

R E P O R T R E S U M E S

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AC 001 195

HOME MANAGEMENT AIDES, A HOME SKILLS TEACHING SERVICE FOR LOW INCOME MOTHERS.

BY- MURTON, BONNIE J. AND OTHERS

HENNEPIN COUNTY COMMUNITY HEALTH AND WELFARE COUNCIL

PUB DATE FEB 66

EDRS PRICE MF-\$0.50 HC-\$2.52 63P.

DESCRIPTORS- *HOMEMAKING SKILLS, *WELFARE RECIPIENTS, *ADULT EDUCATION PROGRAMS, *ECONOMICALLY DISADVANTAGED, INSERVICE EDUCATION, HOME MANAGEMENT, INDIGENOUS PERSONNEL, CLIENT CASEWORKERS, FAMILY LIFE, LOW INCOME GROUPS, SEWING INSTRUCTION, FATHERLESS FAMILY, PROGRAM EVALUATION, STATISTICAL DATA, PERSONNEL SELECTION, COMMUNITY INVOLVEMENT, BUDGETING, TRAINING TECHNIQUES, PROGRAM DESCRIPTIONS, URBAN AREAS, INDIVIDUAL INSTRUCTION, MINNEAPOLIS,

ABOUT 25 PERCENT OF ALL AID FOR DEPENDENT CHILDREN CASES IN THE CITY OF MINNEAPOLIS WERE IN TWO YOUTH DEVELOPMENT PROJECT TARGET AREAS WHERE MOTHERS OFTEN LACKED HOME MANAGEMENT SKILLS NECESSARY TO REAR THEIR CHILDREN. AS ONE OF SEVERAL DEMONSTRATION PROGRAMS TO PREVENT AND ALLEVIATE PROBLEMS OF DELINQUENCY, IN 1964 FOUR HOME MANAGEMENT AIDES (HMA) WERE HIRED BY THE HENNEPIN COUNTY WELFARE DEPARTMENT TO PROVIDE PRACTICAL ASSISTANCE TO MOTHERS IN THE AREAS OF SHOPPING, HOME MAINTENANCE, BUDGETING, CHILD CARE, CLOTHING SELECTION AND MAINTENANCE, FOOD AND NUTRITION, AND FINDING ADEQUATE HOUSING. IN THE FIRST YEAR 309 CASES WERE REFERRED TO HMA BY THE WELFARE CASEWORKERS. THE AIDE'S WORK WITH THE MOTHERS ON AN INDIVIDUAL BASIS IN THEIR HOMES WAS LATER AUGMENTED BY ONCE-A-WEEK CLASSES IN SEWING AND HOME MANAGEMENT. RESPONSE TO THE PROGRAM WAS SO FAVORABLE THAT THE WELFARE DEPARTMENT DOUBLED THE NUMBER OF AIDES AND WAS CONSIDERING FURTHER EXPANSION. (ADMINISTRATIVE DETAILS OF STAFF SELECTION AND TRAINING, BUDGET, OPERATING STATISTICS, COMMUNITY INVOLVEMENT, EVALUATION METHODS, PUBLIC WELFARE MANUAL, AND COURSE OUTLINE ARE GIVEN.) (COMMUNITY HEALTH AND WELFARE COUNCIL, 404 SOUTH 8TH ST., MINNEAPOLIS, MINNESOTA) (AJ)

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FEBRUARY 1966

A YOUTH DEVELOPMENT PROJECT EVALUATION REPORT

Community HEALTH AND WELFARE *Council*

404 SOUTH EIGHTH STREET MINNEAPOLIS, MINNESOTA

57-6001195

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This report was published by the Youth Development Project of the Community Health and Welfare Council of Hennepin County, Inc. (Minneapolis, Minn.). Although the Youth Development Demonstration Project officially ended on December 31, 1965, sufficient funds remained from the grant, made by the Office of Juvenile Delinquency and Youth Development, Welfare Administration, U. S. Department of Health, Education, and Welfare, to allow the preparation of a series of evaluation reports on the various programs of the Youth Development Project. Most of the staff members listed above are now working for the Council in its role as the Community Action Agency in the war against poverty in Hennepin County. The Research Unit staff will join the rest of the staff in May, 1966.

HOME MANAGEMENT AIDES

A Home Skills Teaching Service for Low Income Mothers

**A Youth Development Demonstration Project
Sponsored and Operated by
the Hennepin County Welfare Department**

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**Minneapolis, Minnesota
February 1966**

SUMMARY

PROBLEM:

Approximately 25% of all AFDC cases in the City of Minneapolis were concentrated in the two Youth Development Project (YDP) Target Areas. These areas contained only 7½% of the city's population.

Many AFDC mothers have a difficult time in rearing children under the limited income of public assistance. In addition to economic difficulties, the moral support of a husband and father is missing. Some of these mothers lack the home management skills needed to provide a wholesome, healthy home for their children. Under such conditions, children are often not equipped to benefit from the educational and vocational opportunities available to them in the community. Lacking such benefits, they may turn to delinquency and crime.

PROGRAM:

Funds for this demonstration program were provided by the Hennepin County Welfare Department which in turn received some of the funds through the Bureau of Family Services of the Welfare Administration of the Department of Health, Education and Welfare.

In November 1964, four Home Management Aides were hired by the Hennepin County Welfare Department. One of these Aides served as supervisor. Their job was to provide teaching services to AFDC mothers on an individual basis in the clients' homes. Assistance of a very practical nature was given on the topics of shopping, home maintenance, budgeting, child care, clothing selection and maintenance, food and nutrition, and finding adequate housing. This program was in sharp contrast to the traditional concept of "homemaker." The Home Management Aide did not serve as a substitute mother for those families where the mother was physically incapacitated or absent for some other reason. Her primary function was teaching. She did not undertake the temporary operation

of the household, except in those cases where she did so in order to demonstrate proper techniques. Clients were also given information about and encouraged to make use of the appropriate community facilities.

Stimulated by requests from the clients, the Home Management Aides organized sewing classes in two settlement houses, one in each Target Area. These classes began in the spring of 1965 at Edward F. Waite Neighborhood House and at Wells Memorial, Inc. Classes met once a week for two-hour sessions with class members entering or leaving at any time they wished. Nursery facilities were provided. One hundred and thirty-five women participated in these classes during 1965.

The AFDC mothers have been very active in operating their own classes. One group of women set up its own class. It is currently running under their supervision. One AFDC mother, a former modeling school instructor, is giving charm classes to the women. She receives no pay for her services.

A report from one of the Home Management Aides shows how she spent her time during the first year on the program. Twenty percent of her time was spent in office work. This included filling out evaluation and termination reports, keeping daily records of visits with clients, making appointments by telephone, and having conferences with the client's caseworker and with her own supervisor. Twelve percent of her time was spent traveling with the client on shopping tours, seeking better housing, visiting community resources and the like. An additional 8% of her time was spent in transportation. Only 5% of her time was spent in the classes or introducing the clients to the class. Fifty-five percent of her time was spent in the field with a client, primarily in the home. Overall, four-fifths of the Home Management Aides' time was spent with the client or traveling to the client's home. One-fifth of her time was spent in office work related to the client's needs.

AFDC clients in need of the Home Management Aides' service were referred to the HMA by the client's Welfare Department caseworker. This has been very definitely one program which has reached those persons needing assistance most

badly. The average income of the recipients was approximately \$2,500 per year. Family sizes were larger than average. Response to the program has been so overwhelmingly favorable that the Welfare Department has doubled the Home Management Aide service, is currently considering the upgrading of the salary structure for the Aides, and there is some possibility that further expansion of this unit will be made. In spite of the increase in staff size, demands for this service have outstripped present staff capabilities.

ACKNOWLEDGMENTS

There are far more people and organizations who helped implement this program than we can possibly acknowledge. Some of them have been noted throughout the report.

We would be remiss, however, if we did not specifically acknowledge the helpful criticism of three people who reviewed the drafts of this report and submitted their evaluation of the effectiveness of the Home Management Aide Program. They are Harold Mikwold, Social Welfare Supervisor I, James Bjornson, Social Welfare Supervisor II, and Mrs. Devena Hayes, Casework Supervisor, all of the Hennepin County Welfare Department.

Vernon Bloom, Community Services Coordinator of the Youth Development Project, was also most helpful in making suggestions for improving the report.

GLOSSARY

These terms are unofficial descriptions of the titles used throughout this report. The purpose is to describe the functions of these various persons and agencies. The definitions do not necessarily agree with the official titles used by the Welfare Department or the County Merit System or other administrative units.

Hennepin County Welfare Department (HCWD) - The public social welfare agency for Hennepin County, Minnesota with a staff of 600 and an annual budget of 49 million dollars; the Department administers to a population of 923,000. Currently, the caseload includes approximately 20,000 persons on AFDC, 7,000 receiving Old Age Assistance, and 5,000 receiving other types of categorical aid in addition to those receiving Child Welfare and Mental Health Service.

Youth Development Project (YDP) - A planning and demonstration project for delinquency prevention. Beginning in June 1962 with a two-year planning grant of \$149,845 from the Office of Juvenile Delinquency and Youth Development, Welfare Administration, U.S. Department of Health, Education and Welfare, the YDP, a branch of The Community Health and Welfare Council of Hennepin County (Minneapolis, Minnesota), planned a broad gauged approach to delinquency prevention through a series of educational, employment and welfare programs for two small demonstration, or Target, areas of Minneapolis. A limited one-year demonstration was carried out with funds provided by the Office of Juvenile Delinquency (\$250,000) and by local sources (\$200,000) before the project was absorbed by the war on poverty. The demonstration phase of the YDP ended on December 31, 1965.

Target Areas (YDP Target Areas) - Two geographic areas, just north and just south of the center of Minneapolis, containing approximately 38,000 people. Selected as demonstration areas for the YDP demonstration because of high rates of crime, delinquency, dependency, poverty and other social problems.

Home Management Aide (HMA) - A Welfare Department employee who instructs families in their homes in homemaking skills and home management. She works closely with the caseworkers in establishing plans to help the families. She also conducts classes in homemaking skills and participates in staffings with professional personnel. The major focus of the Home Management Aide job is on instruction and on the total treatment of the family.

Caseworker - A Welfare Department employee having a college degree and (frequently) trained in social work. Under immediate supervision, the Caseworker works within well defined agency policies to help clients with personal and family problems through the programs of the agency.

Housekeeper - A day laborer hired by householders to perform household maintenance duties when the mother is incapacitated. The Welfare Department acts as a reference source for the Housekeepers and provides funds to selected welfare clients in order to pay the Housekeeper.

Homemaker - A Welfare Department employee who instructs families in their homes in household skills and management; she performs household duties necessary to carry out the foregoing functions and carries on duties in families in which the mothers are absent or unable to perform these functions. The major focus of the Homemaker job is on home maintenance.

