

**BUILDING A COMMUNITY RESOURCE:  
A Report on the West Philadelphia Family Center  
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The West Philadelphia Family Center, located at the Barry School, is evolving in the context of a vision of schools as community institutions which provide support to families through an array of social and academic services and programs. This report will focus on the ways in which the Family Center has positioned itself in its first 18 months to support families, and will identify directions the Family Center might consider as it continues to grow and develop.

The Center is staffed by four parent educators and the Principal of the Barry School who is the project director. One of the parent educators coordinates the work of the Center, and her family case load is somewhat less than that of the other parent educators. All of the parent educators are African-American, reflecting the racial composition of the neighborhood in which the Family Center is situated, as well as the racial make-up of the Barry School. All live and/or have worked in the area previous to this job.

The program consists of direct service to families through personal visits at home or at the Center during which parent educators provide some or all of the following: lessons on child development; support to parents in their efforts to solve housing, health, educational, employment or any other problems they face; recreational activities for parents and children; counseling; and referrals. Parent educators also spend a significant amount of time keeping contact with their families through phone calls and unscheduled visits to their homes. In addition to these services to families the parent educators recruit and enroll participants, participate in staff development and maintain documentation. The parent educators utilize the Missouri developed Parents as Teachers (PAT) curriculum as the basis for their lessons on child development.

The Family Center enrolled 106 families in its first 18 months. Eighteen of those families were exited and as of June 30, 1994 the parent educators were working with a total of 88 families. Appendix A is a graphic representation of the pattern of enrollments and terminations, indicating that enrollment has been ongoing since the beginning of the project, peaking during the program's early months (April and May 1993), with other high points occurring at the beginning of the 1994 school year, and again early in spring 1994 following the hiring of a new (the fourth) parent educator in January 1994. Terminations are also on-going and occur as parent educators review their cases and exit families who have moved or who do not, or can not participate in program activities.

During the program's first year and a half, the thrust of the evaluation services we have provided to the Family Center has been formative. We have given the program director several interim memos regarding the program's development (November 3, 1993 and April 22, 1994) and have worked with staff to develop program documentation. Throughout this period, we have been documenting the activities of the Family Center and the work of the parent educators through a variety of research activities, including:

- \* interviewing the parent educators individually and in groups;
- \* observing recruitment, home visits and Center activities;
- \* interviewing parents individually and in a group;
- \* interviewing the program director;
- \* analyzing program documentation, including recruitment and enrollment forms, data about services and health surveys.

The remainder of this report is organized into five sections. The first provides the overall vision that guides the Family Center program. Following that is a section which describes who the program participants are, followed by a section on the ways in which the parent educators are adapting the standardized parenting curriculum to their local context. The report then looks at how the West Philadelphia Family Center program is evolving into a community resource for families. It concludes with a set of recommendations.

In order to preserve confidentiality, the names in this memo are not the real names of participants in the program or their children. The term parent is used throughout the report to refer to any adult caring for children who are part of the Family Center program.

### **The Vision of Schools As Community Institutions**

The West Philadelphia Family Center program was initiated in January 1993, following implementation of several other pilot efforts in other parts of the city. The West Philadelphia Center opened just as the School District of Philadelphia was deepening its commitment to school-based management, and it was the first Center to be administered by the principal in the school in which it is located. The chance to house a Family Center provided Barry Elementary School Principal, Ms. Dietra Shorter, with an excellent opportunity to begin to build her vision of the Barry School as a community institution. In an interview with us she said that she saw the Family Center as a step in making the school "a different kind of place in the community. ... I'd like to see services that are offered here that are community driven. You understand, [services] articulated by the community, not things that we [as educators] feel should be offered, but things that [people in the community] feel that they need." Ms. Shorter's vision frames the way in which The Family Center conducts its efforts in providing parenting education and supporting families in the West Philadelphia area and informs the direction in which The Family Center might grow.

