



Developments

Serving children and families by promoting

Interdisciplinary education and research • University-community programs • Dissemination

Family Intervention Tested

A Little Help During The "Terrible Twos" May Curb School-Age Problem Behavior

The "terrible twos," a period when even strong parent-child relationships can become frayed, may also be a time when family-based interventions to prevent later conduct problems work best, says a University of Pittsburgh researcher.

Daniel Shaw and colleagues are offering low-income parents of boys ages 18-months to 2 years an intervention package that assesses the risk of their children developing conduct problems, and allows them to select the treatment they feel will best help them.

"There is something going on around that age that elicits a challenge for many parents," said Shaw, Ph.D., Associate Professor, Psychology, University of Pittsburgh. "If you have a mom or dad who has a slightly aggressive personality, maybe those buttons don't get pushed in the first year. But when that child starts walking, breaking things, maybe hurting pets, it may be different."

Dr. Shaw is investigating the intervention with Drs. Frances Patterson of Oxford University, England, and Thomas A. Dishion of the University of Oregon. Their work is supported by a grant from the National Institute of Mental Health.

Despite evidence that children who show problem behaviors early account for a large share of serious antisocial acts later during adolescence, children around age two are not often the focus of interventions. And a developmentally-based intervention sensitive to the family environment, such as the one proposed by Dr. Shaw, has not yet been tested.

By starting young, the intervention addresses the roots
(Behavior continued on Page 2)

IN THIS ISSUE

Job Retention Initiative in County Helps Welfare-to-Work Succeed, 3

Announcements, 4, 12

Special Report - Preventing Youth Violence: The Effectiveness of Parent-and-Family - Based Strategies, 5

Focus on Foundations and Corporations, 9

Child Watch

Opening Eyes to Troubling Conditions Helped Put Juvenile Court on the Mend

Child Watch of Pittsburgh was a fledgling nonprofit when it set out to rally support around reforming the troubled dependency branch of Juvenile Court in Allegheny County. Some four years later, its efforts are paying dividends.

Juvenile Court is on the mend, thanks in large part to Child Watch deciding in 1996 to give area foundation officials a first-hand look at the overcrowding and assembly-line justice that advocates and even some judges had long complained about. Nearly \$3 million was donated by nine

foundations to add hearing officers to the court's thin judicial ranks and ease exceptionally high caseloads that court officials and outside observers agreed were at the root of many of the court's problems.

"We were concerned about the inhumane way children were treated," said Judy Horgan, Child Watch Co-Coordinator. "We felt the message given to children about what society thought about them was very negative and we had to try to change that."

(Child Watch continued on Page 10)

(Behavior continued from Page 1)

of aggression and violence, which more Americans come to view as a national crisis with each report of a child murderer or shooting. Although nearly all measures of violence among children have declined in recent years, youth violence remains far worse in the U.S. than in any other developed nation, and homicide is still holding on as the second leading cause of death among American children ages 1 to 14 years.

Family Intervention

Research suggests that the characteristics of children and parents and certain aspects of the environment in which children grow up strongly influence whether children develop serious antisocial behaviors.

Parental depression, hostility, substance abuse and disagreement among caregivers over parenting issues are included in the long list of factors that put their children at risk of conduct problems. Growing up poor or in dangerous neighborhoods are other factors.

Dr. Shaw, who started studying factors associated with vulnerability and resiliency among low-income boys in Pittsburgh nine years ago, said the family factors that seem to best predict later conduct problems in children include a parent's satisfaction with social supports, depression, hostile parenting, and parenting styles.

While the needs of parents and other factors in the home cannot be ignored when designing ways to prevent antisocial behavior, they tend to complicate intervention.

The good news is that a large body of evidence suggests that the way parents interact with their children can be improved by family-based intervention. And evaluations of parent- and family-based interventions have found several that appear to help prevent conduct problems, and lessen the risk that children will develop violent behaviors. (See *Preventing Youth Violence: The Effectiveness of Parent- and Family-Based Strategies*, a Special Report in this issue of *Developments*).

...a large body of evidence suggests that the way parents interact with their children can be improved by family-based intervention.

Terrible Twos

Aspects of parenting and the relationship between parent and child during the first years of life have been found to influence conduct later in life.

Over the nine years he's followed the development of 310 at-risk boys, Dr. Shaw has observed that early coercive parent-child relationships are associated with child conflicts with peers and teachers at age six and clinically-meaningful conduct problems at age eight. The findings suggested to him that an intervention to improve parenting tailored to high-risk families of young children might prevent serious conduct problems at school-age.

