task is to establish a positive working relationship with the family or individual. Such a relationship allows families to establish sufficient trust with the worker, enabling them to reveal their vulnerabilities and consider the possibility that they can change the conditions or circumstances interfering with their lives and become contributors to a strong community. Families are often more candid, more engaged in the case management process, and more likely to follow through with agreements when the relationship is built on respect and trust.

The Organizational Segment - A worker’s success in implementing case management services is directly impacted by the overall health and well-being of his/her organization. Families, staff, and organizations have a greater likelihood of achieving their desired goals when the organization intentionally embraces a culture of learning and actively engages in creating a safe, positive, and supportive environment for both staff and participants. The organization’s place in the community is determined by priorities set by leadership for community engagement.

Imagine living in a city plagued by cholera. In this city, the challenge to parents to keep kids healthy would be overwhelming. Yes, the most competent parents and those with the most resources would have more success delivering drinkable water to their children than would other parents. But even these “successful” parents would sometimes fail. Would we blame them for their failure, or point the finger at the community’s failed water purification system? In a socially toxic environment, the same principle holds. So let us put aside blaming parents and take a good hard look at what we all can do to lend a hand with the challenging task of raising children in a socially toxic environment.

The Community Segment - Many family resource centers work to pursue their dual roles of service provision and community engagement. Through service provision, residents are encouraged and offered resources that build on personal strengths and address immediate concerns. Through community engagement, people are inspired to give back in a way that improves the quality of life for all who live in their neighborhood. In a comprehensive system of case management, the worker is one member of the team in an organization that has integrated service provision and community engagement.

Questions to Explore

- How does the ability to notice, document, and reflect strengths impact our relationships with families? With our team members? What makes it difficult?
- What is important to you about working with families and communities?
- Why do you care about what approach you take?
- What would it take to create change in how we talk about strengthening families and communities?
Elements of the Case Management Relationship

Participants often identify the nature and quality of their relationship with staff as critical to their success in achieving their desired goals. Relationship building and engaging families is identified consistently as both a distinct case management task and a critical skill which the worker must possess. A relationship that is based on authentic mutual respect and caring appears to be the foundation upon which the success of all other case management tasks lie.

The case management relationship is one with a clear and mutually agreed upon purpose. A healthy and effective partnership can be created when staff and participant understand clearly what goals are to be accomplished, how and when these goals will be achieved, and the responsibilities the worker and the participant will each assume in achieving these goals.

Both staff and participant recognize and acknowledge that the worker’s role is to guide, coach, and mentor. It is not the same type of relationship one has with a friend or family member.
A critical component of effective partnerships is healthy boundaries, which serve to protect both worker and participant (Perlman, 1979):

- Staff and participant should understand that the purpose of the relationship is to enable the participant to identify and utilize resources to achieve a desired goal.
- There is a defined timeframe for the relationship, which has closure when the purpose has been achieved and the participant’s needs have been met.
- The relationship is for the benefit of the participant; his/her needs are to be met, not those of staff.
- The worker accepts full responsibility for practicing self-discipline and self-management over his/her attitudes, behaviors, and methods of helping.

The elements of case management relationships include:

1. **Engage the Participant** – The building of trust begins in this phase, as the worker carefully explains his/her role and what the agency can offer. The family or individual is given the opportunity to tell their story, guided by thoughtful and empathetic questions from staff (see below). The worker may review confidentiality agreements that emphasize how he/she will respectfully respond to the participant’s story. This exchange of information is the foundation of the relationship and sets the tone to work in partnership and support the participant and his/her family in reaching their goals. Families report that the ability of the worker to provide or arrange access to an essential resource (i.e., food, a bus voucher, assistance with utility bills) during this phase reassures the family that actual help is available, thereby strengthening the level of trust between family and worker.

2. **Conduct a Strengths-based Assessment** – The worker strives to create an atmosphere in which the participant feels safe enough to talk openly about personal concerns and challenges without being judged. Through empathetic questioning and listening, the worker helps the participant better understand his/her situation, feelings, and past actions. It is at this stage that staff can introduce an assessment tool that documents the conversation and can be used as a measure of progress. Questions may include: What’s going on in my life? Where do I think things stand right now? What are my strengths? Where are my “blind spots” and areas of challenge?

3. **Identify Goals** – During this process, the worker helps the participant focus on identifying his/her desirable future. The opportunity to brainstorm and engage in creative thinking can help the participant experience increased self-confidence, hope, an ability to see varied options, and a willingness to take positive risks. What would my life look like if I were managing it better? What do I think is best for myself/my family? What do I really want for my future that I don’t have now? In six months, what would I like to see in my life? In one year?
4. **Develop a Family Plan to Achieve Goals** – The participant now begins to identify clear timelines and steps to take towards his/her desired goals, as well as possible solutions to challenges. How do I get what I need or want? What solutions make the best sense for me and my family? What challenges might come up and how can I be better prepared to handle them? Where can I get help and support to achieve my goals?

5. **Take Action to Achieve Goals** – The worker and the participant monitor the participant’s progress to ensure there is movement in the desired direction. How am I doing? What actual steps am I taking to make things happen? How ready and willing am I to make the changes? What can I do to stay “on track?” What is my backup plan if I run into problems?

6. **Identify and Overcome Obstacles** – Encountering obstacles is a normal part of change. When the participant comes up against an obstacle or is not able to make progress toward his/her goals, the worker helps the participant identify and understand what may be preventing progress and what steps can be taken to get “back on track.” Is the task harder than I expected? If so, what additional support/resources do I need to succeed? Is this goal really what I want?

7. **Celebrate and Learn** – Participants can easily lose track of the progress being made toward reaching their goals. It is important for the worker to help participants acknowledge, celebrate, and learn from their achievements. What are my achievements, both big and small? What’s working? What’s getting better? What’s different that tells me I’m getting closer to where I want to be? With whom do I want to celebrate my successes?

