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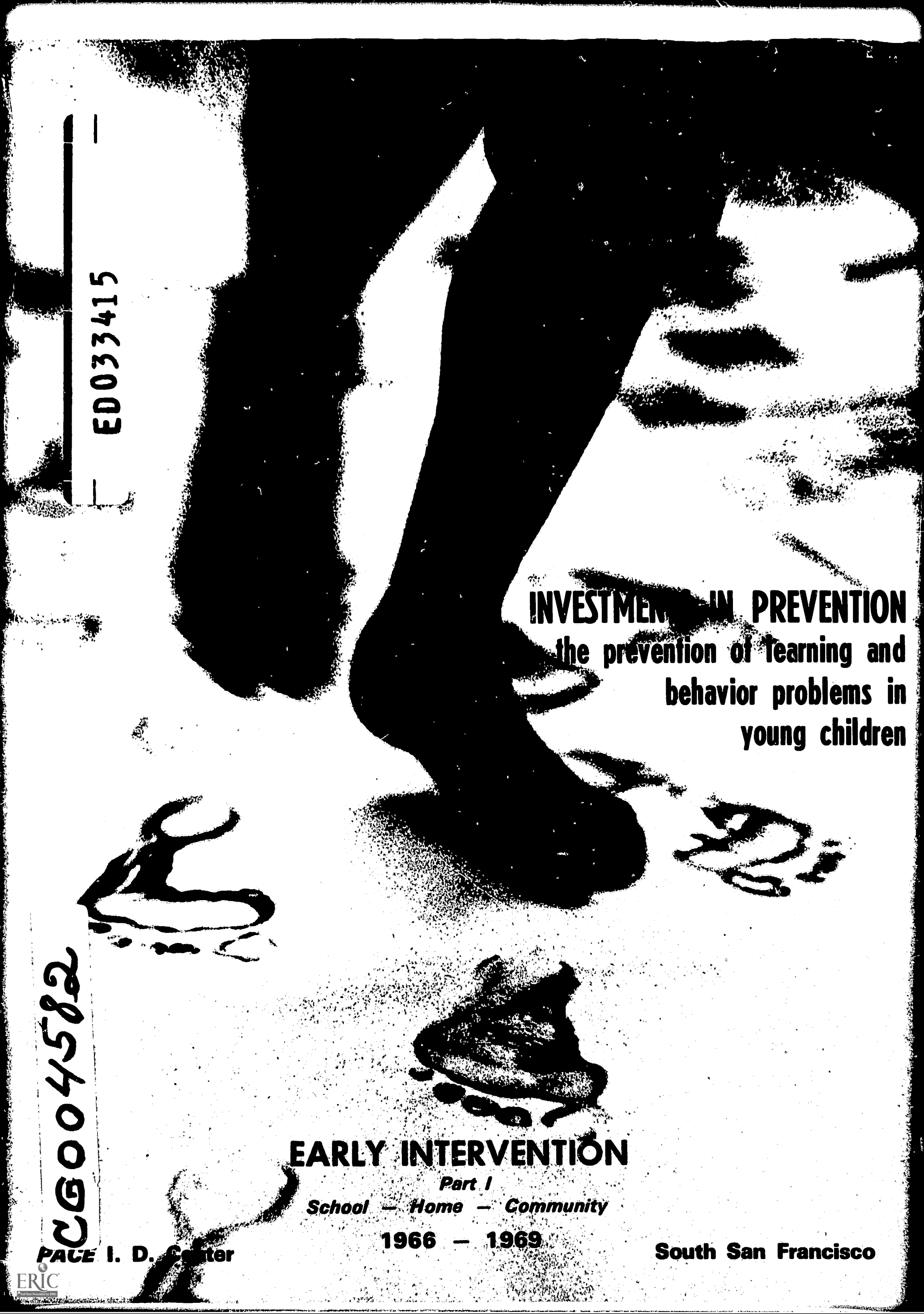
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Abstract