The so-called terrible twos seems well suited to test such an intervention. First, it is a period during which many parents experience heightened levels of stress as they try to cope with a child suddenly curious and mobile. During this time, the equilibrium of the parent-child relationship is often disrupted. Parents try ways to control their children behavior and children oppose those attempts, sometimes aggressively.

"One route we've seen parents take is to just let it go, in which case the child is not socialized," Dr. Shaw said. "We've also noticed that parents may react too strongly."

Perhaps during no other time in their child's development would parents benefit more from improved parenting skills and strategies, and interventions that reduce stress. Parents and children are also more likely to be open to changing their behaviors at age two than at school-age, when behaviors can become more entrenched and relationships more distant.

At-Risk Families

Families are being recruited for the study from Allegheny County WIC offices. Only families with boys 18 months to two years of age and who have circumstances that place the children at risk of developing conduct problems are being considered.

Dr. Shaw and colleagues want to measure how effective their approach to preventing conduct problems is with low-income, high-risk families, a population that has pre-

(Behavior continued on Page 10)

Developments is a quarterly publication of the University of Pittsburgh Office of Child Development, which is solely responsible for its content. The Office is a program of the University Center for Social and Urban Research (UCSUR) and is sponsored by the Howard Heinz Endowment, the Richard K. Mellon Foundation, the University of Pittsburgh, and UCSUR, and is co-directed by Christina J. Groark, PhD and Robert B. McCall, PhD. *Developments* is edited and written by Jeffery Fraser and produced by Mary Louise Kaminski at the Office of Child Development, University of Pittsburgh, 121 University Place, Suite 201, Pittsburgh, PA 15260. Phone: (412) 624-5527; Fax: (412) 624-4551; E-Mail: mlkam@pitt.edu; Internet: www.pitt.edu/~ocdweb/.

GAPS Study

Job Retention Initiative In County Helps Welfare-To-Work Succeed

As the challenge of welfare-to-work shifts from finding jobs for welfare recipients to keeping them employed, states might turn for guidance to an Allegheny County initiative that has shown promise helping women fresh off welfare succeed in the workplace.

Already, lessons learned from the GAPS initiative have informed job retention programs in Pennsylvania, said Annette Green, a program officer at The Pittsburgh Foundation, which developed the program with the Allegheny County Assistance Office. GAPS is gaining national attention as well.

Four community-based organizations provided GAPS services beginning in 1997. The voluntary program provided nearly 600 women with case managers, who arranged for services, such as counseling, child care, help with transportation, and general advice about the workplace, which all of the women had little experience in.

After three years, the reported rate at which GAPS participants stayed employed was higher than national averages for those leaving welfare.

And the program also identified several of the challenges job retention programs face and suggested some ways those challenges might be overcome.

Staying On The Job

The job retention program helped an impressive number of women new to the workplace stay employed.

National studies suggest that more than half of welfare recipients 1980s and early 1990s who found jobs lost them within six months. But nearly 70% of the women who participated in the GAPS program managed to hold onto a job during their first six months in the program, and half were steadily employed for 18 months, according to a study by Mathematica Policy Research released in December.

For many of the women who did become jobless, unemployment was brief. In the first year of the program, 20% found new jobs within a month and another 39% were back to work within three months.

On the other hand, about 15% of those who became unemployed stayed jobless for one year or longer. At least half reported they stayed unemployed for reasons related to children, such as not being able to afford child care, being pregnant, caring for an infant, or just wanting to stay home and raise their children.

Two out of three women in GAPS earned enough money to lift them out of poverty, but their wage levels remained low and their incomes stayed modest. On the average, they earned less than \$8 an hour and their earnings averaged about \$20,000 a year.

Obstacles To Success

Although most GAPS participants held onto their jobs and made economic progress, some struggled to stay employed. The reasons were varied, but several challenges were found to be common.

About 20% of the women reported that workplace conflicts and difficulty getting along with others were problems that affected their jobs. Such problems ranked among the toughest to solve because they were often associated with serious personal problems, such as mental health issues and substance abuse.

Overcoming transportation problems was another challenge. The majority of the women relied on public transportation. About 13% missed time because of a problem getting to work and 6% reported that transportation problems led to them to miss an entire day.

For those who took the public transit, commuting times were long, an average of 50 minutes each way. The long commutes reduced the time they spent with their children, on household chores, and at work.

Not surprisingly, child care loomed as a major concern among GAPS participants, particularly during the early years of the program.

Child care problems often led to missed time on the job. For example, the GAPS participants who had children under six missed work an average of eight times a year because of child care problems. And about 14% of the participants reported child care problems as an issue that made staying employed difficult for them.