The manner in which staff conducts each of the above functions is also the process by which their relationships with participants are strengthened and positive working partnerships are built. Following through on setting priorities and goals, developing clarity on accountability, and being fully engaged in the family story during assessment builds trust and demonstrates to the family that the worker is listening and cares about the family’s success. In the most productive of case management services, these functions are ongoing and designed to be revisited by participants and staff throughout the provision of services.

The pull of a positive vision for the future can be stronger than the push of the past.

Adapted with permission from Empowerment Skills for Family Direct Service Workers: A Direct Service Worker Handbook, Christiann Dean (1996)
Highlight 1.

The Family Development Matrix – A Comprehensive Case Management and Assessment Tool

Ninety agencies in fourteen counties and ten tribal groups across California are using the Family Development Matrix (FDM) as a strengths-based tool for assessment, case planning, and tracking family progress with twenty outcome indicators. The FDM is designed as a family driven process that documents the family or individual’s stability, safety, and self-sufficiency and where support is needed. It allows those utilizing this tool to easily identify strengths and begin to address needs and set goals.

The process of working with the FDM over time helps family members develop the skills they need to make decisions, solve problems, plan and follow through on activities, evaluate success and failure, verbalize feelings, and explain actions. It models a process for problem solving that most families can integrate into their own thinking, apply in other situations, and use to help their children learn. These are the very empowerment skills they need to be successful in working toward and achieving positive outcomes.

The family worker introduces the FDM to the family within thirty days or three visits of their first meeting. The worker explains his/her role as a support and guide as the family tells its story. Together, they review the FDM assessment indicators and choose the indicator that best describes the family’s situation at that time. Strengths and focus areas are identified in order for the family to establish goals. Both the family and worker identify steps they will take towards meeting the goal, an activity that builds accountability and trust. Resources are then provided, and the next meeting is scheduled. A second assessment is conducted in three months, and quarterly thereafter.

It is important to have the family participate in the process in order to achieve change. The FDM encourages skill building by engaging the family to learn from the past to plan for the future by building on success.

Value to the Organization

The FDM responds to the need for accountability and promotes strategic planning and continuous improvement. FDM data is used by the worker to assess the status of participants, by the supervisor to review family progress with the worker, and by senior managers to address gaps, allocate resources, and celebrate success. Funders and policy decision-makers can better understand how allocated funds bring tangible results.

Jerry Endres, Family Development Matrix, Matrix Outcomes Model 2010.
Questions to Explore

This framework encourages each worker to think about his/her own desire for self-respect and self-reliance.

- Think about a challenging time in your life when you needed the help and support of others. What type of help enabled you to feel hopeful and confident in your ability to overcome the challenge, even if you weren’t clear what the exact answer was?

- How might your answers to this question impact how you choose to work with a participant?

- What conversations can we have in our agency that create new possibilities in the partnership between the worker and the family?
The practice of effective and meaningful comprehensive case management not only helps families realize their personal goals, it also contributes to the organization’s ability to meet its goals. To achieve this level of quality services, an organization must offer opportunities for staff to learn and practice new skills within an environment that is safe, positive, and supportive. Organizations that commit to creating learning environments often experience positive results for their participants, as well as high job satisfaction, low staff turnover, and dynamic community connections.

In a world as complex as ours, staff members need opportunities to develop mastery and acquire confidence that their work has meaning and contributes to a better society. Varied learning opportunities allow staff to suspend their individual assumptions and judgments, reflect on their practices, discuss what is working and why, design and test new ideas, monitor results, and apply lessons learned. A culture of learning is based on openness and trust; staff is supported and rewarded for learning and innovating. They are encouraged to express their ideas and challenge themselves to contribute to the overall improvement of the organization. A learning organization creates workplaces that are more convivial and creative (Senge, 1990).

"Learning in organizations means the continuous testing of experience, and the transformation of that experience into knowledge that is accessible to the work organization and relevant to its core purpose." To make this definition “come alive” within your own agency, consider implementing the following checklist:

**Do we continuously examine and challenge our practices, not just in crises, but in good times?** When potentially negative information is shared, how do teammates, supervisors, and leadership respond?

**Are we producing knowledge?** Are we demonstrating increasingly effective ways of working with our participants?

**Is the knowledge shared with all of our staff?**

**Is the learning relevant to our agency’s core mission?** Can we make use of it? (This is also a great criterion for evaluating training programs.)

Evaluation studies of effective case management suggest that the following organizational practices contribute to an effective learning environment:

- **A supportive, caring internal team:** People need work environments that promote open and honest communication, the building of trust, and a sense of safety among its members. Literature on burnout suggests that staff find it very difficult to continue to assist families experiencing complex problems and living in challenging circumstances if they do not have team members and supervisors who can provide support and encouragement, and assist with problem solving. Family conferences, individual staff coaching, an assigned mentor, and systematic, scheduled opportunities for inquiry and personal reflection are important resources to integrate.

- **A mutually supportive external partnership team:** Staff need to be able to draw upon an effective network of public and community-based organizations that provide the services and support that are most valuable to families. A group of highly skilled service and community development partners increases staff’s success in guiding families to achieve their goals.

- **Time and support to learn:** To ensure effective working relationships among internal team members and external partners, staff need time and support to learn about and stay connected with each other and the community.

- **An environment that supports personal and professional growth:** A learning organization encourages its members to advance towards the goals and purposes that are important to them. When personal responsibility is aligned with an organizational commitment to learning, an environment is created in which participants, staff, and agencies can successfully achieve their desired goals. A healthy organization recognizes that an investment in the well-being of its staff is a critical and strategic investment in its own sustainability.

- **Training:** Consistent, high-quality training and technical assistance provide staff with state of the art knowledge, skills, and resources that help families achieve their goals and ensure the achievement of organizational goals.

- **Cultural proficiency:** The culturally proficient organization works proactively to ensure that organizational practices and individual behaviors affirm, promote, and strengthen cultural identity and diversity. Such organizations focus on using the “inside-out” approach, exploring how organizational and individual attitudes, behaviors, and cultures impact the ability to interact effectively with people who differ from them. Indicators that an organization is engaged in culturally proficient practices include communication that is open and respectful, conflict that is managed in a positive way, relationships that are based on respect and compassion, and workloads that are balanced (Lindsey, 2009).