On several occasions during our interviews with her, Ms. Shorter told us that "if you want to include the community, then you have to listen to what they need, and then once you do that, you've kind of been charged with a responsibility to do what you have to do to build linkages [with other community agencies] and tap into resources." Through her talks with many of the parents, and reports from teachers and other school staff, Ms. Shorter believes that many of the adults in this community have "real desire and commitment [to change their life circumstances] but because of all the obstacles, tend to get sidetracked." She identified the most common "obstacles" as limited resources, unresponsive bureaucracy and a fragmented social service system. She emphasized that it often takes years for parents to figure out how to get the assistance they need, and only the most persistent don't give up. She sees the parent educators and the Family Center as a place where parents can sit down and talk about personal goals and goals for their children and obtain help in getting the system to work for them. She says, "Everybody has visions. They know where they want to go, ... then you get a pretty good idea of what the things are that are needed to go into the pot to make it so that they can go where they need to go."

### **The Families and the Parent Education Curriculum**

Between January 1, 1993 and June 30, 1994 the Family Center enrolled a total of 106 families. As reflected in a detailed demographic description of the families (see

Appendix B), nearly all are African-American and over half have three or more children. The parents participating in the program are likely to be in their twenties, and either living alone with their children or with relatives or friends. Over 75% of the participants report being single parent families. Even though some participants are hesitant to provide information about themselves and their families (usually because they do not understand why the Family Center needs this information and because it is reminiscent of the way other agencies, such as the Department of Human Services, intrudes in their lives), the documentation, nonetheless, provides an accurate view of the range of families the Family Center is serving.

The configurations of the families the Center serves are shaping the way the parent educators deliver parenting education lessons. For example, although it is usual for the family to have only one child enrolled in the program, parents often want help with all their children. Originally, the parent educators received training and certification from the State Department of Education to work with children from birth to 3 years of age. In response to their need to expand the kind of support they can offer families with more than one child, in January 1994 the parent educators received training to work with children 3-5 years. In addition, the parent educators are building formal and informal links with the local schools. They report that counselors from area schools call them with referrals and for consultation, and that occasionally they have worked with teachers to address problems of particular students through their knowledge of the family.

The parent educators have raised a number of issues related to the congruence of the PAT curriculum with the families they serve. For example, the curriculum was designed with first-time parents in mind, but they are often working with parents for whom the child enrolled is their second, third or fourth. In addition, a small number of participants are grandparents caring for their grandchildren. In both these instances, the parent educators must adapt their child development lessons to be appropriate for adults who already consider themselves knowledgeable about young children and for families with several children at home.

The parent educators also must adapt the curriculum to be appropriate for families with limited resources. Especially critical is the fact that so many of the participants live with relatives or friends. For example, one parent educator explained to us that it is not possible

for many of her families to child-proof their living area in the ways recommended by the curriculum.

[The curriculum] doesn't have anything for families where the single person is living in somebody else's house. It's like the home-safety thing. You have all these checklists of things you can do. [But] when you're living in somebody else's house, it's not always feasible to put up gates. My parents tell me their relatives tell them, "You're not going to put any nails in my walls. You keep your kid up in the room with you."

In some cases, even making personal visits to the home is complicated by the fact that a program participant, especially a very young parent, is living with relatives. One parent educator explained that many of her parents need to get permission from their relatives to have her come to the house.

I find a lot of my parents, because of the fact that they live with their parents, that they're a little shy about my coming to their mother's home. ... and then I have to ask some of the grandmoms if it is okay if I come, because it is her house. And the parenting piece that we do, I feel like maybe if some of them had their own places, it would be a lot easier for me. Because a lot of times when I try to make an appointment with them, because of the fact that it is somebody else's home, they'll say, "Can you call me back and make an appointment the following week?". It's like they have to get an okay before they can actually say to me okay the moment I call there. ... And the majority of mine do live with their parents.