Child care can be a considerable expense to newly-hired workers. About 40% received child care subsidies. Even with the subsidies, they paid an average of \$31 a week, or about 10% of their earnings. But about 30% of the GAPS mothers received no subsidies and paid the full cost of child care. These payments on average cost mothers \$66 a week, a hefty 22% of their family earnings.

Most GAPS recipients relied on relatives or other types

(GAPS continued from Page 3)

of informal care, which tend to be more convenient and less costly, but more prone to break down.

After the state implemented the Child Works child care subsidy program in 1999, child care problems among GAPS participants eased, particularly after co-payments were lowered in 2000.

As a result of these and other challenges, the women enrolled in GAPS tended to miss substantially more work time than other working women, which may have limited prospects for job advancement and put some of them at risk of losing their job.

Lessons Learned

Some of the lessons learned from GAPS have already helped shape other job retention initiatives, including Pennsylvania's most recent effort, the Job Retention, Advancement and Rapid Re-Employment services program (RARE).

The GAPS study notes several issues that policymakers and program designers might find helpful, including the following observations:

New workers value the counseling and support that a case manager can provide. GAPS participants who most often sought help with housing, transportation, child care, and money management appreciated the personalized support and attention they received and reported high levels of satisfaction with their case managers.

Community-based programs may be useful to welfare

agencies seeking to provide case management services to newly-employed welfare recipients.

Supplementing case management with additional services may improve outcomes and gain the trust of participants. In GAPS, participants who received services with a more direct connection to employment, such as help with child care and transportation, were more likely to rate GAPS services as useful.

Child care is a critical issue for many new workers and services that help improve the reliability of child care are particularly useful.

Finally, the study suggests that a greater emphasis on job advancement may be a useful strategy for keeping former welfare recipients in the workforce.

Although most GAPS participants stayed employed, their wages remained fairly low and many were looking for better-paying work almost from the beginning. About 40% said they would have liked to have attended additional training, but could not, often because they were not able to afford to pay for it or they were unable to arrange the necessary child care.

Education and training levels were found to be among the key factors that determined success or failure in the workplace. Those who began the GAPS program with below-average wages were less successful at keeping their jobs. Those who came into the program with more education not only were more likely to hold onto jobs, but also to experience higher wage growth. ■

Announcements . . .

NIMH Grants Support Mental Disorders

Applications are being accepted by the National Institute of Mental Health for grants supporting the translation of work from basic behavioral science research and integrative neuroscience research to pressing issues in all aspects of mental disorders.

Applicants may request up to \$1.5 million in direct costs for any single year. The project period is five years.

Deadlines for letters of intent are Sept. 22, 2001 and Sept. 22, 2002. Deadlines for applications are March 12 and Oct. 22, 2001, and Oct. 22, 2002.

FOR MORE INFORMATION, contact Bruce Cuthbert, (301) 443-3728; fax, (301) 443-4611; bcuthber@mail.nih.gov; <http://grants.nih.gov/grants/guide/pa-files/PAR-01-027.html>. ■

Grants Offered To Examine Mental Health Service Sites

The National Institute of Mental Health and the National Institute on Drug Abuse are accepting applications for studies of services delivered to children, adolescents, and their families through the Center for Mental Health Services' Comprehensive Community Mental Health Services for Children and Their Families program.

The institutes are interested in studies that examine the effectiveness of treatments or services delivered at these sites, the nature and impact of routine clinical practice, and factors related to successful implementation of treatments and services.

Deadline for applications is Oct. 1. Nonprofit and private for-profit organizations are eligible.

FOR MORE INFORMATION, contact Heather Ringeisen, (301) 443-9263; e-mail: hriageis@nih.gov; or visit <http://grants.nih.gov/grants/guide/pa-files/PA-00-135.html> on the Internet. ■



PREVENTING YOUTH VIOLENCE: THE EFFECTIVENESS OF PARENT-AND-FAMILY-BASED STRATEGIES

Special Report

University of Pittsburgh Office of Child Development
Serving Children and Families By Promoting

Interdisciplinary Education and Research • University-Community Programs • Dissemination

A leading strategy for preventing children from developing violent tendencies is to design interventions aimed at improving family relations that can profoundly shape the course children follow throughout childhood and later in life.

The interactions between parents and their children, in particular, tend to accurately predict violent behavior. Studies suggest that having an emotionally distressed parent at age four contributes to a child developing conduct disorders and antisocial behaviors. And marital conflict, poor communication between parents, and other family characteristics have been identified as factors that contribute to youth violence.