In this paper, the reader can see how the beginnings of organization in one community helped to develop a program focusing on young children. The needs of all young children can be pivotal in marshalling a community's resources toward concerted action. The PACE I.D. Center was set up specifically for early identification and intervention designed to reduce the occurrence of disordered behavior among school children. All children were rated by their teachers on the A-M-L Behavior Rating Scale and randomly assigned to an experimental or control group. Intervention was begun as soon as a child was identified as a member of the demonstration group. The process of intervention is discussed, with respect to the school, home, parents, and the Spanish speaking communities. Teachers comments and student comments are included. The research reported herein was funded under Title III of the Elementary and Secondary Education Act. (Author/KJ)

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**INVESTMENT IN PREVENTION**  
the prevention of learning and  
behavior problems in  
young children

**EARLY INTERVENTION**

*Part I*

*School — Home — Community*

**1966 — 1969**

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**INTERVENTION REPORT I**

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June, 1969

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE  
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THE ESSENTIAL ELEMENTS OF THE PACE I. D. CENTER  
OR A PREVENTION-ORIENTED SERVICES CENTER

1. A commitment to the priority of services to young children and those responsible for their welfare and development.
2. Appropriate comprehensive methods for the early identification of young children and families with a potential for "Hi-Risk."
3. Appropriate and effective means of early intervention with those responsible for the welfare of young children, e.g., parents, school personnel, community agencies.
4. A continuity of direct service and, in turn, concern for children in relation to their total environment.
5. Continuing identification of service gaps for young children, their families, and school and agency personnel.
6. Provision for anticipating and meeting crisis situations through collaboration with existing community agencies.
7. Provision for research and development aspects of such a service so that process-evaluation is an integral part of dynamic, flexible, innovative services.
8. A responsibility for appropriate dissemination of relevant information.
9. A continuing responsibility for focusing on PREVENTION: young children and their needs.

## FOREWORD

From the beginning, the Title III-ESEA directives from the United States Office of Education were explicit. Such words as catalyst, change agent, innovation, the school, community, evaluation, dissemination and implementation were important to include in one's vocabulary. Inclusion of the traditional research design gave the PACE I. D. Center project a small star.

The hallmark of the PACE I. D. Center was prevention through early identification and early intervention. Every school child, kindergarten through fourth grade, had the opportunity to be identified. Intervention was viewed as a process, a specific modifying action which effects a system or relationship. By studying an identified group, through research, teaching and demonstration, the process of change permeated among all those who were concerned with young children. The PACE social worker, as the child's advocate, tried to sustain this focus in all her relationships.

The intervention reports included here are an attempt by the social workers to capture this process. Every effort has been made to disguise the vignettes in order to respect confidentiality. Some will read this and say there is nothing new, others will not read it at all. To those who do read it with understanding, our thanks.

*"There'll be those who will remember their PACE worker well.  
For they know things that statistics won't tell."*

The PACE I. D. CENTER

*The early identification of and early intervention with behavior problem children and their families.*

ABSTRACT

Nature of the Problem: Estimates of the number of emotionally disturbed children in our schools range from ten to twenty percent. The effects of this problem are well documented. At one end of the continuum is the crime rate, and at the other end is the vast number of people being treated in the nation's mental institutions. It is obvious that the cost to society and to the individual is enormous. Years of productive, useful living are lost.

At present, there is no systematic effort in the schools to apply preventive measures to this problem. Emotional disturbance characteristically is identified only when anti-social behavior makes it obvious. In a great many instances, emotional disturbance is not identified until it has reached an advanced stage.

Objective: There is a substantial body of research evidence that points to the feasibility of early identification and treatment on a systematic, highly controlled basis. It was the purpose of the proposed project to initiate a program of early identification and interdisciplinary intervention designed to reduce the occurrence of disordered behavior among school children.