Finally, the parent educators point out that they often alter the PAT curriculum to fit the language used by their families. One parent educator said that "the language in our workbooks doesn't even make sense to me. ... It's not unrealistic to make the language easy reading language. ... Like most parents, they don't know about immunizations. Have your children had their shots? Make the language easy reading."

Even though nearly 100% of the participants in the Family Center are identified on enrollment forms as African American, the parent educators still find that when they go into participants' homes they need to be sensitive to cross-cultural issues. For example, the West Philadelphia community has a growing population of Caribbean families and one parent educator said she was "almost kicked out of the house" of one family from Trinidad because she didn't know

that in that culture, "you have to talk to the woman through her husband." She learned that "I had to talk to him first in order to receive answers from her."

On a number of dimensions the parent educators are adapting the standardized curriculum, using it as a starting point and guide, as they learn about and from their families and as they reflect upon their own parenting practices. Knowledge about child development is being utilized to enrich and expand the repertoire of parenting practices available to parents. The personal experience of one parent educator provides an example of what is possible for parents as well. She told us she has found that the PAT curriculum is introducing her to new ideas about children and influencing her as a parent and grandparent:

I think the curriculum is good. It has changed me. It has changed some of my parenting. It has changed a lot of my parenting. ... but if you label people [dysfunctional], then they don't care. But once you mold them into a structure where they can see where they're going, and this curriculum somewhat shows them what they should be looking for in their children at a certain age, and they see things happening, I think it's good for their parenting skills.

#### **The Center as an Educational Resource**

The Center is located in the basement of the Barry School close by the cafeteria. As you enter the school's front door cheerful signs guide the visitor to it. The room is brightly painted, and depending on the season or holiday, appropriately decorated. Photos of infants and toddlers are pinned to the walls, and children's artwork is on display. Three quarters of the room is filled by a rug, climbing equipment and toys. The other part of the room has desks, phones and storage space for the parent educators. Table surfaces are filled with information booklets for parents, or with snacks for the children if it's a Monday morning when special activities are always planned for children and their parents, grandparents, or others who care for them.

Although not all the parents who participate in the Family Center program bring their children to the Center, many do, especially those who live within walking distance or who have older children attending the Barry School and are still bringing them to school and picking them up each day. When parents visit the Center it could be just to let their children play, for a special adult-child event, such as a Valentines Party or Easter Egg hunt, for a child development lesson with a parent educator, or just to talk with a parent educator. In our interviews with parents, several told us how much their children enjoy coming to the

Center. "They love to go. ... The toys. They like to play. Darryl likes the chalkboard." And another, "They love it here [at the Center] and they don't never like to leave when we come."

Parents, however, find benefits to coming to the Center beyond recreation for their children. Many believe it provides their children with an opportunity to learn how to share with other children and how to behave in ways that will be expected from them once they start school. As parents see their toddlers adapt to the Family Center environment, their anxieties about how their child will do once he/she starts pre-school lessen:

And what I like most about the program is that when my son comes here he socializes with other children. It gives me good feedback that when he starts day care that he'll open up, and I won't have to worry about him, be insecure about him.

Stopping by the Center provides parents access to the parent educators when they need them most. One parent educator told us, for example, that one of her parents who is in a substance abuse recovery program stops by every day "to touch base." At one point, when the parent wavered in her treatment plan because her regular counselor at the substance abuse program was going to leave, the parent educator was able to help her cope with her feelings of being abandoned and provide the kind of support she needed to sustain her participation in the program. Another parent educator commented:

They'll [the parents] talk to me about things when they want to talk, but to set a regimented time, they always say they don't have time. But they'll come looking for me here if they need something.