Parent- and family-based strategies are particularly well suited for parents of very young children or those who have a child on the way. These programs usually focus on giving parents a better understanding of child development and issues such as why children develop violent tendencies. They also help parents develop parenting skills, nonviolent ways to resolve conflict, and ways to communicate with their children.

Studies suggest that such interventions, when well designed and implemented, can reduce violent behavior among children over the long term. The most promising programs are those that begin early in childhood and recognize all the factors that influence families, from financial circumstances and neighborhood characteristics to parenting practices and mental health issues.

The Problem

Although nearly all measures of youth violence are in decline, violence among children and adolescents remains a major concern in America, one that many see as a national crisis.

High-profile school shootings, although statistically rare,

have raised public concern over youth violence, have led many Americans to realize the problem is not exclusive to the inner city, and heightened demands on policymakers to find ways of stopping it.

Even improving statistics cannot hide the fact that youth violence in America is far worse than in any other developed nation, or that homicide remains the second leading cause of death among American children ages 1 to 14 years.

In 1998, America saw a decline in the number of juveniles arrested for Violent Crime Index offenses – murder, forcible rape, robbery, and aggravated assault, according to the U.S. Department of Justice.¹ The decline was the fourth reported in as many years.

Nevertheless, the 2.6 million youth under age 18 who were arrested in 1998 for Violent Crime Index offenses still represented a 15% increase over the total arrests reported in 1989.

Juvenile homicides have also fallen steadily, although the murder toll remains higher than that seen in the mid-1980s. In 1998, there were 1,960 murder victims under the age of 18 – down from the 2,880 juveniles murdered in 1993, when the toll was the highest ever in the U.S. The good news, however, is tempered by the fact that the recent decline has only returned the murder toll to the level reported 1988, when youth violence was rising in America.

Statistics and studies show clearly that the use of firearms is a powerful influence on violent juvenile crime trends. Nearly all of the increase in juvenile homicides from 1984 to 1993 – and all of the decline since – has been in murders committed with a firearm, with the handgun being the weapon of choice. And from 1980-1997, about 77% of the juveniles aged 15 years and older who were murdered by another juvenile were killed with a gun.

Why children turn to violence is a question with many possible answers. Unchecked aggression early in childhood

and drug and alcohol use are just a few of the risk factors of violent behavior. Domestic abuse, poor parenting practices, weak supervision, and other family characteristics are also associated with child violence.

Risk Factors

Certain characteristics of parents and children and circumstances facing families are associated with children developing violent behaviors.

Parent Factors

Parents who engage in violence themselves, abuse drugs or alcohol, and abuse or neglect their children increase the likelihood their children will become violent.

Other risk factors include:

- Harsh or inconsistent discipline.
- Lack of emotional interaction between a parent and child.
- Lack of communication between a child's mother and father.
- Parental depression.
- High levels of stress in the home.
- Domestic violence.
- Divorce and separation.

Few parents face greater stresses than those living in poverty. And poor single mothers have been found to be at the highest risk for developing parenting patterns that can lead to violent behavior by their children.²

Child Factors

Factors placing children at greater risk of developing violent behaviors, include:

- Living in violent-prone neighborhoods.
- Witnessing violent acts.

- Associating with violent or antisocial friends.
- Being a victim of abuse.

In school, learning problems or high absenteeism can signal a child's descent toward violence.

Children at high risk for developing violent behaviors often show clear behavioral markers. These include:

- Bullying other children or being the target of bullies.
- Displaying aggressive behavior.
- Being truant.
- Belonging to delinquent or violent peer groups.
- Abusing alcohol or other drugs.
- Setting fires, treating animals with cruelty, or engaging in other antisocial behavior.

Intervention

Parent-and family-based interventions for reducing the risk of children developing violent behavior stand a better chance of success when they embrace certain characteristics.

Tailored To Participants

When parenting interventions are tailored to the unique characteristics and needs of the intended participants, for example, they usually are more successful. An important early step, therefore, is identifying the population a program wishes to reach.

It is also important that programs consider the participants' age, life circumstances, race, and other cultural and demographic issues. When the group is fairly homogeneous, programs are better able to tailor materials and activities to them.

And culturally-relevant content tends to create a stronger sense of ownership and promote community-building. Effective Black Parenting, for example, was adapted from

a generic parenting skill-building intervention to better fit the culture and parenting practices in South Central Los Angeles. The program has been found to have led to several positive outcomes, including improved family relations and fewer problems related to child behavior.³

Long-term improvements are more likely to be realized when programs are expanded to help parents deal with issues such as stress, depression, marital conflict, housing, and financial matters.