Procedures:

Selection of Sample: The sample of 354 children from kindergarten through fourth grade was drawn from a population of over 6,000 children in public and parochial schools in northern San Mateo County, California.

All children were rated by their classroom teachers on the A-M-L Behavior Rating Scale. Those children included in the study met the following criteria:

- 1) Among the high scoring 10% of their respective school districts on the AML Behavior Rating Scale.
- 2) Under 10 years of age as of July 1, 1966.
- 3) A member of a family not on the active roster of a social adjustment agency at the time of classroom screening.

Children were then assigned randomly to an experimental or control group and were matched according to grade level, sex and the Learning Score on the A-M-L Scale.

Early Intervention: For purposes of this study, intervention was begun as soon as a child was identified as a member of the Demonstration Group (PACERS) and the teacher and other school personnel were made aware of this. Attitudes toward a child may begin to change when this knowledge about the child is shared. Intervention for a particular case continued to develop in scope and degree as:

- 1) Information about a case was gathered (school behavior, learning ability, achievement, health, family).
- 2) Communication about a case was encouraged (interviews, conferences, consultation).
- 3) Evaluation techniques became a part of the on-going process of intervention.

The project was identified with the fact that previous studies show that at the present time the identification of children and families with problem behavior is very possible within the school setting. The problem remains: that of providing a process of intervention that

- will be helpful and meaningful to children, to families, and to school and community agency staffs.
- provides continuity of service from identification to treatment.
- is cognizant of beginning symptoms and the need to intervene.

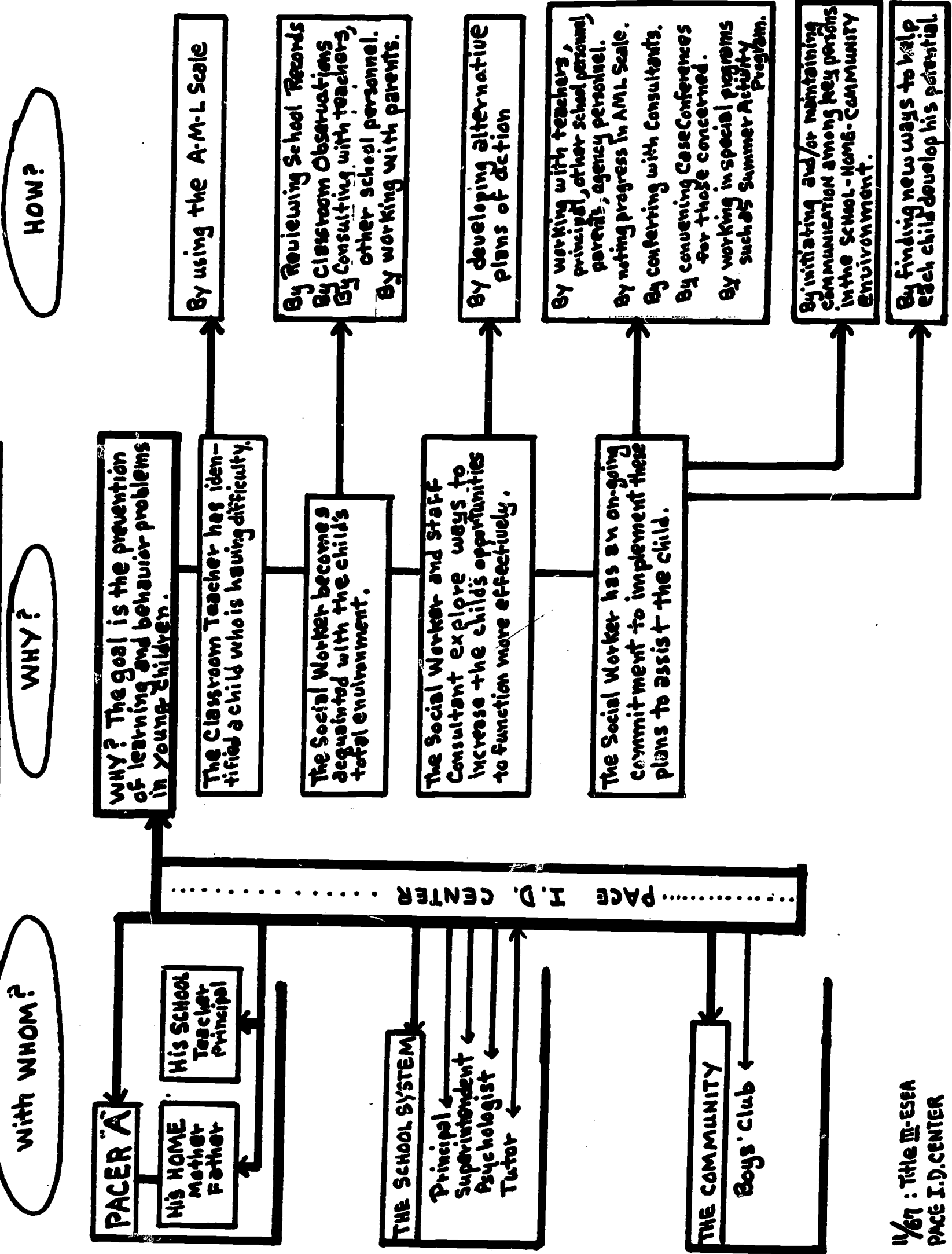
The social worker, as the key intervener, assumed a continuing, supportive role or a therapeutic relationship with the family and made appropriate referrals to community agencies. Each of five social workers had a caseload of from twenty-five to thirty-five cases over a two year period. The ripple effect of intervention increased each worker's caseload by the number of significant adults in each child's total environment: at school, at home, in the community.