### **The Parent Educators as a Resource to Families**

In order to maintain contact with many of their families, the parent educators must be flexible, patient and persistent. Service logs kept by the parent educators between January 1, and June 30, 1994 indicate that the services are about evenly divided between keeping contact with their families and personal visits at home or at the Center, child/adult activities, counseling and referrals. These logs do not record the amount of time the parent educators spend on each of these activities, but reflect the number of each kind of service. One personal visit, for example, can take an hour or more, while a phone call to confirm an appointment might take several minutes. Nonetheless, the numerical count does accurately reflect the fact that maintaining contact is a very important aspect of the work of the parent educators. (It is important to

remember that the logs do not represent a total picture of the work of the parent educators, *but represent only services they provide to active families*. For example, previously we reported that for every two recruitments there is one new enrollment. Time spent recruiting and following up on interested families until they enroll is not part of the service log. Sometimes several calls, and even a personal visit may be involved before a family enrolls in the program. Time spent in staff development, in staff meetings, and maintaining documentation is similarly not represented.)

In her studies of successful programs for "disadvantaged families," Lisbeth B. Schorr has identified front-line staff who are flexible and willing to reach out to families in ways that communicate that they understand and empathize with the client as key to the overall success of the program (1988, 1990). The effort the parent educators at West Philadelphia Family Center make to maintain contact with their families is reflective of the kind of attitude and effort Schorr describes as necessary to change outcomes for families. The comments of a few parents are typical of many we heard:

[The parent educator] calls me all the time and checks up on me and sees how I'm doing, and I tell her how everything is going. And if I feel like I'm under a lot of stress, I feel better once I talk to her, because I can't take it any more, you know? ... It's good that I have somebody like that to talk to, because I can't talk to my mother like that. Me and my mother are like--we don't get along. So [the parent educator] is like my mother. That's how I put her, as my second mother.

They [the parent educators] are willing to help you even outside on their time. They call you and deal with you on their time.

She [the parent educator] is here quite often. She's brought me things, books and what have you for the child. She's talked to the child, sort of tested him for how far he's progressed and what have you like that. I don't get up to the Family Center much, because I am a heart patient, and I'm not able to get there. She recognized that, and she extends herself to me as much as possible.

Schorr also describes professionals who are willing to go beyond specific programmatic focuses, whether it is pre-natal care, mental health, nutrition, or parenting education, to assist families as important to program



success (1988,1990). Similar to the front-line staff working in the successful programs described by Schorr, the parent educators find themselves crossing many boundaries to support families. For example, one parent told us how when she first joined the program her parent educator helped her get her phone turned on and another described how the parent educator assisted her by typing her resume and helping her look for a job. Yet another told us that her parent educator even comes to "my family functions. She's invited ... She's helped me with personal problems. She listened a lot. She helped me out." And another recounted how her parent educator visited regularly when her children could not go out because they had chicken pox. "She would just come in and read stories and play with the girls. They had chicken pox. She came over and spent time with them for like two weeks I think it lasted." Through small and large gestures the parent educators are shaping service in ways that respond to their families and reflect an openness to learning from their families the ways in which they can be most helpful to them.

The parent educators emphasize, however, that for them success is often measured by signs that a parent's self-esteem is improving and her/his capacity to act in her/his own behalf is growing. As one parent educator explained: "It started out hard the way they looked to me to do the work, and that's just not me. ... Before it was like, 'Can you do this?' Now it's like, 'What do I do?' And I really like that because I guess it's helping to establish their own independence. ... So I think that's good that now they ask what do I do instead of can you do it. I think that's an accomplishment."

Parents also describe numerous ways the parent educators support them as parents. A number of young parents told us how important the support of the parent educators is in teaching them more about their children. As illustrated in tables presented in Appendix A approximately 14% of the participants are adolescents. In addition, a number of parents who enrolled with their second or third baby still describe themselves as "young" parents because they were teens when they gave birth to their first child. One young parent shared with us not only her appreciation for the program, but her sense that programs like the Family Center should be more widely available to all young parents: "I'm glad, you know, information like this [about my baby] is free to every young parent. Cause some young parents don't even have the knowledge of something like this. And they ought to, you know. It should be a really big issue, especially if you have young kids."