About this Report -

This report is divided into two major sections. Part A is designed for those readers who wish to get a general idea of what the program was all about. It tells what the program attempted to do and how well it succeeded. It also gives recommendations for future programming. We have tried to avoid details, particularly those of a technical nature. The language is also non-technical.

Part B describes the detailed administrative and technical aspects of the program. It will be most interesting to those persons who enjoy reading statistical, evaluative material or who wish to start a similar program. In one sense, it is an "operator's manual." Some of the language is technical.

* * * * *

Because this report is aimed at two audiences, some repetition is unavoidable. For example, evaluation results are summarized in Part A. The gruesome details are given in Part B. Both sections describe the results, although the language and the amount of detail varies.

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ATTACHMENTS

PART A

HOME MANAGEMENT AIDES

A Home Skills Teaching Service for Low Income Mothers

BACKGROUND:

The Youth Development Project was established in 1962 as a planning project of the Community Health and Welfare Council of Hennepin County, Inc. It was financed by federal funds received from the Office of Juvenile Delinquency and Youth Development, Welfare Administration, U.S. Department of Health, Education, and Welfare, and by local sources. After two years of planning the Youth Development Project (YDP) proposed the Home Management Aide Program as one of several "demonstration programs" aimed at the control and alleviation of juvenile delinquency. The major focus of the YDP was on preventive aspects of delinquency.

On August 1, 1964, the Office of Juvenile Delinquency approved a one-year demonstration for the YDP. The programs in this demonstration, including the Home Management Aide (HMA) Program, were carried out through existing community agencies with the YDP providing planning, consultation, coordination, and evaluation services. The Home Management Aide demonstration program was financed and carried out by the Hennepin County Welfare Department (HCWD).

I. THE PROBLEM: What conditions led to a need for this program?

Approximately one out of four of all AFDC (Aid to Families with Dependent Children) cases in the City of Minneapolis were concentrated in two Target Areas.* The Target Areas were located just north and south of the city center. One-third of all families on public relief lived there. One out

* Unfamiliar terms are defined in the Glossary. See page vii.

of four families had an annual income of \$3,000 or less. Unemployment and school dropout rates were approximately twice the city average. These families were becoming less a part of the mainstream of community life because of economic limitations and because they were identified as a minority. To break the cycle of generation-to-generation dependency and to help alleviate problems of a high rate of delinquency, maximum coordinated services had to be made available to these families.

Specifically, many youngsters living in the Target Areas were frequently late or absent from school due to the mother's inability to cope with the problems of getting them out of bed, making breakfast and lunch, getting them properly clothed and so on. Because of this, these youngsters tended to fall behind in their schoolwork, develop unhealthy attitudes toward school and to start looking for more rewarding activities. At times, this search led to delinquency. It was felt that by improving the home managing efficiency of the mother, the drift away from school and to delinquency could be halted.

II. THE PURPOSE: What did this program attempt to do?

As part of a comprehensive program aimed at alleviation and prevention of problems related to delinquency, the YDP proposed the addition of four Home Management Aides to the AFDC Unit of the HCWD. These Aides were to work in the Target Areas, exclusively. Many problems were present in a number of AFDC families due to inadequate home management skills. The primary purpose of the HMA Program was to provide assistance to mothers in these families. While it was recognized that most AFDC parents managed to provide for their children, in spite of marginal or inadequate incomes and other deprivations, it was felt that many could profit from instruction in housekeeping, budgeting and child care skills. Many AFDC mothers came from deprived environments themselves and had not learned these skills at home or at school. Other resources in the community for teaching these skills were unavailable or insufficient in size to meet the need.

III. THE PROGRAM: How was this program carried out?

In September 1964, a supervisor in the AFDC Division was assigned full-time responsibilities to represent the HCWD in a consultative capacity to the YDP. This person had had prior experience as a caseworker in the AFDC Guardianship and Protective Services Unit of the agency and was acquainted with the problems facing the disadvantaged. Among the responsibilities he assumed with the YDP were the organization of the HMA Unit, provision of in-service training, and consultation to the HMA staff.

The HCWD agreed to establish the HMA Program as part of the agency's cooperation with the objectives of the YDP. Four Home Management Aides, one of whom was designated as unit supervisor, were hired and assigned to the AFDC Division with initial responsibility to serve clients residing within the boundaries of the Target Areas.

In April 1965, two more Home Management Aides were hired and the two homemakers who had been working for the agency prior to the implementation of the HMA Program were incorporated in the unit. From this date the unit extended service to the Child Service Division of HCWD. There no longer was a stipulation that the client reside in the Target Areas to be eligible for the HMA Service; AFDC clients from all of Hennepin County were henceforth referred.

Content of the Program

The HMA Program provided a teaching service to AFDC families on an individual basis in their own homes. This service was in contrast to the traditional concept of the "homemaker" whose primary function was to carry out the role of mother in situations where the mother was physically or mentally incapacitated or absent for some other reason.* The HMA taught the client basic home management skills, including budgeting and the principles of child care. The HMA did not remain with the family all day nor did she undertake the operation of a household. When she encountered interpersonal or emotional problems

* The Homemaker Service of the HCWD is expected to continue in operation as a part of the Public Assistance Division.

within the family unit, she informed the caseworker who followed up on the referral.

At the request of the caseworker, a HMA also would undertake to meet a special problem delegated to her by the agency's administrative staff. For example, evaluating the material needs for providing adequate home care for a child with allergies.

The primary reasons for referral for HMA services were to upgrade housekeeping skills, help in money management, assist in purchasing furniture, appliances and clothing, give instruction in clothing construction and repair, and provide education in child care methods.

Approximately half of all the referrals for HMA service were because of the client's poor housekeeping. The HMA usually found multiple problems contributing to the condition. One of the main contributing factors was inadequate housing. If the house were repairable, the HMA acquainted the client with her rights as well as her responsibilities as a tenant and encouraged her to contact the landlord to facilitate the necessary repairs. In cases where the house was beyond repair, or the landlord refused to make necessary improvements, the HMA assisted the client in finding better housing. When this occurred the HMA supervisor reported the condition of the property to the building inspection department and in four cases the houses were condemned until necessary repairs were made. In one case a family of ten was living in four rooms because the father could not find a larger place at a rental price within his budget. Although the family was not receiving public assistance, their income was inadequate for providing better living quarters. It was felt that the children would have to be placed in foster homes. The caseworker and the HMA worked out a plan. The caseworker contacted public housing and made arrangements for the family to move into a home with five bedrooms. Rental was within the family's budgeting limitations. The HMA helped the mother prepare for moving and worked out a schedule to help her accomplish the tasks necessary for keeping the household running smoothly. A budget was set up and the HMA

helped the mother shop for groceries in order to teach her how to provide nutritious meals for her family and how to spend her money effectively. At the present time the living conditions are improved to the extent that the caseworker feels the children will be able to remain in the home.

The HMA worked closely with the caseworker and the public health nurse to assist families in improving the health of their children. In one case where the children were in the hospital suffering from malnutrition, the HMA suggested menus and taught the mother how to prepare some of the foods. It was found helpful to have the mother write out menus and have the HMA evaluate these menus. The mothers' menus were more likely to include the foods the family liked and that the mother knew how to prepare, but they were nutritionally inadequate. The HMA suggested variations of the menus that would meet good nutrition standards. One mother served tortillas for breakfast every morning. The HMA encouraged her to, at least, supplement these with milk and fruit juice.

At times, school officials complained to the HCWD that children were coming to school dirty and without breakfast. A survey of one Target elementary school indicated that two of every five children had come to school without breakfast or with poor breakfasts such as milk and cookies.¹ Children of this type were given attention immediately upon referral from the caseworker. The HMA discussed the problem with the mother and instructed her on the importance of good nutrition and then helped her plan to provide adequate meals. In many cases the children's poor appearance resulted from inadequate laundry facilities or from their lack of clothing. The HMA evaluated these situations and with the caseworkers decided how the situations could be improved. The clients were encouraged to have more contact with the teachers. Several of the mothers now participate in conferences with the teachers and attend PTA meetings regularly.

In referrals where there was a definite problem in money management the HMA

¹ Newlund, Sam. "Poor Youngsters Tend Toward Slight Malnutrition, Study Says," Minneapolis Tribune, page 20B, January 16, 1966.

discussed the budget with the client and often discovered what was causing the difficulty. In one case, the client's allowance for heating the home was too low and the client was using grocery money to pay the gas bill. Subsequently, the caseworker issued a supplemental grant to make up for this deficit. Clients often asked the HMA to give assistance in money management until they learned how to handle their funds. Some clients were inexperienced in judging values of appliances and furniture. In these instances a HMA accompanied the client when shopping and taught her how to recognize good values. Some women, who because of lack of transportation or babysitters were unable to go to the stores to shop, were good customers of door-to-door salesmen, especially those who offered premiums. The HMA encouraged these clients to compare the prices of the proffered goods to prices listed in catalogues or prices of merchandise advertised in the newspaper. Frequently this simple advice led to substantial savings for the family.

Services given by the HMA to single problem cases were equal in importance to the work they did with multiple problem families. In one home the HMA made an evaluation of a housekeeper's effectiveness. The HMA discovered that the housekeeper was having the mentally retarded client do all the work while the housekeeper collected full time salary. This housekeeper was replaced by one who gave better service to the client.

The HMA's were a part of the team that attended staffings which evaluated the family's problems and made plans to help them. These staffings usually included supervisory personnel, the caseworker, the HMA, the agency psychiatrist, and representatives from any agency working with the family. Additional conferences were held with the caseworker, the caseworker supervisor, the HMA and the HMA supervisor to evaluate the effectiveness of the services and the progress of the client.

The HMA supervisor assisted in surveys of clothing, furniture, and appliance costs to establish buying guides for caseworkers. She also sought out resources that would be helpful to the clients, e.g., health clinics, informative

literature. At present, she is working with the University of Minnesota Institute of Agriculture evaluating simplified educational pamphlets prior to their final publication.

Group Instruction

There were numerous requests from AFDC clients for help in homemaking skills. The HMA staff was not large enough to give all these people individual training in their homes, nor were there free classes where clients could learn homemaking skills. Even if they could have afforded the tuition, many of the women, "housebound" for a long time, felt too threatened to take part in formal group situations. In February 1965, the HMA's, in cooperation with two settlement house directors, set up a class in each of the Target Areas.¹ The settlement houses provided the space and the HMA's, with the help of two volunteer groups, provided the staff.² The program was flexible. In addition to sewing, there were lessons on upholstering, knitting, grooming, crafts, use of surplus commodities, and home nursing. These lessons resulted from the clients' requests. A style show, where each woman modeled the clothes she made, was the highlight of the program. Not all the women attending the classes were recipients of public assistance, but all were from low income families. It is estimated that the average annual income was \$2,500 per family.

New members enrolled as they became interested in the classes. It was important to have the HMA introduce the new member to the group and give her moral support until she gained self-confidence. Typically, women were afraid to enroll until the HMA had worked with them on an individual basis in their homes. In one case, it was necessary to help the client get a dress and a pair of shoes to wear before she could attend class. One mother was so afraid of crowds that she sat alone in the corner during the first session. After a year's attendance, she became a hostess of the group and took full responsibility for welcoming new members! The mothers' newly acquired acquaintance with community resources for their children was an important result of this program.