*The process of early intervention within a system is dealt with in depth in the following report.*

Evaluation: A separate report includes a comprehensive evaluation of the project.

Dissemination and Implementation: Refer to separate report.

# HOW INTERVENTION WORKS



With WHOM?

WHY?

HOW?



## INTERVENTION IN THE SCHOOL

### THE SCHOOL ENVIRONMENT

#### *Initial Intervention*

All teachers had a general knowledge about the PACE program either from participating in the initial screening process (the AML Behavior Rating Scale), or from discussions about it during teacher orientation week. Most principals invited individual social workers to school faculty meetings early in the school year. This facilitated initial introductions to faculty and other school personnel. Getting to know the teachers of individual PACERS came about more slowly and was part of the process of "getting to know the school" and becoming acquainted with the PACER'S "life space."

#### *Assessing the Climate*

The principal was seen as the key person in his school, the "climate" of each school being set by him. Development of a special service to and for children depends on the interpersonal relationship between the principal and the special service person. A poor relationship between special service personnel and principal does not negate rendering a service to a school; however, it can and often does dilute effectiveness. Therefore, in initiating work in the schools, primary effort was directed toward getting to know the principal.

The school secretary is in a unique position. Often, it is she who projects the principal's attitude. She is also exposed to children's behavior and parental attitudes not seen by others.

*Upon arriving at school to pick up her young first grade son who had been sent to the "quiet room" (nurse's office) because of repeated disruptive behavior in the classroom, one irate mother angrily blasted the school and berated the teacher for mistreating her "baby" boy. Her audience was the school secretary and her "baby" boy, whom she cuddled affectionately. Mother was more composed by the time she saw the principal and apologetic for her outburst. Nevertheless, one could better understand the frequently disruptive behavior displayed by her son in the classroom.*

### *Re-clarification of Services*

Clarification of why specific children had been selected for the project, while others had not, was a number "one" problem at first.

Frequently, judgment was based on the degree to which observed behavior created a classroom management problem. The aggressive child who acted out his feelings, resulting in disruptive behavior, was readily accepted as one needing help - in sharp contrast to the shy, quiet, withdrawn child who did not create any ripples.