Other parents described to us the ways in which the parent educators have increased their patience with their children and the positive changes that have resulted for

them and their children. The comments of a few are particularly poignant and point out how the parent educators intervene.

I always thought I was being a parent. I was just being a provider. And my son just basically took over. But then like [the parent educator] would come in and --- she knew I wasn't alright. But now me and my children, we talk. We read. We are learning how to talk to each other without screaming and hollering. I'm still working on it. Believe me, I'm real precious new at all this.

[The parent educator] would tell me the easiest way to work with a child. I think the child should be going to the bathroom when he's ten months old. ... She brought me things showing the different phases, the different age groups that children are able to accomplish certain things, you know. ... She said, "don't get upset, ... just go along with nature." ... and I was explaining my frustrations and things to her, so she was showing me how to deal with it, which helped me a lot, because let me tell you, I didn't know what to expect. Plus my patience was wearing thin.

Me being calmer. Me calming down. Because I used to scream and just--now I'm like -- It's okay. It's alright. It's fine.

In addition to the enhancement of the quality of family life, many parents also appreciate the ways in which the parent educators work with their children and the educational skills their children are learning. A number of parents mentioned that parent educators are teaching their children ABC's, colors and numbers and that they are learning from the parent educator how much their children really know. Parents also agree that the parent educators have taught them to take time to read to their children. The comments of a few illustrate how the parent educators have emphasized the importance of integrating parent-child interaction into family life even when the parents' life is stressful or the parent is feeling low.

I used to read to my children, but only sometimes. I was always--I don't feel like it. I don't feel like reading a book. But now I read a book to all four of my girls every night. ... and you know if you say you don't feel like it, the only thing you're probably going to be doing is looking at TV, doing nothing when you could spend a little bit of time with your kids. That's more important

than just sitting there doing nothing. So I learned that, too.

I was stressed out and I wasn't reading to my children. My mother would read to us a lot, and I would read to them, but then with my problem (substance abuse) I didn't have time. But [the parent educator] showed me how you could sit down and read to them every night. It's not a stressful problem. She said, you can do it, you can do it. Take time out with your kids.

For many parents participation in the Family Center program is a way of beginning their children on their educational path. They see the Family Center as the start of an educational sequence that leads to pre-school, kindergarten, elementary school and on up. Their participation in the Family Center is connected to wanting to give their children the best possible start they can. Several parents talked to us about their desire to get their children prepared for school and how their previous experiences have led them to believe that participation in the Family Center would help them in this task.

I have found out that children that have not had any kind of education, exposure to any kind of nursery school, they seem to be a little behind. And I want Torrance to be -- when he goes into kindergarten -- not to go in and cry all day. I want him to be able to be familiar with and be able to relate with other kids and to be able to understand some of the things the teacher explains to him, and to be able to move right on and not be frightened, and not be behind.

My older two, when they went to kindergarten they were okay, but they didn't really know much. ... and I'm going to make sure with my younger two, when they go to kindergarten and Head Start, they'll be ready for it. Since they've been at the Family Center, they've learned colors. They've learned numbers.

For one parent the philosophy of the Family Center, to strengthen the capacity of parents to be their children's first and most important teacher, was an important reason for enrolling in the program. She believes that the Family Center is "even better" than nursery school because "when you go to the nursery school, the parents just drop them [the children] off, then go pick them up." Experience has taught her that education is a cooperative venture. "Education has got to be a cooperation between parents and the child, and the school. And you don't get that with nursery school. They teach them the basics, ... but the

parents are not involved. This way the parents are involved." Like many who have studied literacy, this parent recognizes that both the school and the family are contexts for learning and that the Family Center can provide a bridge between these two settings.

### **Futurê Directions/Recommendations**

The following set of recommendations grows out of this report and the two memos previously provided to the program director.