- **Accountability:** A computerized data information system enables staff to track their families’ progress and achievements. Staff find it difficult to accept that their work has meaning and purpose if they do not have a method for keeping track and documenting the extent
to which their families are achieving their goals. Staff members with access to an automated information system can improve their progress by learning in real time about the success of their work:

- What families are succeeding?
- What intensity of services is most related to achievement of goals?
- What mix of service partners are most related to families succeeding?
- What is the optimal length of services needed to ensure families’ success?
- What goals are most likely to be achieved?
- Is our assessment and triage system working to guide the appropriate use of case management time and resources?
- What level of community engagement impacts change in family status?
- When are individuals and families ready to assume leadership roles?

**Participant input and feedback:** Family strengthening organizations need consistent, formalized methods for monitoring families in order to 1) determine the quality of services received; 2) gauge the extent to which families believe they have a partnership with their worker and the organization; and, 3) determine the degree to which participants feel engaged and are motivated to become active members of their neighborhoods. Organizations can ensure they receive participant feedback by implementing the following tools:

- Standard use and review of satisfaction surveys;
- Focus groups and “world cafes” held with different categories of participants;
- Exit interviews with participants who are terminating services; and,
- Asking participants to serve on advisory committees or the board of directors.
Highlight 2.

On the Move – Dynamic Professional Development

“We hire people with various levels of experience, some who are brand new to the work world and some who are nonprofit veterans,” shares etsuko kubo, McPherson Neighborhood Initiative Director, On the Move (OTM). “This intergenerational staffing requires us to develop a flexible and innovative environment to meet diverse developmental needs of every one of us. The first criteria is someone’s deep interest in learning and their innate curiosity.”

Mentoring, coaching, and training are the three cornerstones on which the professional development of OTM staff is built. etsuko describes OTM’s philosophy of professional development as holistic and transparent. Technical, task-oriented skills as well as personal, people-oriented skills are carefully assessed and tracked to ensure that staff achieve and practice a healthy blending of both. “I think we try to make sure we say things out loud,” etsuko states. Staff is encouraged to share openly the strengths and talents they see in one another, as well as potential areas for growth.

OTM has integrated the Predictive Index (PI), a behavioral assessment tool, into all phases of its staff development, beginning with the interview and hiring process. The tool is designed to assist organizations in improving employee retention, coaching, leadership development, talent management, and team performance. Individual OTM work team members complete the PI, and then share their results with fellow team members. This enables each team to better understand the skills and strengths of its members, as well as how the team can more effectively utilize those skills and strengths. As new staff are hired, the PI is re-taken by all members to both assess how new members fit in, as well as if skills of current members change over time.

The PI helps to formulate each staff person’s Individual Development Plan, which outlines goals for desired growth and the timelines and resources needed to reach those goals. Professional development is seen as an important staff benefit, and time is made available for staff to attend desired trainings. The development plan is part of each staff person’s review, which traditionally was conducted annually. However, because staff development is so strongly valued at OTM, reviews are now being completed twice a year to ensure that people are achieving their goals. etsuko readily acknowledges that bi-annual reviews are quite ambitious, especially when agencies and staff are feeling overwhelmed. But OTM’s commitment to this process speaks to its deep belief in the professional development of its staff.

“We want people to have the general skills needed to run an agency. If they leave OTM, they should feel they can go to another agency with good skills, and get an even better job,” says etsuko. “For me personally, my work at OTM has prepared me to be a leader wherever I go.”

etsuko kubo, On the Move (2010)
Highlight 3.

Creating an Opportunity for Self-Care – An Organizational Example

A family resource center whose direct service workers live in the community as neighbors with the center’s participants identified self-care as a learning topic. The executive director and program manager discussed who should make up the learning group: staff, participants, board members? They took the question to staff, who initially wanted to include participants. Through discussion, they decided to start with staff and management of the agency and to include two members of their community advisory group.

The first meeting was spent discussing the issue and determining what questions to ask that would motivate fresh ideas, take a strength-based approach, and open the door to positive change. The group agreed how they would proceed and set some ground rules for their discussions. These included respect for different opinions, a commitment to come prepared to the meeting and read relevant articles, and that the organization allot time for the preparation and the meetings. The meeting ended with a short reading assignment on boundaries and a plan for regular meetings.

Upon reconvening, the group discussed what people learned from the reading assignment, how it helped them think about their work, and what it meant in terms of individual and organizational change. Having representation from staff, management, and community members provided multiple perspectives and enriched the discussion. The group agreed that the issue of boundaries is a complex one and made two recommendations: (1) to distinguish between “friendships” and “professional friendships”; and (2) to talk about setting and holding boundaries at every one-on-one supervision meeting. The former is to acknowledge that, while the direct service worker-participant relationship is “friendly” and based on trust, it does not have the characteristics of a friendship where both parties share intimate life experiences. In the professional friendship, the direct service worker expresses himself from the context of his/her work, not from personal life experience. The group agreed that at future meetings they would explore what works in their relationships with participants and how the organization can support staff to maintain this type of relationship.

Questions to Explore

• How can we support each other to take the next steps in building a learning organization?
• What are the rewards or incentives for staff to ask challenging questions?
• What do we need to do to fully engage families in various aspects of the organization?
• What new ideas have surfaced about creating or sustaining an environment that is accountable to staff and families?
• What can we do to be more willing to examine and challenge our practices, not just in crises, but in good times?
• How are we demonstrating increasingly effective ways of working with our participants?
What would be your response to the question: “How would you describe the community served by your agency?” Not long ago, a new family resource center director was asked this question. After some reflection, he talked about all the needs within the community – people out of work, gang activity, limited health care resources, and struggling schools. Then, he was asked to think about the community assets – its strengths. He paused, cocked his head thoughtfully, and began listing things like a farmer’s market, community churches, monthly dances, parent classes that include dinner and child care, and Sunday sports leagues.