*V - a third grader, was such a child - timid, painfully shy, "so good, so quiet, one of the best behaved students" according to teacher evaluation.*

*She was easily overlooked because of her quiet, shy, timid manner but eventually she attracted the attention of the social worker because her withdrawn behavior was so extreme. Learning was not a primary problem, but V had much difficulty relating to her peer group. On the playground she remained aloof and alone or sought out the youngest children. She had many vague physical complaints, was considered "delicate" by her teacher, had a high absentee record.*

*Her teacher identified with V, saw her as "just like I was, as a child." The teacher tended to reinforce passivity in the shy child because of her low tolerance for "noisy children who can't sit still and be quiet."*

*Between 3rd and 4th grade, V participated in the PACE summer activity program. Her counselor considered her the child in the group most in need of special help. At the end of four weeks, she was evaluated as having made the most progress.*

*V's 4th grade teacher was sensitive to individual differences and aware of emotional needs in children. A collaborative relationship between her and the social worker continued throughout the school year. V sustained gains made during the summer and continued to show improvement. She now relates more easily to peers, works well with classmates in team projects, is rarely sick and seldom absent from school. Learning was not a primary problem, but improvement is noted in this area, also.*

*A supportive relationship was maintained with the family throughout involvement with V, but the school was the primary change agent in this case.*

#### *Fourth Graders Provide a "Toe-hold"*

For the most part, PACERS were from the early primary grades. In some instances, fourth graders who met the criteria for being PACERS were included so that the social worker could get a "toe hold" in the school.

Without exception, these older children had been identified by the schools as needing help much earlier. Adequate help and consistency in follow-through at school and at home had not been possible and the problems had increased each year.

*Q - Q met the criteria for selection as a PACER, but was not included initially because he was beyond the 3rd grade. Upon special request by the principal, who described him as "needing help more than anybody else in the school," he was included as a part of the active caseload.*

*Deviant behavior noticed in first grade, characterized by low frustration level, nervousness, lack of self-control, mannerisms, clownishness, was accentuated each year, with a concomitant drop in scholastic achievement - despite the fact that he was considered "bright with excellent potential." Parents knew of their son's "failure to live up to his potential" through parent-teacher conferences held bi-annually. Through these conferences, the school had accumulated knowledge about intra-familial relationships which pointed to Q as the family scapegoat. Each year, the family became more firm in its accusation that the school was all to blame for Q's failures. When the case was referred to the PACE social worker, a stalemate existed between school and family.*

*At the end of two years, communication between the school and family has improved. However, there were no perceptible changes in Q's behavior, achievement, or peer relationships.*

From the beginning PACE social workers were encouraged to make use of SELF in the most productive way - to be creative and innovative in the intervention process. Within the framework of

the research design, limitations of service were self-imposed and not superimposed. This leverage made it possible for us to develop the unique role of the PACE social worker out of the traditional role of the case worker.

### TOOLS OF THE TRADE

A social worker's effectiveness within a school was largely dependent on the ability to recognize similarities among schools, as well as differences, and to work with them.

Availability, accessibility, flexibility and visibility were primary techniques aimed at minimizing crisis situations. Although it would have been helpful to have had a designated meeting place assigned in a school, it was not essential. We accepted whatever space was available when we needed it.

Permanent assignment to particular schools was more important than a specific meeting place.

Special effort was made to insure that ongoing meetings were held with the principal to keep him fully informed at all times about work with individual children, teachers, parents, and others concerned with a particular PACER.

Teacher conferences were essential. Sometimes formally planned, sometimes informal, they took place whenever and wherever the teacher and social worker happened to meet, i.e. the corridor, playground, over coffee, lunch time. Many times these "on-the-fly" meetings were much more productive than scheduled ones in meeting the teacher's need at a particularly crucial time.

Teachers responded to meeting with the social worker in different ways. Some moved easily into inter-professional collaboration, others remained superficially polite and friendly. We tried to understand and accept the way in which teachers worked and to begin working with those who were ready and willing.