¹ Edward F. Waite Neighborhood House and Wells Memorial, Inc.

² Minneapolis Mrs. Jaycees and Christ Presbyterian Church of Edina.

After the first year it was found that the women were ready to take part in other community groups. They were no longer fearful and their appearance had improved along with their self-confidence. One class organized a program of its own and is now under the direction of a settlement house worker. One settlement house director is considering hiring an additional group social worker to meet the demand for more classes.

The HMA's plan to continue open-end classes in each Target Area to provide a resource for clients who need and want further help after the HMA has worked with her on an individual basis. The sewing class will give assistance to beginners as well as advanced sewers. The more capable members will be recruited to assist other women in the class. A home economist group has volunteered to provide a series of three lessons on food buying and preparation and one on self improvement. An AFDC mother who had been a teacher in a modeling school is giving a series of twelve lessons on self improvement.

The summer program will include group instruction for girls from 11 to 16 years of age. Lessons on simple homemaking skills and self improvement will be provided. This program is being set up in response to requests from clients, the girls themselves, caseworkers, and community representatives.

IV. RESULTS: What was demonstrated by this program?

Kinds of Problems Handled and their Outcome

By December 31, 1965, approximately one year after the start of the program, over 300 cases had been referred for HMA service. The table on the next page shows the status of these cases, why they were referred, and why services to some cases were terminated.

	<u>No.</u>	<u>Percent</u>
<u>Total Cases Referred</u>	309	100%
Cases currently active	116	37
Cases terminated	166	54
Cases waiting for service	27	9
 <u>Clients Who Participated in Group</u>		
<u>Instruction</u>	135	44
 <u>Reasons for Referral</u>		
Housekeeping	135	44
Money management	50	16
Assistance in shopping	31	10
Child care methods	28	9
Assistance in finding housing	24	8
Evaluation of clothing or furniture needs	15	5
Group activities	15	5
Food preparation	5	2
Nutrition	3	1
Supervision of housekeeper	3	1
	<u>309</u>	<u>101%</u>
 <u>Reasons for Terminations</u>		
Goal accomplished	96	58
Clients not benefiting from service	20	12
Clients rejected services	15	9
Families moved from county	12	7
Clients referred who did not need help	10	6
Clients removed from ADC roles	8	5
Children removed from home	5	3
	<u>166</u>	<u>100%</u>

Behind these bare statistics lie the very human stories of over one thousand women and children with problems. Some cryptic notes jotted down on HMA reports give us a little better picture of why these clients were referred for service.

- . Assist in shopping. Mother lacked self-confidence--was afraid to go by herself.
- . Clothing need. She had most of their clothing stolen--family desperately in need.
- . Condemned house--it has sewer rats--moved client.
- . Child care--extremely filthy.
- . Housekeeping, place messy, but not filthy.

Home Management Aides also commented on the reasons for termination. In the majority of cases (58%) the HMA felt that the goal had been accomplished.

- . Goal accomplished. Client managing well.
- . Introduced client to community resources.
- . Clothing purchases made. I assisted in the purchase of a sewing machine. Client joined Northside sewing class. No further need.
- . Client could not benefit from service.
- . I felt unsafe alone with her as she also had a butcher knife in hand when talking to me.

The Welfare Department caseworkers, the people making the referrals for HMA service, also seemed to feel that the goals were being reached. HMA services were rated as "effective" or "very effective" for almost 80% of the terminated cases. (This observation is, however, based on a limited sample of early terminations which probably include the "easier" problem cases. See Section XI - Evaluation Methods.)

- . The landlord stated that he would rent to any client that has a teaching homemaker service. He thought that they helped the client very much.
 - . This service was most beneficial to the client. She is now able to prepare more of a variety of foods on her limited budget.
 - . Many of the problems previously noted in this case by the caseworker were removed through these services.
 - . Although the services of the homemaker (HMA) must be rated ineffective, it is not due to homemaker's inadequacy or lack of effort, but rather client was not at all receptive and could not be motivated.
- (additional comments are reported in Section XI - Evaluation Methods.)

Program Impact on Clients

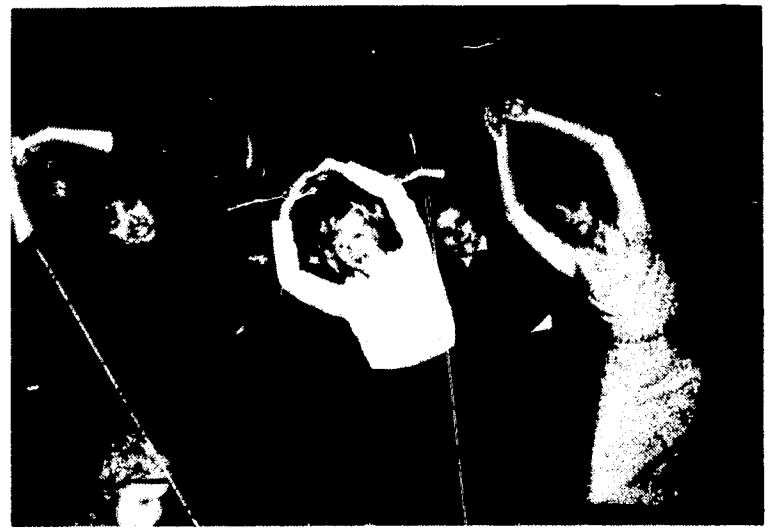
The ultimate value of this program lies in the impact it has on the clients. Supervisors and caseworkers of HCWD are of the opinion that the majority of mothers who accepted help from the HMA's have eliminated many of the stresses contributing to their problems. Beginning with solving their initial problem they went on to improve in other areas. In many cases moving to better housing and buying the furniture or appliances necessary to operate a household motivated clients to follow a schedule enabling them to maintain a higher standard of living.



HOME MANAGEMENT AIDE SEWING CLASSES



STUDENTS EXHIBIT THEIR OWN CREATIONS



SELF IMPROVEMENT CLASSES IN ACTION

The children benefited most from improved home conditions and help given directly to them in grooming. One eleven-year-old girl was the only girl in a parochial school with a uniform different from the other girls. She thought it was necessary to wash her face only once a week, had never brushed her teeth, and saw no need to comb her hair. She now has a new uniform, is interested in her appearance, and is accepted by her classmates.

The clients seem to feel more secure now since they know where to turn for help in homemaking problems. The HMA spends a considerable amount of time working with the client, whereas caseworkers may be able to visit a home only three or four times a year. Because of this, the client may mention problems and needs contributing to her stress, to the HMA, that she would have been reluctant to mention to the caseworkers.

Some of the comments made to the HMA's by clients were:

- . I didn't know where to turn before you helped me.
- . I was afraid to ask to have my washing machine repaired.
- . I didn't know how to put a new zipper in my son's slacks so I threw them away.
- . Because you're a mother I know you really understand my problems.
- . I never used dried milk until you brought me the recipes and showed me how to use it.
- . I was afraid of crowds until you took me to class. I've found some nice friends there.
- . I look forward to Mondays because that is the day you help me.
- . I know the Welfare Department in this county cares about me because they are showing such interest.
- . You are the only contact I have with a world where people understand the problem facing me.

Perhaps the best indication of the impact this program has had on the clients is their enthusiastic participation in the classes. They are not only students, but also teachers. One group is almost completely "self taught" at the present time.

At a recent sewing class, thirty-five women showed up to fill twenty-five

vacancies. Requests for teaching services have outstripped the capabilities of the HMA Unit for providing such services in spite of the fact that this unit has doubled its original staff complement.

Program Impact on the Sponsoring Organization

The increased staff size, and an upgrading (pending) of the HMA salary structure is sufficient indication of the value placed on this program by Hennepin County Welfare Department officials. The HMA Unit itself represents a new service of the Welfare Department and there is every indication that it will continue to be an integral part of the organization.

Program Impact on Related Organizations

The Hennepin County Welfare Department feels that the agency is providing a service to the clients that could not be given without the teamwork of caseworkers and the HMA's. Social workers are well prepared in arts of motivating people to learn, but are usually not as well versed as the teaching homemaker in the subject matter which is vitally important to people with low incomes; namely, how to buy economically, plan efficiently, and keep a home running smoothly and wholesomely on a minimum budget. Those caseworkers who do have such skills do not have the time to impart them to others--in view of their heavy caseloads. In addition to its usual service, the HMA Unit is providing service to approximately 20% of the total caseload of the Special Services Unit of the Welfare Department. In these cases, the problems are so critical that the breakup of the family is imminent. The caseworkers are unanimous in their opinion that these services have led to an improvement of home conditions. These services have lead to positive changes in attitude and to better homes for the children.

Program Impact on the Community

Extensive volunteer services provided to the HMA Program give strong evidence of widespread community support. No evidence of opposition to the program has been noted. A few comments on community impact are noted below. Many more could be offered.

- Housing Project social workers, Public Health nurses and visiting teachers from the schools, have requested the services of HMA's for

families who are not clients of the Welfare Department. They have worked as a team with the HMA's in servicing clients. Several churches who have volunteered to help with the program are now becoming interested in helping needy families other than those with whom the HMA's are working.

- . The civic and professional groups who were enlisted by the HMA's to volunteer services are now extending their help to other families in the low income groups.
- . The Minneapolis Health Department, in setting up its program for Home Health Aides, has consulted with the HMA supervisor in order to incorporate the experience of the HMA Program into its plans.
- . Through HMA classes the Red Cross has been able to give training in first aid and home nursing to women who would never enroll in a regular class.
- . Inquiries have come from the Division of Child Psychiatry, University of Minnesota, and students in social work as well as the new program in family relations at the University of Minnesota.

Program Impact on Other Communities

In spite of its newness, news of this program appears to have traveled quickly. Information on the program has not been published previously, but inquiries about the HMA Program have already been received by the Department of Public Welfare Homemaker Consultant and by the Family and Children's Service. Through these two offices, inquiries have come from British Honduras, Oregon Department of Public Welfare, CORE, the Public Welfare Department of Chicago, and other counties in Minnesota planning to establish similar programs.

What has been Demonstrated?

In brief, this program appears to have demonstrated the following:

- . A great need on the part of many AFDC mothers for education in basic home management skills.
- . The willingness and the capability, on the part of these mothers, to accept this kind of education when it is offered on an individual basis in the home. This individual approach frequently leads to acceptance of group instruction.
- . The practicality of offering this kind of education through visiting homemaking teachers who are assigned to a welfare agency and who work in cooperation with the caseworkers of that agency.

Low income families can be reached if the service offered is one they want and if the service is offered in their homes--at least initially.