As he began to see possibilities rather than obstacles, his entire demeanor changed. He saw opportunities to connect with people, not only to find out what they needed, but also to explore what they were interested in building, and what they could contribute. He began to think of his family resource center as part of a developing community, as well as a service provider to individuals.

Traditionally, case management activities have focused on linking the individual or family to services. By its nature, service provision is accomplished through a one-to-one relationship with an individual or family. Often, staff works in isolation to find resources to help a family meet its goals and carries a “large case load” of families to serve.

Creating what we most want is fundamentally different than making bad things better. Creating is about bringing into being what most matters – the concrete results you most want to see exist.


Adapted from Christiann Dean, Empowerment Skills for Family Direct Service Workers: A Direct Service Worker Handbook (1996)
Leadership for Change

The shift to a strengths-based approach suggests that leadership for change comes from within an organization that creates a team environment where everyone knows their roles in building community. The worker is one player on the team that works to strengthen individuals and families so that they have the interest and capacity to engage in community activities.

It is the role of the organization to determine that activities to build community are a priority to effect long lasting change. Once that determination is made, strategic actions can then be identified to include them in daily work. Some organizations focus on civic engagement and resident leadership while others build networks and partnerships where they can address issues with one voice. There is no “one way” that works for every organization or community. Accounts of various organizations highlight different approaches of integrating community building into service provision.

In this framework, the staff role expands from its focus solely on the individual to include elements in the community. The participant utilizes the confidence, skills, and knowledge they have gained through contact with their local family resource center to attend school or job training or take a leadership or active role in their neighborhoods to build a healthy community. The characteristics of the worker in the family-helping relationship are mirrored in the relationships created between the worker, agency, and partner agencies within the community. These include the strengths-based approach, shared agreements about roles and responsibilities, and having the knowledge, skills, and attitudes to partner with families as equals.

The worker is in a unique position to find and mobilize what McKnight calls “gifts of strangers” (McKnight & Kretzmann, 1993). People who come to family resource centers bring with them knowledge of and experience in their community. Often, they are part of formal and informal groups and organizations that reflect the culture of the community, its assets, partnerships, and challenges. Sometimes, when people are isolated from their community, the family resource center is their first connection to resources and opportunities to get involved in leadership and civic engagement. The relationship between the worker and participant in the strengths-based approach allows information about community to be mutually shared. The worker learns from the participant about his/her experiences in the community. The participant gains
support and guidance to build on his/her strengths in order to move out of crisis, accomplish new goals, and connect to the community in a new way. In this relationship, the role of the worker is to:

- Learn about and participate in community activities;
- Help people move out of crisis by connecting to resources and healthy activities in the neighborhood where there is an exchange of knowledge, skills, and experience;
- Focus on assets of the individual, family, and community;
- Help create conditions where individuals and families can participate in community and society by participating in events that match their passion.

The Community as a Resource

In communities where residents know what services are available and where there are strong formal and informal social support networks, child maltreatment rates are lower than in those communities where there is a high degree of isolation (Schorr & Marchand, 2007). Families, staff, residents, and agency partners contribute to creating the community network of both individual and organizational resources that promote personal and community development. Viewing the community from an assets perspective helps the community grow by building on its existing foundation. In the same way that identifying individual family strengths contributes to strong families, identifying community assets “brings knowledge, skills, and capacities out into the open, where they can work together to everyone’s benefit. As the web of assets grows, so does the potential for the community” (McKnight & Kretzmann, 1993). By contributing to the identification and coordination of community assets, the worker guides participants to become more involved, as they move along the continuum of relationships.

Strengthened family members often assume leadership roles relative to local issues, and subsequently utilize what they have learned to strengthen their community. The following diagram below illustrates this developmental process.
The Continuum of Relationships

Balancing the focus between the individual and the community

Informal Resources

Participants rely on informal systems made up of family, friends, neighbors, and community groups for support and to keep informed about what is happening in their community. Equally important, they can utilize these systems to identify where they can contribute to the community based on interests, strengths, and skills.

The family resource center’s role is to make connections to community leaders that open opportunities for residents to have a voice in the issues that directly affect their community. The family resource center itself can be available for activities that bring community members together.

The key for the worker is to help people map their connections and resources that might include information, time, a caring network, skills, talent, and experiences. Many family resource centers offer classes led by residents or program participants who have a particular skill to share. For example, at the Homeless Prenatal Project in San Francisco, a community volunteer who had previously received direct services offers a weekly quilting class for program participants. They have fun, do creative work, and learn team skills, as they design and create quilts for the families who attend prenatal education classes.

Found in many agencies, Promotores or “community educators” are characteristically from the community where they work, sometimes having been recipients of services. Their knowledge of the community and its culture enables them to influence individual and societal change from within, while supporting families along the continuum. They are role models for others to become actively engaged for community change.
Formal Resources

When we think of formal resources, public agencies quickly come to mind such as Child Welfare, Mental Health, Drug and Alcohol, and Juvenile Justice Departments. However, there are many additional and important community organizations that can be family resource center partners and expand the web of support and engagement for individuals and families. These organizations offer opportunities for parents and caregivers to identify possibilities and concerns and pursue goals and interests other than parenting. For example, some family resource centers partner with schools to provide after-school tutoring or extended learning, while others build bridges with libraries where tutoring is already in place.

Communities are building partnerships through interdisciplinary teams that include family resource centers, youth sports teams, police, business, parks and recreation, schools, and faith-based organizations. In Ventura County, the Ventura County Partnership for Safe Families, a city-wide collaboration of public and private agencies and volunteers, provides individual support for students and parents by taking a strengths-based approach to increase protective factors and decrease risk factors for youth in their communities. This type of broad sector coordination has been shown to impact change in ways that individual organizations cannot (Kania & Kramer, 2011).

Building Relationships with Partner Agencies

Partnerships between organizations are often formed to increase funding, referrals, access to resources, and joint service planning. The family resource center can expand its role by building partnerships to address issues that impact all residents. Each organization can contribute by inviting residents to participate in conversations about those issues, whether it be building a new community center or addressing community health concerns.