1. The Family Center can play a valuable role as a bridge between families and schools, helping schools understand the needs and family practices of their students, and families the expectations of schools. Having the Principal of the Barry School as the project director greatly enhances the capacity of the program to fulfill this role. In order to continue to build this bridging capacity, the project director and the parent educators should consider ways to strengthen formal and informal links between the Center staff and the Barry School and other schools in the area.

2. The PAT curriculum is a starting point and guide on parenting education, but needs to be adapted to local contexts. Individually and as a group the parent educators should continue to review and discuss the curriculum in order to explore systematically ways in which they need to adapt it to be appropriate to their setting and fill gaps where their experience with families varies from that described in the parenting education lessons.

3. Parents believe that bringing their children to the Center is positive for social, recreational and educational reasons. Many parents told us they wished that the Center would offer more activities for families, including more trips and outings. The program director and parent educators should explore ways of keeping the Family Center open to families more of the time, particularly offering more special activities like the arts and crafts projects that occur on Monday mornings, and more trips and outings for parents and their children.

4. For many parents, the home visits are a critical support, especially for those who can not come to the Center because of distance, for health reasons, or because their time is absorbed by other issues, for example, caring for sick children or relatives, looking for housing or a job. In several instances parents described feeling low and/or alone and the contact with the parent educator being a great relief. Despite the fact that the parent educators often find it difficult to establish home visit appointments with their families, and not infrequently they arrive at a home

visit to find that the parent needs to change her/his plans, parents value this contact and parent educators should persist in their efforts to arrange personal visits with families in their homes or at other locations convenient to the family.

5. Many parents have joined the Family Center program because they believed it was a first step in their children's educational sequence, guaranteeing them admission to Head Start. This year a change in School District policy about the age at which children could begin Kindergarten meant that many children stayed in early childhood programs a year longer and Head Start had limited space for new admissions. Family Center parents were disappointed when there was no room for their children and some think it is a "setback to the children when the children have to wait." In the coming years, the program director and parent educators should look for ways to smooth the entrance of children participating in the Family Center program into Head Start and other early childhood programs, to help parents realize their goal for a seamless educational program for their children.

6. An analysis of the health forms that parents fill out when they join the Family Center indicated that even though families had health providers, a large number of young children are still hospitalized for medical problems which could be treated by a health care provider. (See Appendix C.) As the Family Center expands its services to families, further research might identify the reason for this gap in health care and how it might be filled.

7. Many families, both those living with relatives and others, have identified housing as a critical issue. They need more advice on how to find adequate low-cost housing for rent or for purchase. As the Family Center expands its services it might consider housing one of the issues in which it offers additional advice. In addition, the parent educators might receive special training on how families can best address housing crises.