V. RECOMMENDATIONS:

1. This program operated as a service of the HCWD, primarily for the AFDC family. Programs of this type could be useful to many other low-income families where the mother has limited homemaking skills. Families receiving other types of Public Assistance (e.g. Aid to the Blind, Aid to the Disabled, Relief, etc.) as well as those not receiving help through any welfare program might be served. Agencies other than the Public Welfare Department could sponsor similar programs in the community.

2. Serious consideration should be given to establishing HMA positions which will provide employment opportunities for women who themselves have limited income and who may be former or present Public Assistance recipients. No conscious attempt was made to do this in this program. This would be possible under the following provisions:

- a. the salary scale is high enough to attract and hold staff personnel (in this program, under the County Merit System, the HMA's were paid starting salaries of \$288 per month. This amount is clearly inadequate, particularly for women who are heads of households).
- b. the formal educational requirements for the position are flexible enough to allow employment of women who may not have a high school diploma. The women employed from the low-income family can, in fact, bring to the program the unique contribution of knowing first hand what it means to struggle with the problems of home management on a limited budget. This may be as important as, or more important than, a high school, or even college diploma. The key factors for the HMA are home management skills and the ability to communicate these skills to others. Neither of these factors has any necessary relationship to a formal education. Experience in this program has shown that there are a number of women in the community who have all the necessary qualifications, even though they lack high school diplomas.
- c. appropriate training (pre and in-service) is incorporated into the program.

3. Arrangements should be made, before implementation of the program, to provide for educational material and teaching supplies.

4. Aides were assigned to some families where the mother had already developed

some home management skills and where there was a need for only minimal instruction. Aides were also assigned to families who had a history of chronic dysfunction, home management problems being only part of the picture. Experience with this program indicates that the HMA is able to work effectively with a wide range of family types--from those who function just below adequate home living standards to those in need of intensive help. In the latter case, the Aide becomes part of a total treatment plan.

5. The use of "classes" or group instruction in home management skills worked out well in this program as an adjunct to individual teaching in the home. In this community, settlement house experience has indicated that the group instruction approach, when offered independently of any individual attention, has not worked well. Attendance at such meetings was usually sporadic. However, coupled with individual instruction in the home, the group approach has worked well in this program and serious consideration should be given to incorporating it into any similar effort. The group instruction also offers, if operated properly, an opportunity for the clients to learn from each other, to act as assistants to the Aides, and to experience a sense of contributing through being both "student" and "teacher."

PART B

VI. ADMINISTRATION:

The formal structure of the HCWD is presented in Attachment A. The HMA's were supervised by the Unit Supervisor who was in turn supervised by a Casework Supervisor. The Unit is under the Director of the Public Assistance Division.

VII. STAFF:

On November 16, 1964, four persons were hired, three as HMA's and one as Unit Supervisor; these were full time positions. In April 1965, two more HMA's were hired and two women who had been homemakers with HCWD prior to November 1964 were incorporated into the HMA Unit. The total Unit consisted of seven HMA's and the Unit Supervisor.

Consultative services were provided to the program by a Welfare Department employee who was acting as a liaison to the YDP. In addition, research consultation was provided by the YDP. Research services, unlike services provided by the liaison consultant, focused exclusively on the demonstration aspects of the program. It is unlikely that a continuance of such research staff would be necessary.

The HMA's ranged in age from 34 to 53. Only one lived in a YDP Target Area at the time she was hired. All of the women had completed high school; three had attended college or business school; and two had college degrees. All but one, a widow, were married. Three have left the unit and have been replaced: one resigned because she didn't like the work; one was promoted to caseworker; and one took an extended sick leave and then resigned.

At the time of the hiring, none of the employees was receiving Public Assistance funds. Previously, however, one had received payments from AFDC.

Selection of Staff

The selection process leading to the employment of the HMA personnel consisted

of the following:

1. Helped wanted advertisement was placed in the Minneapolis newspapers; or applicants were referred by employees of the agency;
2. Applicants were interviewed by the agency personnel director and the Public Assistance Division Director;
3. Applicants took written and oral qualifying examinations administered by State of Minnesota Merit System.

Aides were all chosen in the same manner. The minimum qualifications for the HMA's were in accordance with the standards set by the State of Minnesota Department of Public Welfare Merit System. (See Attachments B and C) The job description (shown in Attachment C) was for the position of homemaker, a somewhat different position than the newly created HMA position. Also sought were personal qualities of: sincere interest in giving service to people, respect for the dignity and worth of individuals, experience in public relations, warmth, understanding, maturity, imagination, ingenuity, willingness to use proven techniques, and to experiment with new approaches.

Staff Training

The four HMA's hired at the beginning of the program were given training sessions by:

1. Director of HCWD Personnel
 - . office policy and procedure
2. HCWD Casework Supervisor
 - . philosophy of social work
 - . organizational structure of HCWD
 - . philosophy of HCWD
 - . responsibility of HCWD in area of Public Welfare
 - . Social Security Act with emphasis on the categorical aid program
 - . eligibility requirements and service responsibility of the AFDC program
 - . standards and methods used to determine the client's needs and to calculate the budget
 - . explanation of the HMA role in the agency service plan
3. HCWD and YDP Consultant
 - . described the YDP and explained how the HMA's fit into the plan
 - . defined the functions of the HMA's
 - . provided consultation and instruction during the first year of the program

4. Director of the YDP and Consultant
 - . took the HMA's on a tour of the Target Areas
5. HCWD Resource Supervisor
 - . discussion on how to purchase appliances and furniture; explained the services of the Resource Unit

The entire HMA staff attended the following in-service training sessions:

Career Clinic Class - eight lessons on professional homemaking plus one on specific problem cases (see Attachment H).

Red Cross Classes - four lessons on home nursing were provided by Red Cross through the Career Clinic.

Director of Child Psychiatry at General Hospital - discussed the importance of homemakers assisting in homes where assistance would help provide better homes for the children.

Minneapolis Health Department - instruction on sanitation and pest control; provided literature on health problems.

Minnesota Department of Public Welfare - work shop in group methods.

Conference with Minnesota Department of Public Welfare Homemaker Consultant - clarified the HMA role and answered questions regarding specific problems.

State Homemaker Conference - panel on the Homemakers as part of a team.

Conference with Homemaker Specialist

Conference with Children's Bureau, Department of HEW.

Unit Meetings - provided clarification of questions and allow time to discuss problems; provided current information of changes in policies and procedures.

Conference with Supervisor - evaluated HMA's effectiveness on cases.

Conference with Caseworkers and Supervisors - provided direction and evaluation of HMA Service.

Research - homemakers shopped at grocery, furniture and appliance stores and made a survey of costs and available merchandise in the Target Area stores.

Whenever new HMA's were hired, the casework supervisor in charge of the HMA Unit briefed them on agency policy and the unit supervisor provided the orientation program for them.

VIII. BUDGET:

The HMA salaries were determined by the Minnesota Merit System schedule for Homemakers. They ranged from \$288 per month to \$360 per month. These salaries are currently being revised upwards. Salaries totaling \$26,000 were paid by HCWD. The Welfare Department received some funds from the Bureau of Family Services of the Social Security Administration of the Office of HEW. Office space and supplies were provided by the Welfare Department.

Salary of the consultant to the YDP from the Welfare Department was contributed by HCWD. It is estimated that approximately one-half of his time was devoted to this program.

Research consultation was also provided by the YDP. However, research services, unlike the services provided by the consultant to the YDP from HCWD, were more pertinent to the demonstration aspects of the program. It is probable that such research services will become unnecessary as the program moves out of the demonstration stage.

Two questions have been raised about the adequacy of the budget for this program. First, salaries for HMA's appeared inadequate. The possibility of revising them upward is currently under consideration.

Second, there were times when the program operation was hampered by a lack of supplies. It is not clear whether this was due to lack of funds or to cumbersome administrative machinery which made it difficult to obtain the supplies when they were needed. Most of these supplies were very small items, e.g. pencils, pamphlets. A petty cash allowance, directly accessible to the HMA team, would be desirable.

IX. OPERATING STATISTICS:

The program became operational November 16, 1964. Four Home Management Aides, one of whom was appointed as Unit Supervisor, were assigned to the AFDC Division of the HCWD, Public Assistance Division, with the initial responsibility of serving AFDC clients residing within the boundaries of the YDP Target Areas.

In April 1965, two more Home Management Aides were hired and the two Homemakers who had been working for the agency prior to the implementation of the HMA Program were incorporated in the unit. From this date, the unit extended services to Child Service cases and AFDC cases from Hennepin County. There no longer was a stipulation that the client reside in the Target Areas in order to be eligible for the HMA service.

The following table prepared by one of the Aides is typical of how the HMA's allotted their time:

20% . . . OFFICE WORK

1. Activity sheets
2. Verifying appointments by telephone
3. Conference with caseworker
4. Conference with supervisor
5. Special service staffings
6. Evaluations
7. Terminations
8. Unit meetings
9. Keeping daily records of visits with clients

12% . . . TRAVELING TIME WITH CLIENT

1. Shopping with client for appliances and clothing needs
2. Seeking better housing with client
3. Seeking community resources for people on low incomes who are not on public assistance

8% . . . TRAVELING TIME - SELF

5% . . . CLASS

1. Motivate clients to attend classes in homemaking
2. Introduce client to community resources and occasionally provide transportation to facilitate client in attending class

55% . . . FIELD

1. Money management

- a. With client's approval, have acted as voluntary payee, e.g. . making plans for paying bills
. consumer education
- b. At caseworker's or client's request, accompany client to teach her how to shop for furniture, clothing and appliances.
- c. After caseworker has explained budget to client, teach her how to allocate her money to meet her needs
- d. Available as protective payee

2. Upgrading homemaking skills

- a. Evaluate housing and if inadequate, encourage client to either seek better housing or work with landlord to make necessary improvements
- b. Teach client to establish schedule for housekeeping
- c. Teach better methods in cleaning, sanitation, laundry, care of appliances and furnishings, meal planning and preparation, and pest control

3. Physical care

- a. Encourage mother to take care of medical and dental needs
 - . stress importance of medical and dental needs
 - . work as a team with public health nurse on nutrition and medical needs
 - . improve personal hygiene

4. Child care

- a. Set up a plan with mother for cleanliness and good habits
- b. Teach preparation in getting children ready for school, stressing appearance and cleanliness
- c. Encourage children to cooperate in assisting with household chores

5. Acquainting client with community resources

- a. Encourage and facilitate client to attend basic education classes
- b. Make client aware of existing resources
- c. Encourage and facilitate client to attend classes in homemaking
- d. Assist in instruction of classes, e.g. sewing, food preparation and serving

6. Assisting in cost survey for agency

- a. Housing
- b. Clothing
- c. Furniture and appliances
- d. Laundry costs

7. Evaluating material needs of family

- a. At the request of the family, evaluate needs
- b. Evaluate needs when client requests supplement

By December 31, 1965, approximately one year after the start of the program, over 300 cases had been referred for HMA service. The table on the next page shows the status of these cases, why they were referred, and why some cases have terminated.