The worker can help to clarify the family resource center’s place in the community of partnerships, to identify gaps in services and support, and to ensure that families move smoothly between agencies. Taking specific steps to build relationships with direct service workers in other organizations ensures communication about coordinated services to avoid duplication and over-assessment of families’ situations. These relationships are critical to the effectiveness of sharing information for prevention oriented, strengths-based services. Family resource center staff can meet regularly with staff from partner organizations to discuss what each agency can provide and explore how together they can increase the web of support and opportunities for resident involvement.
Community Culture

According to The American Folklife Center, Library of Congress Research Centers (1996), community culture is made up of local customs, behavior, and activities that have meaning to residents. Transportation methods, how people gather and where, types of housing, and geographical regions are all things that shape culture. If you live in a small, rural community where everyone travels by car to stores and schools, day to day life and behavior that is “culture” is different than if you live in a large city where neighborhoods can be vertical and people walk or use public transportation. These are all things that make one community culture different from another.

Additionally, within neighborhood communities, we see differences based on family of origin, affiliations, educational level, and traditions. Everywhere, people take their life experiences and express them in terms of individual culture and tradition. Schorr and Marchand (2007) state “what constitutes effective parenting may, in fact, depend much on the setting.” It is what makes us interesting and unique and can set the stage for conflict if the opportunity to explore cultural differences in a healthy setting is absent.

How the organization responds to issues, builds partnerships and engages participants, volunteers, and other residents is driven by the local and organizational culture. A culturally proficient organization regularly engages in conversation about its own culture and how it reflects the community. The fourth Principle of Family Support Practice (Appendix 1 Table 1.) states, “Programs affirm and strengthen families’ cultural, racial and linguistic identities and enhance their ability to function in a multicultural society.” The family resource center can provide opportunities for staff, board members, and participants to answer the questions: “What are we doing that shows our belief in this principle?” and “Where can we look to learn more about how to be culturally proficient?”

The worker’s role, in this context, is to guide participants to understand the culture of the community and actively explore it together. This can be accomplished, for example, when staff accompanies a participant to a Farmer’s Market, encourages participation in popular theatre, introduces them to others with similar interests, or acts as a bridge to community and civic engagement. People gain knowledge and confidence when their eyes are opened to new experiences and new ways to see familiar things.

Safety

Safety is a predictor of how widely engaged people are and even how far they will venture out from home at certain times of the day. Many neighborhoods are coming together around safety issues through coordinated support systems. We are all familiar with “Neighborhood Watch” programs, where neighbors become proactive and assist one another with maintaining order. For example, neighborhood groups unite to pave sidewalks or install a stop sign at a dangerous corner. These types of programs are a measure of whether
the community provides a healthy environment and fosters social ties among residents (Schorr & Marchand, 2007).

*Ceres Family Resource Center’s Neighbor-to-Neighbor program* is a community-building program in which residents work together to improve their neighborhoods. The program’s neighborhood outreach direct service workers assist interested families who join together with their neighbors to find ways to identify and address local issues. The family resource center provides opportunities for neighborhood groups to talk about their concerns and develop strategies and procedures to address those concerns, thus increasing the health and safety of the children who live there. Such concerns often include traffic safety, neighborhood clean-ups, street lights, sidewalks, and street improvement.

Other neighborhoods organize around disaster preparedness. Community fairs are held to inform neighbors of safe practices in a natural disaster by providing disaster plans and a list of available services. In the San Lorenzo Valley in Santa Cruz County, *Mountain Community Resources* sponsors Community Emergency Response Team (CERT) classes in partnership with local first responders and volunteers to train people to be better prepared to respond to emergency situations in their communities. CERT members also help with non-emergency projects that help improve the safety of the community. Family resource centers can also respond by providing a one-stop location for disaster agencies like the Office of Emergency Services, the Small Business Administration for rebuilding loans, and volunteer coordination.

A key role for the worker is engaging program participants in existing community activities as well as using their knowledge and skills to build community. As individuals move toward self-sufficiency, their capacity to contribute grows; as the web of community assets grows, so does the potential for a healthy community.

**Highlight 4.**

*From Client to Community Educator – Somos Mayfair*

Like all staff at *Somos Mayfair*, the direct service workers are considered community organizers. The workers, called *Promotores* or “community educators,” offer direct services such as support for families to meet basic needs and to assist them in their efforts to be healthy, and prepare their children for school success. For example, as part of a multi-year forum to address the problem of obesity and diabetes in the community, the agency offers parents and children culturally-based nutrition classes, exercise programs, and free health screenings. At the same time, the *Promotores* participate in community engagement through popular theater and community cultural events, and identify individuals who can become leaders, teachers, and co-facilitators alongside other staff and community members.

The effort to groom people to play a role in the community occurs after the individual or family crisis is addressed. According to Jaime
Alvarado, Executive Director of Somos Mayfair, an individual or family often receives support from the agency through the Promotores for a year. Promotores meet with families in their homes to identify family strengths, goals, and needs. The Somos Mayfair website states:

Promotores educate young parents about how to prepare their children for success in school. They provide referrals and support families in accessing services, including emergency food and shelter, legal assistance, early learning opportunities for their children, health insurance, services and screenings, adult literacy/GED, and English as a Second Language classes.

The direct service worker recruits and does the groundwork to prepare participants to take on other roles in the community, as they move away from crisis and are prepared to offer a hand of support to others. Individuals take a series of trainings that cover topics from Somos Mayfair’s history and beliefs to learning specific skills. Alvarado states, “It sets up people to actively play a role as a community organizer.” Participants learn to be classroom facilitators, Promotores, and organizers that support Somos Mayfair’s practice of community engagement, family support, and civic engagement.