Successful parent- and family-based interventions share other characteristics. These programs, for example:

- Involve parents and community in planning the intervention.
- Set clear goals and objectives.
- Hire staff appropriate for the type of intervention and train them thoroughly. Studies suggest the quality of the relationships between practitioners and parents can profoundly affect the outcomes of parent- and family-based interventions.
- Evaluate outcomes.
- Link interventions with other strategies, particularly when dealing with parents of school-aged children. Adverse experiences in school can forecast violent behavior, and evidence suggests that a partnership between parents and the school is more effective than parent-based strategies alone.⁴

Young Children

More specifically, interventions for parents of young children often have the best chance of success because behavior patterns of parents and children are still developing and are more readily influenced.

Parent-Child Interaction Training, for example, helped reduce aggression, hostility, anxiety, and hyperactivity among preschool children by having their parents attend small-group sessions, which included instruction, role-playing, supervised play and other activities designed to reinforce positive parenting practices.⁵

Successful programs usually include an overview of

child development, which helps parents set realistic, age-appropriate expectations for children. These programs often share other principles. For example, most:

- Teach the use of praise and rewards to reinforce good behavior and correct bad behavior.
- Emphasize the need for supervision and discipline, promote an understanding that children need a consistent set of rules to follow, and teach parents nonviolent disciplinary practices to use when their children break those rules.
- Offer instruction on the impact of seeing violence, in person and on television programs and movies.

Adolescents and Teens

Research suggests that parent- and family-based programs to reduce violent behavior among adolescents and teens should explain age-appropriate developmental issues, such as sexuality, growing independence, and the likelihood of their children engaging in rebellious behavior.

Successful programs for older children also address issues such as increasing positive communication patterns among family members, and helping parents identify positive role models among extended family and the community.

Parents who took part in the Adolescent Training Program reported a lower tendency to overreact to their child's behavior, greater diligence dealing with problem behavior, and less depression.⁶ Studies found the more sessions a parent attended, the greater the reported improvements in their child's behavior. This program for parents of middle school students attempts to improve a range of parenting skills, including making rules, monitoring, providing reasonable consequences for rule violations, and problem-solving.

High Risk Children

Disadvantaged parents, particularly low-income single mothers, pose a challenge to parenting programs. However, interventions that involve parents in planning, leadership and other key aspects of the program have been successful in recruiting mothers and improving their parenting skills.⁷

Some programs work with parents before or immediately after the birth of their child. Counseling, parenting

skills training, strategies for problem-solving, and other services are offered to help parents manage their lives more effectively and reduce stress typical of raising an infant. Several have shown promise, such as the Houston Parent-Child Development Center, which serves as a "parent college" for Mexican-American families. Children of parents in the program have had fewer problem behaviors than a comparison group of children whose parents did not receive this program, and the improved behavior has been seen for as long as eight years after the parents enrolled.⁸

These programs and others underscore how profoundly the relationship between parent and child can influence the development of violent behaviors. Studies suggest that regardless of the child's risk level or age, interventions focused on the parent and family are among the most effective at preventing those behaviors from developing.

References

Thornton, T.N., Craft, C.A., Dahlberg, L.L., Lynch, B.B., & Baer, K., (2000). *Best Practices of Youth Violence Prevention: A Sourcebook for Community Action*. Atlanta, GA: Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. (The CDC report can be ordered by calling 1-888-252-7751 or by visiting www.cdc.gov/ncipc/dvp/bestpractices.htm on the Internet).

This Special Report, written by Jeffery Fraser, is largely based on the above-referenced report. It is not intended to be an original work but a summary for the convenience of our readers. References noted in the text follow:

¹ Snyder, H., N., & Sickmund, M. (1999). *Juvenile offenders and victims: 1999 national report*. Washington, DC: Office of Juvenile Justice and Delinquency Prevention.

² Patterson, G.R., Reid, & J.B., Dishion, T.J. (1992). *A Social Interactional Approach IV: Antisocial Boys*. Eugene, OR: Castalia Publishing.

³ Myers, H.F., Alvy, K.T., Arrington, A., Richardson, M.A., Marigna, M., et al. (1992). The impact of a parent training program on inner-city African-American families. *Journal of Community Psychology*, 20 (2): 132-147.

⁴ McMahon, R.J., Slough, N.M. Conduct Problems Prevention Research Group. Family-based intervention in the Fast Track program. In Peters, R.D., McMahon, R.J., editors. *Preventing Childhood Disorders, Substance Abuse, and Delinquency*. Thousand Oaks, CA: Sage Publications, Inc. 1996:90-110.