Direct observation of a PACER in his life space, involving both classroom and school environments, was important so that the social worker could become aware of his actions and reactions to stress-producing situations. Teacher reactions to this varied. The social worker sought to minimize anxiety which she recognized might be aroused by her presence in the classroom - by joining in classroom activities when possible.

Insights about a child's behavior gleaned from periods of direct observation, coupled with knowledge about the child's home and community environment were of inestimable value in helping the social worker interpret to teachers that behavior is indeed caused.

A teacher's interest in learning about underlying causes for behavior inevitably resulted in changes in a child's school behavior, sometimes dramatic changes, almost always changes for the better.

*B - In kindergarten, B was a solemn child who always seemed alone in the crowd. She did not play with other children and would fight when they tried to join in her solitary activities. On the playground, she was passive - a spectator, never an active participant and she resisted all efforts by the teacher to engage her in activities.*

*First grade was beset with many frustrations and failures. The teacher was annoyed by B's stealing, lying, crying, sullen behavior and disciplined her by shame, intimidation, isolation and rejection. B responded by total indifference to what went on in the classroom. Keeping her after school was a regular routine, despite the fact that it made no appreciable difference in classroom behavior or learning.*

*When it was eventually possible to break through the wall of resistance initially shown by parents to both school and social worker, the cause for much of B's behavior was understood. Also, it became increasingly clear that the teacher's method of coping with B was successfully reinforcing the very behavior she wanted to correct.*

*Happily, the teacher was able to change her attitude about B's behavior as she became more informed about the home situation. And as she became increasingly able to discipline with understanding and sympathy, B became less constricted, more willing to be involved with others, less depressed. By the end of the year, stealing had ceased and B had a "best friend," a giant step for her.*

Demonstrating the role of social worker by doing in contrast to describing proved effective.

*N - N had an acute learning and behavior problem at the beginning of school and his parents arranged for him to be seen weekly in a child guidance clinic. In school, his teacher was excellent for him - understanding and supportive. During the school year, general adjustment in the classroom showed much improvement and N seemed happier. However, he continued to have a learning problem, couldn't finish his work, worked very slowly and frequently came with bits of work to his teacher for approval.*

The teacher was sympathetic with "his problems" and she and N often talked together about them. N was well aware that he could do good work, but wasn't. As the year wore on, with no appreciable change, the teacher expressed concern to the PACE social worker.

The social worker paid a visit to the classroom. The teacher was with a reading group and the rest of the class was working on arithmetic. N was in the arithmetic group. The assignment was on the board - to write out the multiplication table from 1 through 5 - then to work out some problems. Most of the class was well along with the assignment. N was still working on the first two tables - drawing each number meticulously, lining up each table with carefully ruled lines, erasing, recopying.

The social worker was well known to all children in the classroom because of frequent visits and several of them brought their work to her for approval. When N came up several times with bits and pieces, the social worker said that she wanted to see finished work because she knew he could do it. She then paid no further attention to him, but only those with completed assignments. N seemed surprised at first, but began working rapidly at his desk. The social worker let him know she was aware of him, watched him working, nodded approval and maintained an air of expected production. Then the teacher rejoined the arithmetic group, looked over N's work and was surprised to see how much he had done. She praised him warmly - as did the social worker.

Later, the teacher and social worker talked about N's work. N had NEVER accomplished so much! As they talked about what had happened, the teacher recognized that she could really help most by expectation and praise for production and finished work -- that too much sympathetic support of "his problems" could be infantilizing.

#### *Continuity of service to PACER*

The social worker originally assigned to work with a PACER maintained a continuing and ongoing interest and concern in him and his family throughout the two years of the service program.

#### MULTIPLICITY OF ROLE: LISTENER - EDUCATOR - FACILITATOR

Roles emerged to meet new situations as they arose, dependent upon the individual social worker's sensitivity to the need and the individual school's readiness to accept the services we could provide.