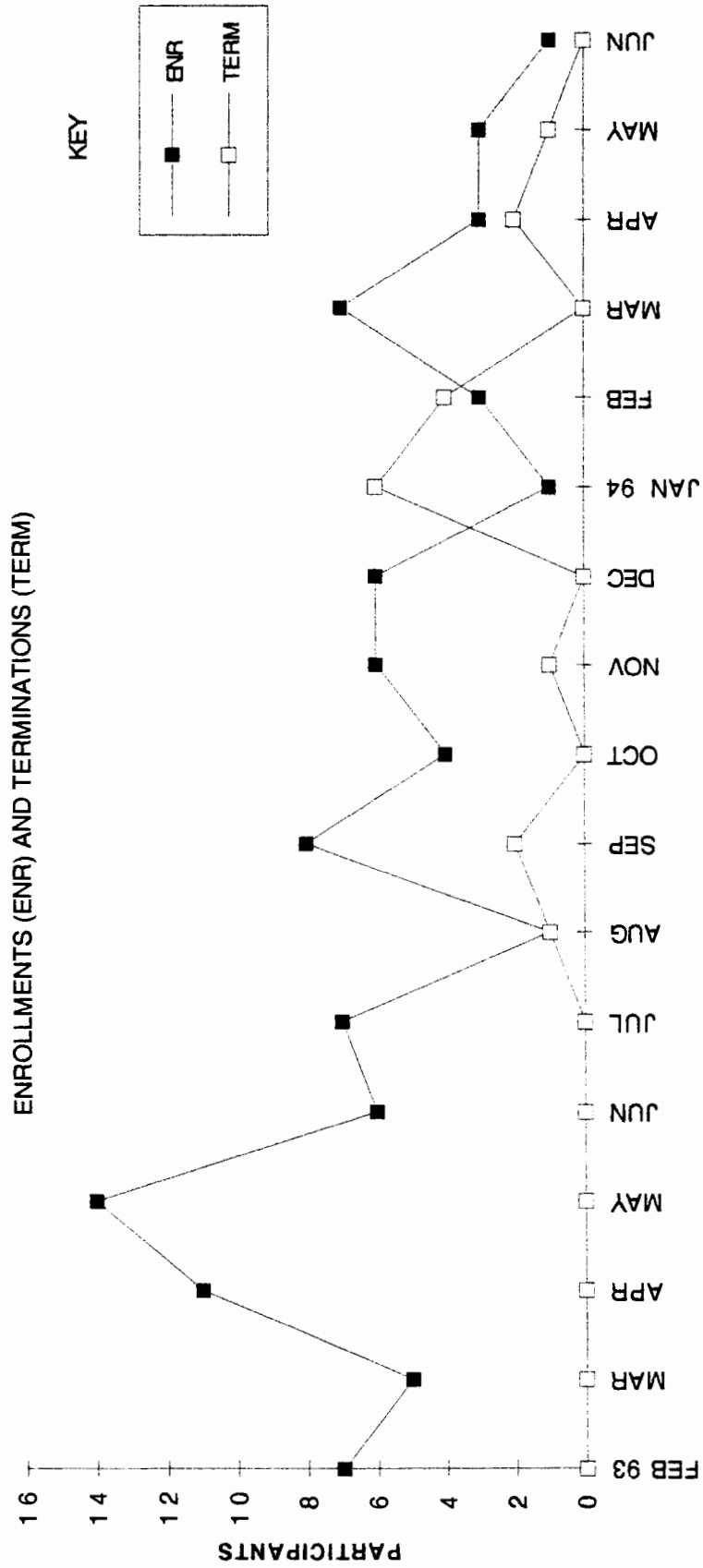
8. As parents participate in the Family Center program for longer periods of time, many of them might become more comfortable using the parent educators as sounding boards for setting long-term goals. The program director and parent educators might consider ways in which parent educators could be of most help to parents in this capacity, and whether any additional training would be useful to them.

9. The job of the parent educator has many dimensions. In order to fulfill the challenges they face daily, the parent educators believe they need additional training and

staff development in a range of areas. The program director and parent educators should work together to identify those areas most critical to the growth of the Center and to locate appropriate training opportunities.

APPENDIX A

**BARRY FAMILY CENTER - FEB 1993 TO JUN 1994**



## Appendix B

### THE PROGRAM PARTICIPANTS

The following demographic description provides an emergent view of who the program participants in the Family Center program are. It is based upon data gathered by the parent educators from families they enroll in the program. In each descriptive category the total number of families for whom data was available (N) is provided.

#### Race (N=74):

*Almost all of program participants are African-American.*

- 99.9% (73) are African American and less than 1% (1) is Hispanic.

#### Age (N=36)

*The majority of program participants are parents in their twenties.*

- 14% (5) are less than 20 years old;
- 61% (22) are between 20 and 29 years old;
- 22% (8) are between 30 and 39 years old;
- 3% (1) is older than 40 years.

#### Marital Status (N=46):

*The majority of families served by the Family Center report being single parent families.*

- 78% (36) are single and have never been married;
- 13% (6) are married;
- 9% (4) are separated or divorced.