	<u>No.</u>	<u>Percent</u>
<u>Total Cases Referred</u>	309	100%
Cases currently active	116	37
Cases terminated	166	54
Cases waiting for service	27	9
<u>Clients Who Participated in Group</u>		
<u>Instruction</u>	135	44
<u>Reasons for Referral</u>		
Housekeeping	135	44
Money management	50	16
Assistance in shopping	31	10
Child care methods	28	9
Assistance in finding housing	24	8
Evaluation of clothing or furniture needs	15	5
Group activities	15	5
Food preparation	5	2
Nutrition	3	1
Supervision of housekeeper	3	1
	<u>309</u>	<u>101%</u>
<u>Reasons for Terminations</u>		
Goal accomplished	96	58
Clients not benefiting from service	20	12
Clients rejected services	15	9
Families moved from county	12	7
Clients referred who did not need help	10	6
Clients removed from ADC roles	8	5
Children removed from home	5	3
	<u>166</u>	<u>100%</u>

X. COMMUNITY INVOLVEMENT

Resident Participation

Target Area residents were not directly involved in planning this program. Because of its small size, the YDP had to rely heavily on the staffs of existing organizations for program suggestions. Thus, the views of neighborhood residents were generally made known, indirectly, through existing organizations.

For this program, at least, this indirect approach appears to have been quite justified. Target Area residents have not only participated in the program,

but also they have assumed much of the responsibility for maintaining and operating the program.

Classes were begun as a result of requests from neighborhood people. In cooperation with settlement houses, two groups were begun. Eight residents of the Target Area assisted in teaching and in giving demonstrations to the classes. The classes are planned by those attending them. One AFDC client, a former modeling school instructor, is giving a series of twelve self-improvement lessons in each Target Area. She receives no pay for this service.

Recently, at one settlement house, over 125 women attended classes sponsored by the HMA's. Women came and left from 1:00 P.M. until 11:00 P.M.

Community Support

Support from the community has been widespread. No overt opposition has been noted. Page 12, Program Impact on the Community, and page 18, Staff Training, give some examples of community support. Settlement house staffs worked closely with the HMA's in planning and supporting the group activities. They provided space for the classes and nurseries. A professional club offered the services of 100 home economists in giving special classes and demonstrations adapted to the interests and needs of the lower income families.¹ The program will be given in both Target Areas early in 1966 and will include lessons on budgeting, meal planning and preparation, wise purchasing and self-improvement.

Several church auxiliaries have provided volunteer workers who have assisted in teaching sewing and staffing the nurseries. They also have contributed supplies. In response to clients who had to travel a distance to attend classes in the Target Areas and wanted group activity in their neighborhood, one of the suburban churches is making plans to establish a class in that neighborhood.² One auxiliary has set up a thrift shop providing a resource to purchase good quality clothing at a minimal price.³ A civic group assisted the HMA's in providing volunteer teachers and supplies or class. This year the same group is helping the members of last years' class who have initiated their own class. The University of Minnesota Agricultural Extension Service provided educational materials.

¹ Home Economists in Business ² Christ Presbyterian Church of Edina ³ Fifth Avenue Nursery Auxiliary (21 Congregational and United Church of Christ Churches)

Home Economists Plan Food Classes to Bolster Low-Income Family Budgets

By MARY HART
Minneapolis Tribune Staff Writer

Food often raises havoc with the most carefully planned budget. But there are ways to cut down on even a stringent budget.

Members of the Home Economists in Business (HEIBs) are gathering material and recipes along these lines to present to homemakers from low-income families. The home economists are working in conjunction with the Hennepin County Welfare Board.

The two-hour classes will be from 7 to 9 p.m. on Mondays, Jan. 24, and 31, and Feb. 7 and 14, at Waite Community Center and on Tuesdays, Jan. 25 and Feb. 1, 8 and 15 at Wells Settlement House.

"The homemakers suggested the topics for discussion," said Mrs. Marion Ryan, chairman of the HEIB Community Service Project Committee.

Subjects for the four classes are rolls and simple casseroles, budget and menu planning plus simple cake decorating, food purchasing and simple desserts, and beauty, exercising, use of make-up, fashions and simple cleanliness.

The teachers are professional home economists employed by utility and food companies in the Twin Cities.

"We'll be stressing meal planning, shopping for and preparing of low-cost dishes," said Mrs. Laverne Halverson, one of the instructors.

"Especially buying meats and preparing them. They are the biggest portion of the food dollar."

She also will give advice on reading package and can labels, following newspaper ads for food bargains and comparing prices.

"And we'll show them ideas for serving inexpensive foods attractively," said Mrs. Halverson.

"We'll be stressing the use of non-fat dry milk. You can make whipped topping from it that costs as little as a penny a serving. It also has two-thirds



Minneapolis Tribune Photo by Donald Black
MRS. LAVERNE HALVERSON AND DENISE PLUNKETT
Making easy desserts for cooking school

less calories than regular whipped cream," she added.

The topping can go on cakes, puddings or other desserts.

"You can also substitute chilled fruit juices—apricot, pineapple, grape or orange juice—for the ice water," said Mrs. Halverson.

These are some of the recipes that will be used in classes:

WHIPPED TOPPING

1/2 c. ice water
1/2 c. non-fat dry milk
3 tbsp. lemon juice
2 to 4 tbsp. sugar

Sprinkle dry milk on water. Beat until stiff enough to stand in soft peaks. Add lemon juice and continue beating until stiff. Beat in sugar. Makes about three cups of topping.

PINK FLUFFY DESSERT

1 pkg. (small) cherry-flavored gelatin
1 c. boiling water
1 c. cold water
1/2 c. Whipped Topping

Dissolve gelatin in boiling water. Add cold water and chill in refrigerator until thick.

Whip gelatin slightly. Fold in Whipped Topping. Pile lightly into serving

dishes. Diced fresh or canned fruit can be folded in, if desired. Makes six servings.

CRUNCHY PEANUT BUTTER BARS

1/2 c. sugar
1/2 c. white corn syrup
1 c. chunk-style peanut butter
3 c. corn flakes
1 (6 oz.) pkg. chocolate pieces (optional)

Blend sugar, corn syrup

and peanut butter in heavy saucepan. Cook over low heat until melted, stirring constantly. Remove from heat and stir in corn flakes.

Pat into buttered 9 by 13-inch pan. Melt chocolate pieces over hot water and spread over top. When chocolate has begun to harden, cut into 1 1/4-inch squares. Makes 70 bars.

20 MINNEAPOLIS TRIBUNE ** Wed., April 21, 1965



I LIKE IT HERE By GEORGE GRIM

THE WARMING APRIL sun flecked the zigzag red bricks that lead from Park Av. to the proud old mansion's age of understanding.

In the large, rectangular room, with its baronial fireplace, two dozen women were so busy that a stranger could slip in unnoticed. It's this way every Monday afternoon from 1 to 3. At Edward F. Waite Neighborhood House this is a project. That word lies more in quiet comradeship than on any report.

In the neighborhood are some mothers receiving help from Aid to Dependent Children. Some families regularly are supplied with surplus government foods. How to keep their homes together, in neatness, in brightness, in the little surprises that children so need and harried mothers seldom can contrive . . . how, indeed?

THE WAITE HOUSE people, with an assist from Hennepin County Welfare and the week-after-week devotion of 7 women from the Minneapolis Mrs. Jaycees, are doing something about it. In the kitchen each Wednesday, you'll find a few women puzzling over the use of these surplus foods.

Last Monday, a Mrs. Jaycee had decided to try making peanut butter bars using bulgur. This is a sort of cracked wheat roughage. The result would be served as part of the refreshments that end each meeting. Ways of using the surplus meat product have been discovered. Barbecued, it's tasty.

The women in the front room were busy with several projects. On a long table, using paper patterns, shifts were being cut. At a meeting in May, all the members will model the shifts they made—from donated yard goods. (Without this modest support in supplies, the group would have gone aground.)

I SAW TWO PRESSED butterflies on a bright back-ground, framed. Often, the women being helped by the Mrs. Jaycees (and they're all so mutually busy you can't discover, readily, who's being helped and who's helping) want to make something that will brighten their home, bring delight to the eyes of their children. At the battered sewing machines (borrowed, as well) more work on the yard goods. Beyond the shifts, the bulgur bars, the coffee, the other projects that are purposeful reasons for the weekly meeting, there is the sense of friendship, one woman with another. Nobody's being Lady Bountiful. Nobody's Mrs. Who Cares. These women have found a mutual purpose, clothed in unforced companionship.

For many, a sense of longing has become belonging.

MINNEAPOLIS TRIBUNE * Sun., Jan. 16, 1966

Poor Youngsters Tend Toward Slight Malnutrition, Study Says

By SAM NEWLUND
Minneapolis Tribune Staff Writer

An anthropologist has found "a tendency toward slight malnutrition" in a study of diets of poverty-area children in a Minneapolis school.

In an investigation of food intake of fifth and sixth graders at Grant Elementary School, Dr. Ladislav P. Novak found the youngsters well below several nutritional standards.

He found that by nearly every measure used, Negro pupils were getting diets inferior to whites.

Nearly 1 in 5 of the 44 pupils in Novak's sample came to school without breakfast on at least 2 of the 3 days of the study. More than 2 out of 5 had "poor breakfasts" (such as milk and a cookie).

MORE THAN 8 per cent had no lunch and nearly 7 per cent no dinner.

Novak, assistant professor of anthropology at the University of Minnesota, investigated diets for the Minneapolis School Board in con-

nection with a project proposal to improve the health of Grant School youngsters by serving hearty breakfasts in the school gymnasium.

Grant School is in a heavily-Negro Near Northside area—one of the city's poorest. A large share of the families studied received all or part of their income from welfare.

The study reinforced previous findings indicating that the city's poverty-area children aren't getting enough of the right kind of food.

The Minneapolis Health Department found, for example, that 13 per cent of the children tested last summer in connection with the pre-school Head Start program were deficient in blood hemoglobin, the substance which carries oxygen to body tissues.

THESE CHILDREN, according to Dr. Clarence Smith, city health officer, may not be anemic, strictly speaking. But the findings, he said, show a "general nutritional lack."

Novak's findings are based on what the children report-

ed they had eaten on three successive days last May. He also measured height, weight and body fat.

The children had grown as much as they should have, Novak said, but there was "very little fatness in these children."

Negroes were much leaner and had better muscle development than whites, he said, but members of both races were leaner than average.

All but the white girls were getting less than adequate calories in their diets, on the average, according to the study.

CALORIE INTAKE was measured against standards set by the National Research Council. Boys in this age group (11 to 12), according to the council, need 2,400 calories a day, and girls need 2,200.

Novak found the Negro boys 600 calories short, Negro girls 300 short and white boys 200 short.

Teachers of poor youngsters frequently have linked lack of breakfast with what Grant Principal Marshall S.

Kaner called "listlessness, inability to respond to situations and lack of initiative."

The proposed breakfast project—a followup of Novak's study—would be designed to eliminate deficiencies and to measure the effects.