## Collaborator

We were guided by the principles:

- 1) the teacher is the key person in a child's school experience;
- 2) the job of the social worker in the school is to provide help to the significant adults so that children can experience success.

*S - At home S was greatly overprotected by an anxious mother who feared mental retardation, despite medical evidence to the contrary. He adjusted poorly to kindergarten, but was promoted to intermediate first grade for the intellectual stimulation the school believed it would provide. Success was not easily attained. First grade was beset with many frustrations and for several weeks a developing school phobia was suspected. On school days, S increasingly complained of feeling sick and suffered abdominal pains and nausea. He was fit and frisky on weekends.*

*A change occurred when this acutely aware mother recognized her son's over-reaction to the teacher's grading system, the use of faces. The teacher used happy, smiling faces to express approval of work, and unhappy, crying faces to express disapproval. Mostly, S collected crying faces and it literally made him sick! "I try," he told his mother, "but I always get THOSE faces." Mother discussed this with the social worker who quickly arranged a 3-way conference between mother, teacher and social worker. The teacher, an experienced person who had used faces for several years to grade children in the early grades, was amazed at S's reaction, a little disbelieving, but agreed to try something else. She accepted the social worker's suggestion that all children be given smiling faces for trying and different color stars for degree of excellence and put it to work immediately. A dramatic change occurred in S's behavior within a few days. School work continued to be messy and immature in appearance, but enthusiasm and interest in school returned, phobic symptoms abated and increased improvement in learning was noted by the teacher.*

*R - R was a bubbling, bouncy little kindergartener - aggressive, demanding and restless. She loved the spotlight - and had devious ways of disrupting class routine to get it. She was the youngest of five children and like her siblings - inclined to misbehave at home and in school to get attention. At home, communication between parents and children was usually harsh criticism over something, spoken in an angry voice.*

*Like her brothers and sisters, R had learned to "tune-out" to talk and was unresponsive to verbal commands from the teacher. A hearing test confirmed normal hearing. Continued efforts by the teacher to cope with R on a verbal level frustrated the teacher and did not change the child's behavior.*

*When the social worker was able to share with the teacher some of the dynamics in the family situation, the teacher recognized that her reaction to R was serving to reinforce, NOT reduce, undesirable behavior. She was willing and able to change her approach - to use less talk, more action, to reward R for good behavior, to ignore much of the other. R may never become "the model student", but by the year's end she showed much improvement.*

### *Coordinator*

*We sought ways to break through communication barriers, bringing together those adults who had a common purpose, in an effort to achieve a common goal.*

*J - J's family long had been a problem to their school. Mother, because she was so unreasonable and critical; the three girls, because they received such questionable care and supervision that their school attendance, attitude and achievement were very poor. The girls did poor work, were defiant to teachers, got into quarrels enroute to and from school. This precipitated neighborhood squabbles as the mother was protective and litigious. J. the youngest girl (age 6) had a possible neurological problem, was hyperactive, inattentive, very difficult to manage in the classroom. Mother was indifferent to medical attention for her and inconsistent in following medical advice for medication. There was a question that the child's hyperactivity might be a reaction to a disturbed home situation rather than to a neurological condition. Under the circumstances, it was difficult to secure a complete medical evaluation, with recommendations.*

*A community conference was organized at the school, with principals, teachers, psychiatric consultant, and representatives of Juvenile Court and Child Welfare Services present. The family problem was evaluated and a joint overall plan was worked out, pending parental cooperation .*

*All of the school material about this family indicated that, though the home environment was questionable, the mother would oppose any attempts to make provisions for the older girls elsewhere. The Juvenile Court already had had some experience with the mother in relation to the two older girls and had not been able to establish neglect. But their brief intervention had brought some order and improvement into the home.*



Mother was so inconvenienced by J's irritability and hyperactivity that she was agreeable now for temporary foster home placement. This would provide opportunity for a medical evaluation of the child in a neutral setting. Child Welfare took responsibility for this placement. Until such time as it could be worked out, the school agreed to place J on a limited day, relieving both teacher and child of some stress. J remained in school until the end of the school year, at which time she was placed in a foster home for the summer, with the definite understanding that she would be returned home to re-enter school in the fall. Meantime, all neurological and psychological evaluations were completed to qualify J for an educationally handicapped class when she re-entered school. The Child Welfare Service and PACE social worker worked together in bringing about the foster home placement smoothly and productively.