⁵ Strayhorn, J.M., Weidman, C.S. (1991). Follow-up one year after Parent-Child Interaction Training: Effects on behavior of preschool children. *Journal of the American Academy of Child and Adolescent Psychiatry*, 30(1): 138-143.

⁶ Irvine, A.B., Biglan, A., Smolkowski, K., Metzler, C.W., & Ary, D.V. (1999). The effectiveness of a parenting skills program for parents of middle school students in small communities. *Journal of Consulting and Clinical Psychology*, 67(6): 811-825.

⁷ Webster-Stratton, C., Hancock, L. Training for parents of young children with conduct problems: content, methods, and therapeutic processes. In: Briesmeister, J., Schaefer, C.E., editors. *Handbook of Parent Training: Parents as Co-Therapists for Children's Behavior Problems*. New York: John Wiley & Sons, Inc. 1998: 98-152.

⁸ Johnson, D.L. Primary prevention of behavior problems in young children: the Houston Parent-Child Development Center. In: Price, R.H., Cowen, E.L., Lorion, R.P., Ramos-McKay, J. editors. *14 Ounces of Prevention*. Washington, D.C.: American Psychological Association, 1988:44-52.

University of Pittsburgh Office of Child Development, a program of the University Center for Social and Urban Research, 121 University Place, Second Floor, Pittsburgh, PA 15260 (412)624-7426. Internet: www.pitt.edu/~ocdweb/.

Focus on Foundations and Corporations

i2 Foundation

The i2 Foundation awards more than \$1 million in grants that support work in a range of fields, including education and issues related to children, youth, and families.

The foundation, established by employees of Dallas, TX-based i2 Technologies, funds projects worldwide.

Foundation interests include the education and development of children, hunger, illiteracy, poverty, violence against women, youth violence, improved health care, and early child development. Recent grants included an award to support post-secondary scholarships for orphans and foster children, and a grant to support a New Jersey Court Appointed Special Advocates program for dependent children in juvenile court.

Details and guidelines for applications can be found on the Foundation's web site at www.i2foundation.org.

FOR MORE INFORMATION, contact, Bindu Nambiar, Grants Coordinator, i2 Foundation, 111701 Luna Road, Suite 1112, Dallas TX 75234; (469) 357-3117; e-mail: bindu_nambiar@i2.com. ■

CVS Corporation

The CVS Corporation awards grants that support health initiatives, educational programs, and community outreach.

The company is interested in supporting work in fields that include early child development, elementary and secondary education, pharmacy education, and HIV/AIDS research.

Grants range from \$5,000 to \$25,000. Nonprofit organizations in Pennsylvania and the other 24 states in which CVS stores are located are eligible to receive awards.

Proposals should be submitted between January and September to be considered for funding in that year.

FOR MORE INFORMATION, contact CVS Community Relations Department, 1 CVS Drive, Woonsocket, RI 02895 (401) 765-1500; or visit www.cvs.com on the Internet. ■

Hasbro Children's Foundation

Improving the quality of life for disadvantaged children ages birth through 12 years is the mission of the Hasbro Children's Foundation, which supports innovative direct services programs in education, health, and social services.

Most local grants for community projects range from \$500 to \$35,000. For multi-site expansions, grants of \$35,000 and up are typically awarded. Recent grants include an award to fund expansion of a program providing literacy training for caregivers and books to Head Start children, and a grant supporting a community-based program to help prevent children from becoming victims of crime and gang violence.

Programs must provide direct services to children under 13 years of age. They must also serve low-income children and families, be innovative, and provide a model from which others can learn, and they must be implemented by experienced organizations.

There are no deadlines for proposals.

FOR MORE INFORMATION, contact Hasbro Children's Foundation, 32 W 23rd Street, New York, NY 10010; or visit www.hasbro.org on the Internet. ■

Note to University of Pittsburgh Faculty

It is University policy that foundation and corporate funding sources may be approached only through, in cooperation with, or with the approval of the Vice Chancellor for Institutional Advancement. Interested faculty should contact Al Novak, Associate Vice Chancellor for Corporate and Foundation Relations at 624-5800.

(Behavior continued from Page 2)

sented researchers with challenges so complex that some express doubt that interventions will ever be effective in significantly reducing the risks to their children.

To ensure that the families studied face daunting obstacles, parents chosen for the study must – in addition to being poor – have other issues serious enough to place their children at risk, such as being a teen-aged parent, suffering from depression, or struggling with a substance abuse problem.