The first training, “Somos 101,” is the introductory course and taught by the agency’s program directors. At the end of the training, people work with a program director in a specific topic area. As one of the Promotores, she/he receives further training and a stipend. Both the staff and community Promotores do similar work with families, although if intensive family support work is required, the staff Promotores will step in. Community Promotores may teach classes on nutrition, exercise and assisting children to succeed in school. As described on the website, “The work of Somos Mayfair is to create the conditions in which residents can be full participants in community and society.”

The philosophy of Sacramento’s Mutual Assistance Network (MAN) is that “People become strong because they are engaged in their community.” MAN acts on this philosophy by working with the entire neighborhood, setting up services and activities that provide different opportunities for people depending on where they are in the continuum of change.

Richard Dana, MAN Executive Director, states “Case management is just one of the things we do.” Home visitors help participants place themselves in community situations where they can be successful.

Home visitors are able to place people in healthy environments because 1) the majority of them live in the neighborhood and are connected to daily life, and 2) all staff participates in community activities. For example, home visitors assisted staff at an Easter event held at a local community center. At the event, home visitors conducted outreach to families for youth summer activities and sports leagues. Staff are involved and participate in many neighborhood events, and thus are able to connect families to different activities.

Home visitors participate in weekly supervision and receive training on many topics including maintaining boundaries. Dana explains, “These are issues that we need to continue working on. We acknowledge that one of the most difficult parts of the home visitor’s job is dealing with the desire to be a ‘friend’.” They continually discuss the difference between a “friendship” and a “professional friendship” and explore the challenges in one-on-one supervision by exploring the respective roles of the family and the home visitor. Dana believes that boundaries will always be an issue because of the nature of the home visiting relationship. Recognizing the relationship and discussing strategies to reduce the stress it can cause are a regular part of the organization’s conversations.

MAN has worked for five years to actualize its philosophy, breaking down barriers between programs. The Youth Programs manager now oversees the home visitors so there is no longer a “fence” between them, thus increasing coordination between programs. The manager holds the information about the different programs to achieve integration. “We take an agency approach to service integration,” said Dana.

MAN’s approach has been to focus on identifying elements of positive, thriving neighborhoods.
and bringing those elements to their community. “We tend to get stuck in what’s not working,” said Dana. “We were told that a Farmer’s Market wouldn’t work in Del Paso Heights, because farmers wouldn’t drive here and no one would come to shop. People said a sports league wouldn’t work because we have no safe parks and families wouldn’t participate.” Del Paso Heights now has a thriving Farmer’s Market and more kids to play sports than coaches and space. They started a walking club that consists of people of all ages walking together and learning from one another. Rather than focusing on needs, their strategy is to put good things in the neighborhood that the residents enjoy in the framework of community building. According to Dana, “Another result of this approach is that our workers like coming to work!”

MAN’s philosophy, to develop a strong network of support through community development, moves from focusing on individual problems to providing connections within the neighborhood for everyone living there. “We’re looking across generations to provide opportunities for all who choose to be part of healthy community activities.”

Richard Dana, Mutual Assistance Network of Del Paso Heights (2010)

Highlight 6.

**Resident Engagement – Contra Costa County SparkPoint Center**

Contra Costa County is opening a SparkPoint Center with the interest of the community in mind. United Way SparkPoint Centers are one-stop locations for financial coaching and services provided by government and nonprofit agencies. While they have specific goals that relate to financial stability, Service Integration Team Program Manager Paul Buddenhagen is clear “that we need to bring in the community to make it something special.”

In bringing the SparkPoint Center to Contra Costa, Buddenhagen has pledged to the community that it can be used not only for service delivery, but as a community center that helps residents initiate and implement self-identified goals. SparkPoint partner agencies are supporting a network of residents who will help make decisions about how they connect to the SparkPoint Center as well as look at other areas or issues in their community that they might want to address. The approach is built on the philosophy that resident engagement and community organizing puts power into the hands of the residents so that they can strengthen their own communities.

Buddenhagen, like many executive directors and program managers, is not a community organizer, but knew that he wanted community leadership to be part of SparkPoint. He hired two community organizers to lead a “Resident Engagement Task Force”
with the support and participation of other community and nonprofit leaders, and agreed to establish a Resident Leadership Team. This team will act as ambassadors from and to the community. They will ensure that a resident voice informs the SparkPoint development by reaching out to others and building a network of interested residents. The community organizers will facilitate a large three-day community meeting, bringing their expertise from communities around the world as well as next door.

To decide who to invite to the initial Resident Leadership Team meeting, the Task Force brainstormed the names of fifty residents and organized them into ten diverse affiliation groups such as faith-based, small business owners, school principals, by region, age (to include youth and seniors), and ethnicity. The Task Force extended invitations to the list and a group of eleven residents was formed. Each of these eleven people will be asked to bring in another six people, and thus build a community network. Buddenhagen believes that this will ensure that “what is developed is relevant and meaningful to our residents.”

The SparkPoint Center is designed as a partnership between agencies to help people become economically stable. Together, the partners offer an array of financial support services, coaching towards financial stability, and case management to coordinate the services in an integrated approach to help families address their individual needs. The actions of the Task Force will lead this initiative beyond service provision to building community leadership through resident involvement.

Paul Buddenhagen, Contra Costa County Service Integration Program (2010)
**Magnolia Place Family Resource Center**

*Magnolia Place* is poised to transform 500 blocks of a community that is home to 35,000 children. It moves beyond a service provision strategy to an approach that has large scale implications by building social connections through collaborative action. Partnerships with 70 organizations bring together faith-based and government organizations, public and private schools and universities, nonprofits and parent associations that act as hubs within the catchment area to create a web of support for families and children.

“We are young in this process of changing how organizations relate to the community,” states Alex Morales, Chief Executive Officer of Children’s Bureau which was a founding spark of the *Magnolia Place Community Initiative.* “We want to build a big list of opportunities and connections for people that goes beyond services. We can’t meet the needs of 35,000 children by providing services alone.” The intent is to support community members to navigate their own lives, help their neighbors, and open opportunities for both formal and informal community connections.