#### Living Arrangement (N=56)

*Almost all of the families the Family Center program serves report being single-heads of households or families living with grandparents or other relatives.*

- 50% (28) live alone with his/her child(ren);
- 41% (23) live with their own family or a relative;
- 7% (4) live with a partner and/or spouse;
- 2% (1) live with a friend.



**Pregnancy Status (N=70)**

*Eighty-nine percent (62) of the women were not pregnant at the time of enrollment.*

**Number of children in family (N=75)**

*The average family in the program has 3 children.*

- 21% (16) have one child;
- 21% (16) have 2 children;
- 27% (20) have 3 children;
- 12% (9) have 4 children;
- 19% (14) have 5 or more.

**Number of children in the program per family (N=76)**

*The majority of families have one child in the program.*

- 4% (3) have no children in the program (they are pregnant);
- 87% (66) have 1 child in the program;
- 4% (3) have 2 children in the program;
- 2.5% (2) have 3 children in the program;
- 2.5% (2) have 4 or more in the program.

## Appendix C

### HEALTH PROFILE

The following summary of the Health Questionnaires provides an emergent profile of the health status of the children of the program participants. Thirty-nine questionnaires were available for analysis. These questionnaires were completed between January 1993 and April 1994.

*The greatest number of children for whom data was available (N=37) were less than 2 years of age.*

- 12 children less than 1 year;
- 9 children less than 2 years;
- 6 children less than 3 years;
- 8 children less than 4 years;
- 2 children less than 5 years;

*Although the parents report that the majority of children have regular health care providers, there was a high incidence of hospitalization.*

- 3 children did not get regular check-ups and 4 were not up-to-date with their immunizations;
- 11 children had been hospitalized for reasons including respiratory and viral infections, excema, allergies, and accidents.

The incongruity between the majority of respondents reporting that their children have regular health care providers and the high incidence of hospitalization of young children may indicate that the families in this neighborhood have difficulty accessing the health care services that are available to them, except for regular checkups and immunizations which can be planned for in advance. Further research would be needed in order to determine what factors contribute to difficulties with accessibility, or to discover what other factors contribute to the high rate of hospitalization.

*Parents report a range of concerns about their children, including behaviors which are indicators of stress and inappropriate expectations for developmentally appropriate conduct.*

- parents checked concerns for 5 to 10 children in each of the following categories: overly sensitive, restless, irritable, bad tempered, wants attention, moody, bad dreams and has difficulty separating;
- parents checked concerns for 4 children in each of the following areas: jealousy and stubbornness;
- parents checked concerns for 3 or less children in

each of the following areas: thumbsucking, nail-biting, nervousness, destroys things, selfish and disobedient.

-- parents reported that they had no concerns for 12 of the children.

The respondents' concerns about their children also indicate that parents often perceive their children as unhappy and troubled. These concerns might spring from the parents own feelings of stress, or from stress the child feels. The response of the parents also indicates, however, that some parents concerns reflect a lack of knowledge about child development. For instance, a mother of a 5 month old responded that she had concerns about her baby separating from her and another mother of a 5 month old had concerns about her baby's thumbsucking. Both of these sets of parents, once identified by the parent educators, can be assisted by them. The Family Center program counsels parents on how to manage their own and their children's stress, and on developmentally appropriate expectations for their child's behavior.

#### Other comments:

It is also possible that only those parents who can report that their children receive regular health care are willing to complete the questionnaire. Further research would need to be done to see if those who did not fill it out were reluctant because they did not want to make public the fact that their family does not have access to regular health care services. If this is the case, then this emergent profile of the health status of the program participants is seriously skewed.

The responses to the questionnaire might also indicate that the Family Center is currently attracting those parents who best know how to seek services. If this is the case, then providing services such as health care might be an outreach strategy that would attract other families to the program who currently do not express an interest in it, but who once enrolled might benefit from the array of services it offers.

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