Some are chosen for the intervention. Others recruited from the WIC offices are asked to be part of a control group. In all cases, participation is voluntary.

The intervention is implemented in a series of home visits. During the first visit, child and family factors are assessed, including risks and behaviors, through observation and questionnaires. For example, children might be observed at play and while parents are busy preparing a meal. Parents might be asked to participate in cooperative tasks, such as working together on a puzzle.

(Child Watch continued from Page 1)

Dependent children remain a priority of the nonprofit, which recently began exploring ways to improve their health care.

Opening Eyes

The strategy used by Child Watch, a national project sponsored by the Children's Defense Fund, is to expose people in power to local issues involving children, and recruit their help in bringing about solutions.

In Pittsburgh, the Child Watch program was influenced early on by the experiences of members who worked with dependent children in Juvenile Court. Some had long been advocates of court reform and were involved with organizations such as the Permanency Planning Task Force, which has worked to improve the well being of dependent children for more than eight years.

Child Watch decided to focus on improving permanency planning, the process of expeditiously finding a permanent, nurturing family for dependent children rather than allow them to drift from one foster home to another for years. So-called "foster care drift" was a serious problem. By the early 1990s, heightened awareness of child abuse and neglect, rising poverty, the continuing dissolution of the family, and the introduction of crack cocaine all contributed to a surge in child dependency cases. In Allegheny County, the Office of Children, Youth and Families reported an active caseload of 9,720 children on New Year's Day 1996 –

Family Check Up

At the core of this approach is the Family Check Up, which starts with home visits to build rapport with caregivers and moves on to build a collaborative framework for intervention.

The results of earlier observations and assessments are shared with parents, who are encouraged to discuss their concerns and needs, particularly related to parenting practices and family management, as well as their resources and liabilities. The early meetings not only determine the willingness of parents to work toward change, but also the nature of the interventions to follow.

After discussing their circumstances and the risks to their children, parents are given a menu of family-based interventions and allowed to decide the issues that will be addressed through treatment. "We're hoping to reach families that have some sense of distress and who, with a little help, can do something about it," Dr. Shaw said. ■

a 70% increase over the caseload carried in 1987.

The flood of cases caught the county unprepared. With only one full-time judge and four part-time judges to handle more than 17,000 hearings a year, each averaged 63 cases a day. When the U.S. Department of Justice ranked dependency courts according to resources, the county turned up last among courts of similar-sized jurisdictions.

No single factor influences the quality of dependency courts more than the number of judges, magistrates, or other officers available to hear cases, said Hunter Hurst, Jr., a researcher for the National Center for Juvenile Justice who has evaluated juvenile courts across the country.

In Allegheny County, an assembly-line handling of child dependency cases meant the court had less time to scrutinize cases, make sure parents moved steadily toward rehabilitation, and look for signs of trouble. Many hearings were never held at all, dispatched instead as memos. Continuances and second, third, and fourth chances given parents to mend their ways became the rule, rather than the exception. Cases stalled. Too often, children lingered in the child welfare system, their lives put on hold.

Late in 1996, Child Watch organized tours of the overcrowded and chaotic juvenile courthouse at 3333 Forbes Avenue in Oakland, giving foundation officials and others a rare glimpse of a court in crisis. Committees were quickly formed to explore solutions. By 1998, nine foundations

(Child Watch continued on Page 11)

(*Child Watch* continued from Page 10)

pledged enough money to launch the Hearing Officers Project, which sought to ease judicial caseloads and improve court oversight.

Hearing Officers

Three full time hearing officers and a dependency coordinator were hired, along with three additional child advocates, parent advocates, and assistant county solicitors. Private funds were sufficient to pay all or part of the projects cost for four years, after which the county is to assume financial responsibility.

Each judge was assigned a hearing officer, whose job was limited to presiding over dependency review cases. The court decided to leave the shelter hearings, petition hearings, termination of parental rights, and adoption hearings to judges.

Other changes included reviewing each child's case every three months – the law requires reviews at least every six months – holding reviews in less-crowded offices away from the courthouse, and scheduling them for specific times, rather than posting all as starting at 9 a.m., which had been past practice.

Adding the hearing officers was perhaps the most significant step taken to improve dependency court, but not the only one. A designated adoption unit, for example, was put in place to reduce a backlog of stalled cases. And the 1997 federal Adoption and Safe Families Act put pressure on courts across the nation to terminate the custody rights of parents whose children had been court-dependent for 15 of the most recent 22 months, so that children might be placed in permanent homes more quickly.