*Magnolia Place Family Center* is a primary hub of the *Magnolia Place Community Initiative.* This innovative hub has a health clinic as its anchor organization. Ten thousand people use the clinic that acts as a gateway to larger opportunities and partnerships. There is a child care center; a resource and referral desk for multiple county departments, including the Department of Children, Youth and Families, Department of Public Social Services, and Office of Child Support; a community garden for children; legal and family services; meeting rooms for community organizations; and a library program. Local artists’ vibrant paintings and a huge fish tank create areas in the lobby that act as “Social Edu-tainment” meant to stimulate social connections, conversations for learning, and a place where children and their parents can have fun.

The partners at *Magnolia Place* are committed to alignment and have done so by establishing four focus areas: Education Success; Safe and Nurturing Parenting; Economic Stability; and Good Health. As important are the “Transformational Strategies” that act as the bond between partners and the foundation for defining how they work with families and the community. They are:

- **Foster Empathy** within relationships and organizations to build emotional intelligence so we can be effective in our own lives and help others.
- **Strengthen Protective Factors** that research shows increase family well-being and child safety.
- **Cultivate a Community Network** that is self-directed and includes parent associations, nonprofits, government, and the faith community.
- **Promote Civic Engagement** through belonging, ownership, and access to information. This strengthens community assets and mobilizes neighbors to help each other.

Initially, the partners came together with a belief that an integrated approach was key to success. Building on the Five Protective Factors from *Strengthening Families* (see Appendix 2, Table 2) partners developed this shared philosophy, approach and a standardized system of care. All are connected through a website that serves as a common platform for education and learning.
While partners such as Children’s Bureau Home Visiting Program, First 5 Welcome Baby, WIC and the Nurse/Family Partnership were committed to their individual case management models, they have been linked through common messages and a commitment to sharing data through the “Data Dashboard.” Among other things, they are measuring the percent of children 0-5 with Protective Factors and percent of parents of children 0-5 who are achieving family goals. They are looking at indicators of family well-being such as parent/child relationships and parents’ use of a bank account.

Magnolia Place sees itself as a learning network. As the various partners adopt the transformational strategies, they also experience change and ask for support and training. Thirty Promotores from multiple agencies came together to align their work around the Protective Factors and to explore how to apply them in a community context. Through training and discussion, they learned the approach together and created common ground. They are all working towards similar outcomes and engage parents in a consistent manner. Parents who participate in more than one program are encouraged, across all programs, to help their neighbors as they move out of crisis.

The network of partners is discovering the need to have a systematic way to respond to issues as they arise. Like the Promotores need for training to use the Protective Factors approach, an attorney from legal services is trying to engage families in an empathetic way and may not know how to respond to a crying, depressed mom. Integrating the Transformational Strategies requires starting small and building systems as they move forward. Leadership has adopted the “Plan, do, study, act” approach from Out of Crisis, (Deming, 1986) to test their systems in small bites and maximize the opportunity for success.

Magnolia Place is emerging in uncharted territory, building on common messages and cross-sector outreach. “Children’s Bureau can’t do this ourselves,” says Morales. “Everyone needs to contribute to the basket of success.” Network partners contribute people and time; residents mentor others and build community connections. The sustainability of Magnolia Place is the capacity that is built within the community.

Alex Morales, Children’s Bureau of Southern California (2010)
Highlight 8.

Building Stronger Families for a Better Tomorrow – Community Partnership for Families of San Joaquin

Drawing on more than ten years of experience working with individuals and families, the Community Partnership for Families of San Joaquin (CPF) has created a model for case management that is proving effective in helping individuals and families achieve better outcomes for themselves and their children. Using five family resource centers (FRCs) as its “platform” for serving families, CPF provides targeted services designed to help low-income working individuals and families work towards financial well-being and family stability while becoming more connected to their neighborhoods and communities.

The CPF team focuses on creating a welcoming environment at each of its family resource centers. “We spend time getting to know our families so that we can be sure we are offering the most helpful services,” says Francisco Trujillo, Service Integration Coordinator of CPF. “We want people to feel comfortable and safe with us.” For example, rather than being asked to complete an intake form, people are invited to complete a Welcome Form. While many of the questions on the form are standard (marital status, language, education, etc.), several unique questions stand out. Questions such as “Are you a registered voter?”, “If you are not a US Citizen are you interested in learning how to become a US Citizen?”, “Do you know your credit score?”, “Where do you regularly cash your check?” offer a glimpse of the value placed by CPF staff on such areas as community engagement and financial literacy.

“We have developed what we call the three tier model in working with our families. In our model, the role of staff is to guide the family, while making sure the family is making all its own decisions,” states Trujillo. The model appears to have strengthened the ability of the staff to make sure individuals and families are being provided and connected to the resources and services they need at the time when those resources can be most effective. Based on the 5 Protective Factors (see Appendix 2, Table 2), which research has shown to increase family well-being and child safety, the 3 Tier Model has been thoughtfully designed by CPF staff to be a family-driven process that:

1. Stabilizes individuals and families by supporting them with their urgent, yet basic needs.
2. Engages individuals and families in taking an active role in their own and their family’s lives to meet established goals.
3. Involves stabilized and engaged families in building nurturing and thriving neighborhoods and communities.

**Tier 1: Family Stability**

At this tier, CPF works to stabilize individuals and families by supporting them in meeting their urgent, yet basic needs, such as food, transportation, shelter, and safety. One or two clearly identified concerns are addressed at this level. Individuals with children access the resources they need to help them stabilize their lives and be able to provide for their children in a satisfactory manner. Once the goal of stabilization is achieved, families are invited to return and participate in additional services.

**Tier 2: Family Engagement**

Families entering this tier focus on becoming actively engaged in the lives of their children and in their own lives. Families work closely with CPF staff and fellow partners within Family Success Teams, in
which they focus on several concerns and develop step-by-step action and implementation plans to meet their identified needs and goals. The teams involve both formal and informal partners, and include those individuals who play a supportive role in the life of the participant, such as a religious leader, a work supervisor, a teacher, etc. Families are provided the resources needed to strengthen those skills that will enable them to successfully meet their unique needs (i.e., financial literacy, parenting skills, citizenship and immigration). Trujillo shares that the goal of CPF is “to help families reduce their dependency on government services and build their own resiliency so they can successfully deal with any problems that come up.”