The project would be financed by federal antipoverity and educational funds, with assistance from private foundations.

XI. EVALUATION METHODS:

Statement of the Program Purpose as Seen from an Evaluation Viewpoint

From an evaluation viewpoint, the goals of this program were relatively clear cut. The basic hypothesis was something to the effect that improved home management efficiency on the part of AFDC mothers, living in YDP Target Areas, would lead to more favorable home conditions for the children in these families and that these would, in turn, lead to more favorable school attendance and attitudes and thus to lessen delinquency.

In spite of the many arguments that could easily be mustered against such a proposition, it is, under the properly controlled conditions, a testable hypothesis. Unfortunately, few of the conditions necessary for testing this hypothesis were present during this "demonstration." Surely, something was demonstrated; in our opinion, something very worthwhile. (See Section IV - Results.) But the validity of the underlying assumption was not demonstrated, nor was it put to the test.

The major reason, of course, was simply lack of time. Originally planned as a three-year demonstration, the YDP was shortened to one year by lack of funds. In one year it was physically impossible to measure the change in home management skills of a group of mothers, compare their skills with an untrained control group, measure attitudes, school attendance and "delinquency" of children, relate these to mothers' change in homemaking skills and so on. Faced with the time problem the YDP established limited evaluation goals for this program. These evaluation goals were as follows:

1. To initiate procedures which might ultimately lead to a test of the underlying assumption.
2. To obtain some measure of the reasons for referral to the HMA; the reasons for termination of services, and the amount of improvement, if any, shown by clients in the various home management skill areas.
3. To measure inter-rater reliability of HMA's and caseworkers on each of the variables mentioned in No. 2 above.

4. To obtain some idea of the reaction of clients to the services offered.

Evaluation Design

Rating scales were developed in the form of referral and termination reports. These reports were to be completed by both the caseworker and the HMA. The caseworker completed a referral form (see Attachment D) whenever a need for HMA services was observed. The HMA completed an initial evaluation (see Attachment E) following her first visit to the home. Individual termination reports were completed by the HMA and the caseworker making a total of four reports, or ratings, for each client. (see Attachments F and G*.)

These forms were developed jointly by the YDP, for research purposes, and the Welfare Department for agency records. They included ratings by caseworkers and HMA's, before and following service, of the status of home management skills of each client in a number of areas: housekeeping, budgeting, food preparation and/or nutrition, sewing and/or clothing, child care, health and medical. Clients were rated as adequate, marginal or inadequate in each area of homemaking skills. Also included on the forms were descriptions of specific homemaking skills for which the client was referred or received services. The caseworker's termination report included a checklist to describe effectiveness of Home Management Aide services for the case.

These reports could be used to provide information for evaluation goals 1, 2 and 3. As planned, they would yield ratings of the degree of improvement of the clients in each of the home skills areas as well as measures of reliability for these ratings. However, these ratings should not be considered independent since caseworkers and HMA's had regular conferences evaluating the progress of the client.

Originally, some thought was given to conducting interviews with the clients to determine their reactions to the services offered. This should probably be done at some later date, but the overwhelmingly favorable reaction to the

* This report was later dropped. See Evaluation Results, page 27.

program has been amply demonstrated by oversubscribed classes and heavy demands for more HMA's. Interviews might be used to pinpoint the unique qualities of this program.

Evaluation Results

An analysis of the reasons for referral and termination has been presented in Section IV - Results. This analysis covered the first year of the program.

The use of the caseworker's termination report (Attachment G) has proven ineffective. The major reason for this appears to have been high turnover among caseworkers, either through resignation or reassignment. When a caseworker left the case, for whatever reason, the new caseworker felt unqualified to make the report. The current practice is for the HMA to complete the termination report (Attachment F) in duplicate and send a copy to the caseworker to be incorporated into the case record.

Termination reports are not completed for short-term cases, e.g. HMA evaluation of need for housekeeper service.

Not enough time has elapsed to get an adequate statistical picture of the clients, their needs, and their progress. A sample of cases which were initiated and terminated after May 1 and before October 1, 1965 has been reviewed. Earlier cases were not used because the program was just getting under way and the record procedures had not been worked out. This review was thus based on all cases served in the five-month summer period after the program had been in operation six months. THIS SAMPLE WAS NOT REPRESENTATIVE. It should be viewed as a picture of the short-term, relatively minor, problem cases since this was the group that terminated after only a few visits--with apparently successful results.

Initiation and termination forms which were available for 35 clients were analyzed to determine problems of the clients, those problems served by the HMA's and the apparent results of training efforts. It was found that the average recipient of the teaching services was 33 years old and had four children.

The age range of the clients was from 20 to 46. They had between one and seven children. At the time the cases were referred, seven of the clients were married, ten were separated, eight divorced, four single and two were widowed. Information was not available for the remaining four clients.

HMA's made an average (median) of four visits to each of the clients in the course of the service. This median of four visits clearly indicates that it was the short-term clients being served. It is estimated that long-term, multiple problem families have received an average of over thirty HMA visits prior to termination of the case.

In their initial reports, caseworkers and HMA's generally agreed on the services needed by clients. In no case was there complete disagreement as to what was needed. Frequently, there was some divergence. For example, one caseworker referred the client for help in housekeeping and budgeting. The HMA report showed a need for housekeeping and budgeting, plus sewing and clothing care. This sort of "discrepancy" occurred in perhaps half the cases.

The following are the comments by the HMA's as to major reasons for client referral:

- . Help in decorating.
- . Assist in shopping. Mother lacked self-confidence--was afraid to go by herself.
- . Housekeeping. Very paranoid--accepts all suggestions as criticism. House smells bad from mother's body odor.
- . General information. Client did not really need help on anything--just interested in HMA program.
- . Housekeeping and child care.
- . Child care, budgeting and housekeeping. Client lived in house that should have been condemned--cockroaches--called Health Department.
- . Condemned house--it has sewer rats--moved client.
- . Budget.
- . Housekeeping--filth.
- . Clothing evaluation. Worker had mother's list of clothing needs--wanted it checked.
- . Housekeeping.

- . Budget. Client was behind in bills.
- . Clothing need. She had had most of their clothing stolen-- family desperately in need.
- . Estimate clothing need--loss by fire.
- . Appliance purchase. Needed help in returning an unacceptable sewing machine.
- . Budget.
- . Housekeeping. Place messy, but not filthy.
- . Budget problem.
- . Interest her in group activity. Client not stable enough to participate in scheduled classes.
- . Child care. Mother's nervousness is affecting the children.
- . Furniture needs evaluation.
- . Checking on sewing--machine repair estimate.
- . Sewing--client needed activity to keep her contented to stay home.
- . Housekeeping--client has a low I.Q.
- . Determine need for housekeeper--woman ill.
- . Assistance in clothing purchase. Caseworker felt daughter needed assistance in purchase of clothing. Client's daughter re-entered the home after spending some time at Sauk Center (a home school for girls).
- . Evaluation of mattress. Caseworker wanted mattresses checked to see if they needed replacing.
- . Housekeeping--client working part-time.
- . Help find housing.
- . Budgeting.
- . Assistance in child care; children missed a lot of school. She did not keep appointments (for psychotherapy).
- . Child care. Extremely filthy.
- . Supplement shopping. HMA took client shopping for clothing and linens.
- . Budgeting and sewing. HMA called two or three times before she got to talk to her--she was asleep. HMA made appointment and she told her she was moving out of state.
- . Assistance in purchasing appliances. Refrigerator and sewing machine needed.

Evaluation Results - Services Given to Clients

At the completion of services to the clients, the HMA's again described what

they felt had been the major focus of their services with the clients. With some clients more than one area of homemaking had been emphasized. Not enough information was available to state whether the perception of major focus changed during the course of service to the client.

Evaluation Results - Ratings of Home Management Skills

Both caseworkers and HMA's rated the homemaking skills of the clients at the initiation and termination of the service. Caseworkers rated a greater percentage of the clients "adequate" in all homemaking areas following the HMA service than they did at the beginning of the service. In these comparisons "adequate" ratings were compared with "marginal" and "inadequate" ratings. Caseworkers rated very few clients "adequate" before service, but many "adequate" after HMA service. Fisher Exact Test showed pre and post ratings to differ significantly at the .03 level in the area of "housekeeping."

In contrast to initial ratings by caseworkers, the HMA's rated many clients' homemaking skills "adequate" at the initiation of service. It is not known whether the caseworkers and HMA's actually differed in their perception of the adequacy of homemaking skills, or whether the clients put on a "good show" for the HMA's initial visits.

At the termination of services, in contrast to initial ratings, Aides rated a greater proportion of clients as "adequate" in two of the six home management areas. Actually, the proportion of "adequate" ratings after the service was nearly the same as before the service. There were no significant differences by chi-square test, comparing "adequate" ratings with "marginal" and "inadequate" ratings combined. It is possible that HMA's were modest about their achievements while caseworkers were congratulatory.

Evaluation Results - Effectiveness of HMA Service

Caseworkers rated HMA Service for each case. Five response categories were provided: very effective, effective, not sure, ineffective, very ineffective. Ratings were available for 30 cases:

	<u>No.</u>	<u>Percent</u>
Very effective	14	47
Effective	10	33
Not sure	3	10
Ineffective	2	7
Very ineffective	1	3
	<u>30</u>	<u>100%</u>

Eight out of ten caseworker ratings were "very effective" or "effective," and only one in ten ratings were "ineffective" or "very ineffective." Caseworkers also made comments about HMA services. These comments indicated that the HMA's accomplished the teaching tasks which the caseworker had hoped they would (or that caseworkers were predisposed to give good ratings). The actual comments follow:

- . Aide worked well with client. During this period she functioned at her top capacity as a mother.
- . Homemaker very effective in counseling with client.
- . Client actually trembled and perspired when she went on her first shopping trip with Aide and the first two times at the Waite House.
- . Client appears to be unworkable. She has been in protection for a number of years and there has been no improvement. It was hoped that a woman would be more effective in helping client. Client did relate well to homemaker, but problems are of an emotional nature. Other resources would be more helpful.
- . Client's skills were adequate and she requested only direction in use of food commodities and preparation.
- . This client felt the homemaker presence in the home constituted agency agreement with her own feelings of inadequacy and was threatened by it. The homemaker was advised to discontinue contact after the client appeared distraught and kept a large knife in her hand throughout an entire interview.
- . Homemaker services were terminated partly because of the poor attitude of the client.
- . Client's lack of an appropriate affect in response to the homemaker's efforts is not surprising as she has been difficult to reach in previous casework efforts designed to improve her functioning in other areas of life.
- . The landlord stated that he would rent to any client that has a teaching homemaker active. He thought that they helped the client very much.
- . Client responded well to home management teaching within her limits. Service was complicated by severe emotional problems of the mother. However, marked improvement was observed in all areas.