Improvements Seen

Almost immediately, judicial caseloads fell in Allegheny County. By the end of 2000, the average caseload each judge carried had dropped from 63 cases a day in 1997 to 20-25 cases a day.

The time-saving shortcut of substituting written memos for review hearings was eliminated. Cases were reviewed more frequently and allotted at least 20 minutes, providing opportunities to present witnesses and examine issues related to the well-being of children that previously the court had little time for.

Statistical measures also suggest a dependency process on the mend. For example, the number of children in placement fell from 2,581 children on January 1, 1999 to 2,419 children on January 1, 2001, a decrease of about six percent. Over the same period, the average length of time children spent in placement fell 35 percent to an average of 10.1 months, according to CYF.

More work remains. Judges said, for example, they need more judges to handle dependency cases. And Child Watch has identified two issues related to the health of dependent children and has begun to address them.

Exploring New Issues

Child Watch officials said that a recent fact-finding study identified the lack of a central registry for foster children's medical records and a shortage of psychological services as two health-related issues that need to be addressed.

The nonprofit has been working to convene institutions, such as hospitals, around these issues so they might arrive at a solution. The University of Pittsburgh Medical Centers, for example, has been exploring solutions regarding the issue of providing psychiatric services.

Also in the exploratory stage is a central medical registry that would give foster parents greater access to the health records of children who are placed with them. "Medical records don't follow these children," said Vicki Sirockman, Child Watch Co-Coordinator. "So, the foster mom may not know if they have had their shots or whether they have a chronic illness. The information gets lost in a shuffle." ■

Notice to *Developments* Subscribers

To subscribe to *Developments*, a free publication, please mail the following information to our Office (if you have not already done so): name, profession, title/position, work address, and phone number. (See this newsletter's back page for the OCD address.)

To submit material, write the Office of Child Development. Notices of programs or services will be published at the editor's discretion. All programs must be educational and nonprofit, and any fees charged must be noted. Publication of services does not imply an endorsement of any kind by OCD, its funding agencies, or the University.

Announcements . . .

Institutes Seeking Applications For Child Mental Health Studies

The National Institute of Mental Health and the National Institute of Child Health and Human Development are seeking applications for studies on the epidemiology, etiology, treatment, and prevention of mental disorders in children and adults with mental retardation, including emotional and behavioral problems.

Areas of interest range from prevalence estimates of mental and emotional disturbance, to development and testing of early intervention programs to prevent emotional and behavioral problems in infants and young children with mental retardation.

Deadline is October 1. Public and private nonprofit organizations are eligible to apply.

FOR MORE INFORMATION, contact David Stoff, NIMH (diagnosis and detection), (301) 443-4625, fax: (301) 480-9719, e-mail: dstoff@nih.gov; Benedetto Vitiello, NIMH (treatment and prevention), (301) 443-4283, fax: (301) 443-4045, e-mail: bvitiell@nih.gov; Mary Lou Oster-Granite, NICHD, (301) 435-6866, fax: (301) 496-3791; or visit <http://grants.nih.gov/grants/guide/pa-files/PA-01-028.html>. ■

NSF Offers Grants For Studies Exploring How Children Learn

The National Science Foundation is accepting applications for studies to increase understanding of cognitive, linguistic, social, cultural, and biological processes related to how children and adolescents learn.

Areas of interest include connections between the cognitive, linguistic, social, emotional, and biological aspects of human learning; influences on children's learning; new methods, models, and theories for studying learning and development; the link between children's learning and relationships with peers, family interactions, and motivation; and the role of cultural influence and demographic characteristics.

The NSF awards about \$5 million in grants per year for these studies. U.S. colleges and universities, nonprofit organizations, for-profit organizations, and professional societies associated with education and research are eligible.

Deadlines are January 15 and July 15 of each year.

FOR MORE INFORMATION, contact Rodney Cocking, (703) 292-8732; e-mail: rcocking@nsf.gov; or visit www.nsf.gov/pubs/2001/nsf0146.htm. ■

Developments

University of Pittsburgh
Office of Child Development
University Center for Social and Urban Research
121 University Place, Second Floor
Pittsburgh, PA 15260

Nonprofit Org. U.S. POSTAGE PAID Pittsburgh, PA Permit No. 511
--

<p>Help us keep our mailing list current. Please cut out this label portion of the newsletter and mail to the above address with any corrections. Thanks!</p>



Interdisciplinary education and research
University-community service demonstrations
Program evaluation and policy studies
Dissemination

Visit us on the World Wide Web at www.pitt.edu/~ocdweb/