Tier 3: Family Involvement

At this tier, stable and engaged families become integrated into the larger community, advocating for changes in their neighborhoods and communities. Individuals and families are offered advocacy and leadership training so that issues such as neighborhood crime, school, absenteeism, and health and well-being can be addressed. Activities such as free tax filing, homework/book clubs, and neighborhood beautification are offered within this tier. Individuals and families are invited to share their special interests and skills by teaching classes at the FRCs.

The work of CPF is research-based and results-driven. Staff uses the Family Development Matrix to track family progress over time in a variety of indicators (Highlight #1, page 19). Data is carefully collected, analyzed, and shared with staff, partners, funders, and the community in order to demonstrate proven success in improving family outcomes. Examples of outcomes being measured include financial stability of families, neighborhood safety, positive social impacts (i.e., decreases in foster home placements, juvenile crime, and unexcused school absences), and the impact of tax refunds on the local economy.

CPF staff believes in a two-way philosophy: First, staff assists individuals and families in reducing their dependence on government services. In return, staff encourages and provides opportunities for individuals and families to give back to their community. As Amelia Adams, Senior Deputy Director of CPF, acknowledges, “If you don’t have a healthy family, you can’t have a healthy community.” By offering case management services that actively address the involvement of families in their community, the staff of the Community Partnership for Families of San Joaquin bring to life the organization’s core value of Working together to build strong and resourceful families and communities.

Francisco Trujillo and Amelia Adams, Community Partnership for Families (2010)
Questions to Explore

- How can we build on people’s knowledge of their community to discover community strengths and assets?
- What assumptions do we need to challenge in thinking about integrating community engagement into our case management work?
- What are the first steps we would take to remove the perceived barriers to integrating community engagement into our case management work?
- What would it take to inspire families to become involved in building strong communities?
Final Thoughts

Our desire in offering this monograph to the family strengthening field is to “build communities of learners to share innovations and work together to solve problems…” (Schorr & Marchand, 2007). Throughout California and across numerous systems, there is a growing commitment to working together for those changes that strengthen our children, families, organizations, and communities. The people we interviewed and the research we read were adamant in acknowledging that this type of work requires meaningful partnerships at all levels and a commitment to taking action outside the paradigm of traditional case management.

We look forward to hearing your thoughts and feedback regarding the ideas shared here, and to hearing of programs that are making a difference in the lives of individuals and families, their communities, and the organizations that serve them.

We return to the question posed at the beginning of this paper: Is there a better way to engage families to make more meaningful and enduring change? The answer appears to be an unequivocal “yes.” The uniqueness of each family, organization, and community will determine the finer details of that “better way.”

The work is not easy. Funding sources continue to be elusive. Paradigm shifts are risky and create great anxiety for many. There is no easy-to-read blueprint for this type of work. There is, however, one guarantee that fuels this work; when strengths are tapped and effective partnerships are developed, when individuals, families, organizations, and communities come together, extraordinary things do happen.
Appendices

Appendix 1.

Table 1. Principles of Family Support

Principle 1
Staff and families work together in relationships based on equality and respect.

Principle 2
Staff enhance families’ capacity to support the growth and development of all family members—adults, youth, and children.

Principle 3
Families are resources to their own members, to other families, to programs and to communities.

Principle 4
Programs affirm and strengthen families’ cultural, racial, and linguistic identities and enhance their ability to function in a multicultural society.

Principle 5
Programs are embedded in their communities and contribute to the community building process.

Principle 6
Programs advocate with families for services and systems that are fair, responsive, and accountable to the families served.

Principle 7
Practitioners work with families to mobilize formal and informal resources to support family development.

Principle 8
Programs are flexible and continually responsive to emerging family and community issues.

Principle 9
Principles of family support are modeled in all program activities, including planning, governance, and administration.

Appendix 2.

Table 2. The Five Protective Factors

As participants work with staff to identify their strengths, areas for growth, and desired goals for themselves and their families, the Five Protective Factors can offer important areas for consideration. The Protective Factors help to ensure that parents have the resources, support, and tools they need to parent effectively, even when under stress. Extensive research supports the common-sense notion that when these Factors are present and robust in a family, the likelihood of child abuse and neglect diminishes. Developed by the Center for the Study of Social Policy as the foundation of the Strengthening Families framework, the Protective Factors are as follows:

1 - Social connections
Children can be more at risk when a family is isolated from family or community. Helping such families connect with other parents strengthens parenting skills and protects the children.

2 - Knowledge of parenting and child development
Parents with accurate information about parenting and their own child’s development have more appropriate expectations and use more developmentally appropriate guidance techniques.

3 - Social and emotional competence of children
Children who can identify their feelings, empathize with the feelings of others, share emotions appropriately and problem solve with peers and adults experience an increased ability to enjoy successful interactions with others.

4 - Concrete support in times of need
When families are in crisis, children are more protected if the family gets access to the resources they need relatively quickly.

5 - Parental resilience
Parental resilience is the ability to respond to stressful situations in productive ways, solve problems, develop trusting relationships, and reach out for help.

The Strengthening Families approach has shown that small but significant changes that integrate the Protective Factors into practice, programs, and systems can strengthen families and prepare children for success.

Appendix 3.

The Pathways Mapping Initiative

In 2007, the California Department of Social Services, Children and Family Services Division, Office of Child Abuse Prevention funded the development and writing of The Pathway to the Prevention of Child Abuse and Neglect. Bringing together a rich array of findings from research, theory, practice, and policy, this report focuses on effective ways to keep children safe, strengthen and preserve families, and build thriving communities. Its basic premise is that the ability to achieve such goals requires change and support at individual, family, and community levels.

![Pathways Mapping Initiative Diagram](image)

Appendix 4.

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Appendix 5

References


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