- . Client enrolled in homemaking classes.
- . This service was most beneficial to the client. She is now able to prepare more of a variety of foods on her limited budget.
- . The homemaker could not get client to work out a plan for budgeting, but instead attempted to work with her in other areas where she also met with little success. This was due in part, at least, to the client's resistance to help.
- . Many of the problems previously noted in this case by the caseworker were removed through these services.
- . There may now be a divorce since Mr. X beat her and this may put her back in the hospital (actually I only saw this client one time).
- . Service given was optimum within limits of ability and cooperativeness of client. Teenager removed from home limiting further service to her.
- . Client resisted efforts made to help her.
- . Client was hospitalized and had little opportunity to find a place to move to. The homemaker helped her find contacts and resulted in locating a very good house to rent.
- . The general situation was stabilized with the client's marriage to her long-time boyfriend who was released from prison. Duration of homemaker service was brief.
- . Cannot evaluate since client moved before HMA service was given time to be effective.
- . Original referral completed--no further HMA services needed.
- . Although the services of homemaker must be rated ineffective, it is not due to homemaker's inadequacy or lack of effort, but rather client was not at all receptive and could not be motivated.
- . HMA was able to form a beginning working relationship with client. The children were removed by the Juvenile Court, which they terminated this service.

Evaluation Results - Clients' Reactions to HMA Service

Home Management Aides, by means of termination reports (Attachment G) rated clients' reactions to service. Ratings of the clients' reactions indicated that more than three out of four clients were either "very favorable" or "favorable" to the service. One client in eight was "lukewarm" and one in eight was "uncooperative" or "very uncooperative."

HMA Ratings of Clients' Reactions to HMA Service

	<u>No.</u>	<u>Percent</u>
Very favorable	16	47
Favorable	10	29
Lukewarm	4	12
Uncooperative	1	3
Very uncooperative	3	9
	<u>34</u>	<u>100%</u>

HMA comments on clients' reactions to service were as follows:

- . She reacted very favorable, but was afraid. Second trip she relaxed and enjoyed it.
- . She liked my coming to visit her, but only to be sociable.
- . First six visits client did not want me to come. After I moved her, she wanted me to come each day.
- . Client not home on first four visits.
- . Client would smile and agree to everything, but would not follow through.
- . Client retarded.
- . She eagerly accepted HMA services as she felt we were trying to help her.
- . Client capable of shopping after she receives supplement.
- . Client accepts help, but is often under the influence of liquor when homemaker arrives.
- . No assessment made at time of termination because client moved out of state.
- . Client cannot be pressured. She is willing, but very lacking in organization.
- . Client is attending classes in homemaking.
- . Client alcoholic and emotionally upset.
- . Client knows homemaking skills, but her nervousness makes her inefficient.
- . Client never sewed before.
- . Client was congenial and receptive, but could not keep interested in one thing very long.
- . Client welcomed my services.
- . I assisted client in shopping and she was receptive to my suggestions.
- . Client's attitude toward HMA changed from very uncooperative to lukewarm.

- . Client was very agreeable and anxious to please.
- . She was eager to join our sewing classes and is doing well. She welcomed advice about shopping.

Evaluation Results - Reasons for Termination of Cases

Home Management Aides described the reasons for termination of cases. In about half of these there appears to have been a successful completion of the intended service. In others, the service appears to have been partially successful, with the client still having problems beyond the reach of the HMA's efforts. And in still others, there was a direct rejection of the service or an inability to learn. The comments follow:

- . Introduced client to community resources.
- . Purchases were completed. Mother has gained enough confidence to do things on her own. She joined classes at Waite House.
- . Very little progress being made. Client accepted HMA visits cheerfully, but I could make few suggestions.
- . No need.
- . I felt unsafe alone with her as she also had butcher knife in hand when talking to me.
- . Case referred to protection. Client should have full-time housekeeper live in; she objected.
- . Too many men in her apartment each time--could not work with her.
- . Caseworker felt she was misusing sewing class and terminated HMA services and classes.
- . Client not receptive.
- . No need for HMA services.
- . Client was not capable of learning any more.
- . Client is paying slowly, but surely. Seems aware of her obligations and is trying.
- . Client moved to Chicago.
- . Goal accomplished.
- . Remaining problems are social.
- . Client moved to Florida.
- . Woman not concerned about following an organized routine.
- . Goal accomplished. Client managing well.
- . All problems social leading to inadequacy in homemaking skills.

- . Problems are social. Oldest child is living with grandparents relieving some of the stress.
- . Furniture purchased. No further need.
- . Client didn't want HMA evaluation--said she would withdraw request for machine repair.
- . Goal accomplished. Client returned to South Dakota.
- . Client could not benefit from service.
- . Decided that family needed assistance in housekeeping.
- . Clothing purchases made. I assisted in purchase of sewing machine. Client joined Northside sewing classes. No further need.
- . Mattress was cleaned and one new one was purchased.
- . Client not benefiting from instruction.
- . HMA could not locate housing. Caseworker found a house.
- . Husband does all the housework.
- . Purchases of good used refrigerator and sewing machine were completed. Client joined Northside sewing classes. No further need.
- . She is moving to California.
- . Shopping was completed.
- . Client wouldn't accept suggestions. Resented being offered assistance.
- . Siblings were removed from the home. No further need.

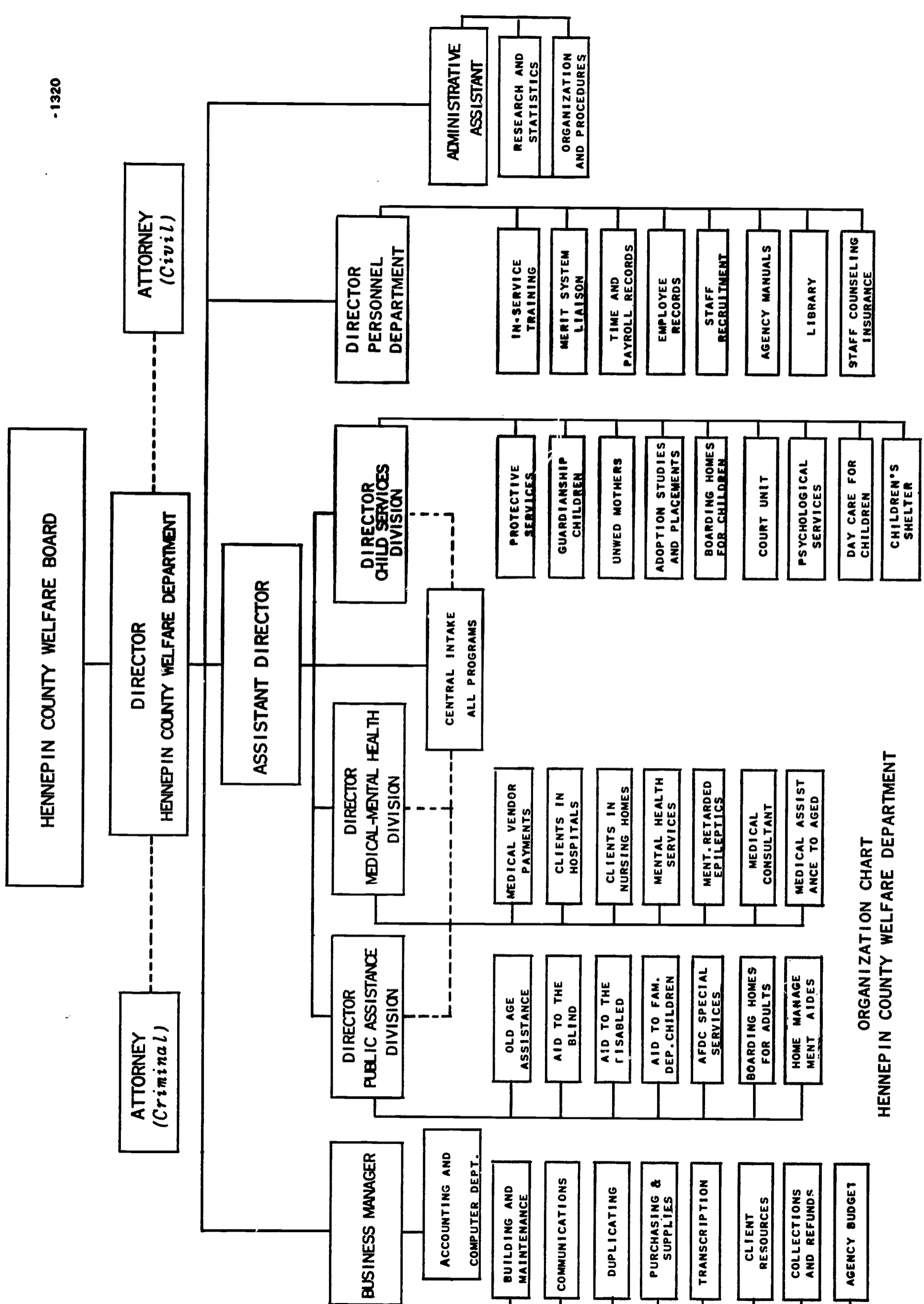
Critique of Evaluation Procedures

This critique is based on the limited evaluation goals described at the beginning of Section XI. It should be obvious that no test was made of the major assumption underlying this program. Perhaps it should be reiterated that this program may have great worth regardless of its impact, or lack of impact, on juvenile delinquency.

Evaluation procedures for this program appear adequate for obtaining descriptive statistics on reasons for referral. A measure of reliability may be obtained on these referrals. Inter-rater reliability on terminations and amount of improvement is lacking. If the underlying assumption is ever to be tested, some external measurement will be needed to verify HMA ratings. There is a suggestion that HMA's tend to underrate their effectiveness.

Thus far, only a small, non-representative sample of HMA activities has been reviewed. This is simply a function of time and not a weakness in the record procedures.

Home interviews with clients would have been desirable, but were not a major weakness of this evaluation. Widespread, overt reactions by clients amply demonstrated a very favorable general response.



ORGANIZATION CHART
HENNEPIN COUNTY WELFARE DEPARTMENT

HOME MAKER SUPERVISOR

-3925

KIND OF WORK:

Under general supervision, is responsible for the administration of home maker services in a large county welfare department; develops and administers a comprehensive orientation and in-service training program for Home Makers; instructs clients in home-making skills and techniques; coordinates the functioning of the Home Maker program within the agency; directly supervises the Home Maker staff; performs specialized administrative work in connection with the Home Maker program; and performs related work as assigned.

EXAMPLES OF WORK: (Illustrative only)

Participates in the development of agency policies on the use of Home Makers.

Explains appropriate utilization of Home Maker services to social services staff.

Develops the content of training programs for Home Makers.

Conducts in-service training of the Home Maker staff.

Supervises Home Makers in the performance of their duties.

Evaluates Home Maker staff performance.

Undertakes special studies and surveys that pertain to Home Maker services.

Plans, organizes, and conducts classes for clients on home-management skills.

Consults with agency staff and community on problems relating to Home Maker services.

Promotes community understanding of Home Maker services through speeches, conferences, and news media.

Reviews and approves all requests for and assignments of Home Makers.

KNOWLEDGES AND ABILITIES REQUIRED:

1. Thorough knowledge of home-management principles and methods.
Thorough knowledge of home economics resources.
Considerable knowledge of human behavior.
Knowledge of the principles and techniques of social case work.
Knowledge of social and economic problems.
Knowledge of principles of supervision.
2. Ability to develop and administer a training program for Home Makers.
Ability to direct and supervise the work of others.
Ability to evaluate performance and stimulate growth and development.
Ability to establish and maintain good professional relationships with agency staff and community.

MINIMUM QUALIFICATIONS OF EDUCATION AND EXPERIENCE:

1. Graduation from an accredited four-year college with a major in home economics and one year's successful graduate work in home economics or social work.

OR

2. Two years of successful full-time paid experience as a home economist or social case worker may be substituted for the year of graduate study.

HOME MAKER (County welfare staff employee)

-3920

KIND OF WORK:

Under direction of county welfare director or social welfare supervisor, assists in care and management of children in their own home; instructs families in their homes in household skills and management; performs household duties necessary to carry out the foregoing functions; carries on duties in families in which the mothers are absent or are physically or mentally unable to perform these functions and in households of aged or other persons who are in need of and can benefit by such services; works closely with the case worker in determining capabilities of each family or individual in these areas; and performs related work as assigned.

EXAMPLES OF WORK: (Illustrative only)

Manages and cares for children;
Supervises children;
Assists in and instructs in planning, preparation, and serving of meals;
Assists in budgeting and expense planning;
Teaches elements of nutrition;
Teaches child care;
Purchases groceries and household supplies;
Launders and irons.

KNOWLEDGES AND ABILITIES REQUIRED:

1. Considerable knowledge of child-care methods;
Considerable knowledge of housekeeping skills;
Considerable knowledge of home management;
Knowledge of elements of nutrition and meal planning;
Knowledge of budgeting.
2. Ability to understand and work with children in their own homes;
Ability to teach and to motivate people;
Ability to adapt to a variety of home and personal situations;
Ability to establish good working relationships with children and adults;
Ability to retain confidentiality of home conditions and situations;
Ability to exercise tact and good judgment in working with children and adults;
Ability to organize work effectively and efficiently.

MINIMUM QUALIFICATIONS OF EDUCATION AND EXPERIENCE:

Graduation from a standard high school and five years of successful homemaking experience in own home or in a home-making situation.

Satisfactory physical condition as evidence by a physical examination immediately prior to employment.

OR

College training that includes courses in home economics may be substituted

for the home-making experience on a year-for-year basis up to a maximum of two years.

OR

Additional home-making experience may be substituted for the high school training on the basis of two years of experience for each year of high school.

REFERRAL FOR HOME MANAGEMENT AIDE SERVICES

(PRINT OR TYPE)

NAME _____ CASE NO. _____

ADDRESS _____ TEL. NO. _____
 (Directions if necessary)

IF OUTSIDE MINNEAPOLIS, NAME SUBURB _____

MOTHER'S AGE _____ MARITAL STATUS _____

Date of Referral

Caseworker

Unit Supervisor

Date Assigned to
Home Management Aide

Home Management Aide

CHILDREN RECEIVING AFDC

OTHER HOUSEHOLD MEMBERS (Specify relationship i.e. children not on AFDC, incapacitated father, others)

Name	Birthdate	Name	Age
1. _____	_____	1. _____	_____
2. _____	_____	2. _____	_____
3. _____	_____	3. _____	_____
4. _____	_____	4. _____	_____
5. _____	_____	5. _____	_____
6. _____	_____	6. _____	_____
7. _____	_____	7. _____	_____
8. _____	_____	8. _____	_____

ASSESSMENT OF HOME MANAGEMENT SKILLS AT TIME OF REFERRAL

This checklist is intended to be a current assessment of the level of home management skills. (Please make your specific referral for home management aide services desired on the back of this sheet.) Write in appropriate number for each category:
 1. Adequate - Does not need assistance; 2. Marginal - Might benefit by assistance;
 3. Inadequate - Needs considerable immediate help; 4. Unknown.

Home Management Skills

- | | |
|---------------------------------------|----------------------------|
| Housekeeping [] | Sewing and/or clothing [] |
| Budgeting [] | Child Care [] |
| Food Preparation and/or nutrition [] | Health and medical [] |
| | Others: (specify) |

CHECK REASON
FOR REFERRAL

ELABORATE ON SERVICES YOU FEEL WILL BE HELPFUL
(You will probably find it necessary to elaborate
on only one of a few of these.)

1. Housekeeping _____

2. Budgeting _____

3. Food preparation _____
and/or nutrition _____

4. Sewing and/or _____
clothing care _____

5. Child care _____

6. Health and/or medical _____

7. Clothing purchase _____

8. Furniture, appliance purchase _____

9. Others: specify _____

Which of these is the primary reason for referral?

Give any other information that you feel would be beneficial to the home management aide in servicing the family. (i.e. motivation, attitude of client toward referral.)

(PRINT OR TYPE)

F 2116

INITIAL EVALUATION BY HOME MANAGEMENT AIDE UNIT

NAME _____ CASE NO. _____ Date of Referral

ADDRESS _____ TEL. NO. _____ Caseworker

(Directions if necessary) _____ Unit Supervisor

IF OUTSIDE MINNEAPOLIS, NAME SUBURB _____ Date Assigned to

MOTHER'S AGE _____ MARITAL STATUS _____ Home Management Aide

_____ Home Management Aide

CHILDREN RECEIVING AFDC

OTHER HOUSEHOLD MEMBERS (Specify relationship i.e. children not on AFDC, incapacitated father, others)

Name	Birthdate	Name	Age
1. _____	_____	1. _____	_____
2. _____	_____	2. _____	_____
3. _____	_____	3. _____	_____
4. _____	_____	4. _____	_____
5. _____	_____	5. _____	_____
6. _____	_____	6. _____	_____
7. _____	_____	7. _____	_____
8. _____	_____	8. _____	_____

ASSESSMENT OF HOME MANAGEMENT SKILLS BY HOME MANAGEMENT AIDE UNIT AFTER SECOND HOME VISIT.

This checklist is intended to be a current description of the home management skills. Write in appropriate number for each category: 1. Adequate - Does not need assistance; 2. Marginal - Might benefit by assistance; 3. Inadequate - Needs considerable immediate help; 4. Unknown.

Home Management Skills

- | | | | |
|-----------------------------------|-----|------------------------|-----|
| Housekeeping | [] | Sewing and/or clothing | [] |
| Budgeting | [] | Child care | [] |
| Food preparation and/or nutrition | [] | Health & medical | [] |
| | | Others: (specify) | |

PLAN FOR HOME MANAGEMENT AIDE SERVICES TO BE GIVEN

(CHECK SERVICES
NEEDED)

1. Housekeeping _____

2. Budgeting _____

3. Food preparation _____
and/or nutrition _____
4. Sewing and/or _____
clothing care _____
5. Child care _____

6. Health and/or medical _____

7. Clothing purchase _____

8. Furniture, appliance purchase _____

9. Others: (specify) _____

Which one of the above areas will be your major focus?

What factors account for present need of service?

LIST UNMET NEEDS.

TERMINATION EVALUATION OF
EFFECTIVENESS OF HOME MANAGEMENT AIDE SERVICES

(To be completed by AFDC caseworker at time of termination of Home Management Aide Service).

Caseworker
Unit Supervisor
H.M.A.
Date of Initiation
Date of Termination
Date of Report

Name of Client _____

Case No. _____

Date of last visit in home _____

ASSESSMENT OF CLIENT'S HOME MANAGEMENT SKILLS AT TIME OF TERMINATION
(Write in Appropriate Number for Each Category)

- 1. Adequate
- 2. Marginal

- 3. Inadequate
- 4. Unknown

Housekeeping ()
 Budgeting ()
 Food Preparation
 and/or Nutrition ()

Sewing and/or Clothing ()
 Child Care ()
 Health and Medical ()
 Other: (Specify) ()

Primary reason for original referral: _____

RATE H.M.A. SERVICE FOR THIS CASE (Check One)

Very Effective ()
 Effective ()

Ineffective ()
 Very Ineffective ()
 Not Sure ()

Comments: _____

Signature of Caseworker

TERMINATION REPORT OF HOME MANAGEMENT AIDE SERVICES

(To be completed by Home Management Aide at time of termination of service)

Caseworker
Unit Supervisor
H.M.A.
Date of Initiation
Date of Termination
Date of Report

Name of Client _____

Case No. _____

Approximate number of visits with client _____

What was the main reason this person was referred? _____

Comments: _____

What was the main reason for terminating this case? _____

ASSESSMENT OF CLIENT'S HOME MANAGEMENT SKILLS AT TIME OF TERMINATION
(Write in Appropriate Number for Each Category)

- | | |
|---------------------------------------|----------------------------|
| 1. Adequate | 3. Inadequate |
| 2. Marginal | 4. Unknown |
| Housekeeping () | Sewing and/or Clothing () |
| Budgeting () | Child Care () |
| Food Preparation and/or Nutrition () | Health and Medical () |
| | Other: (Specify) () |

HOW DID THE CLIENT REACT TO YOUR SERVICE? (Check One)

- | | |
|--------------------|------------------------|
| Very Favorable () | Indifferent () |
| Favorable () | Uncooperative () |
| | Very Uncooperative () |

Comments: _____

DESCRIPTION OF HOMEMAKER SERVICES GIVEN: (Describe only those areas in which you attempted to give service)

Housekeeping _____

Budgeting _____

Food preparation _____

Sewing and clothing care _____

Child care _____

Nutrition _____

Others: Specify: _____

Which of the above was the major focus of your service? _____

Do you have any other comments about this case? _____

Signature of HOME MANAGEMENT AIDE

H.M.A. Supervisor comments: _____

CAREER CLINIC FOR MATURE WOMEN, INC.

PROFESSIONAL HOMEMAKER

Course Outline

- LESSON 1** **What Makes a Homemaker Necessary**
The crises and emergencies that necessitate homemaker service; how the homemaker can contribute; getting started on any job.
- LESSON 2** **Reactions to Stress**
Understanding what we see, starting where people are, with understanding and compassion coping with problem situations.
- LESSON 3** **Defining the Homemaker's Job**
Communication between employer and employee, including hours, salary, and expectations.
- LESSON 4 & 5** **Understanding and Coping with Children's Behavior**
Children of all ages react to newcomers, adults, emergency situations. How the homemaker can effectively deal with their reactions.
- LESSON 6** **The Homemaker and the Lady of the House**
The Homemaker and the Head of the Household
All those relationship problems and satisfactions.
- LESSON 7** **Cooking, cleaning, laundry, and mending**
The tools of our trade.
- LESSON 8** **Special Situations**
Part-time homemaker service, service to the aged, homemaker as educator, living-in, working with professional helpers, helping care for retarded children, etc.

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ATTACHMENT H