### *Consultant*

Direct service was not always most relevant to meet the family needs. Frequently, help to the principal, teacher or other school personnel around a problem related to the child was the preferred way of dealing with a situation. Focus was on creating a climate for the PACER that was conducive to learning. Emphasis was on understanding the child rather than responding to behavior.

The majority of kindergarten and primary grade teachers in one school voluntarily joined a discussion group which was offered by a PACE staff member to aid in focusing on the teachers' common concerns about children's school behavior and classroom adjustment. Eight meetings were held on alternate weeks with topics for discussion established by group members. These included physical aggression, clashes between teacher and child, the socially maladjusted child and the problems of communication between parents and teachers, particularly those related to the parent-teacher conference. The teachers emphasized to the PACE worker that they did not want a discussion group, rather, they preferred meeting with someone who would be able to bring a new perspective to their recurring problems, offering practical information and help, and accepted the PACE worker as an appropriate discussion leader because of their familiarity with consultation service for PACERS in the school.

Dynamics of behavior, cause and effect relationships, and problems of personal interaction were basic to the discussions which were geared, from one meeting to the next, to teachers' expressed interests. In sharing experiences about specific children and their families, they were guided to trace children's responses and reactions to adults and to authority, and they then could identify

many specific influences which create and reinforce negative attitudes and behavior in children. They were encouraged to share their developing insight into their own attitudes, gained better understanding of their discomfort with divergent social values, and openly acknowledged the common anxiety that frequently accompanies parent contacts. They came to recognize their own occasional unrealistic self-expectations and the expectations they held for children and parents. Consciously shared recognition of the broad environmental base of some children's learning or behavior problems and the need for help in the larger social context, i.e., the family and the community, relieved some guilt and anxiety for teachers who felt unsuccessful in coping with disturbed behavior in the school environment. The limitations of school facilities and resources that can aid children's learning and social development were also discussed i.e., exploration of the need for a "quiet room" or an "activity room" with a skilled person supervising and available for the "cooling off" or "talking out" in an atmosphere of some neutrality for children unable to function temporarily in the classroom. Frustrations about the lack of flexibility for helping many children were openly expressed.

The meetings made it possible for the group members to become involved in taking a more realistic and objective view of disturbed functioning of many children. They were able to analyze many of their own reactions to children's provocations and needs, and responded to a supportive leadership. The PACE worker, coming from outside the school, served as a catalytic agent for a planned, semi-formal, professional communication that is not generally available to teachers.

### *Facilitator*

Communication between school and home is essential to the understanding of a child. Through home and school contacts, we were able to function as liaison agents, bridging the two.

### *Direct Services*

We were available during troubled and not-so-troubled times:

- 1) to work directly with a child in school or away from school;
- 2) to offer supportive casework to parents and supportive help to a teacher in a collaborative relationship;
- 3) to prepare parents and/or child for use of community resources if necessary and to interpret their function to teachers.

We believe that ongoing relationships between school and home are needed to develop trust, and that only as trust is developed is there hope for change.

*S - S was a tall, gaunt appearing child who wore a perpetually blank facial expression. Although described as shy and timid at home, at school he was considered fiesty, threatening and aggressive. He repeated kindergarten, adjusted poorly in first grade, was considered for the educable mentally retarded class, but promoted to second grade because of uncooperative parents and borderline intelligence.*

*Second grade was a frustrating experience. S was considered the bottom child in a bottom group by a teacher who was overwhelmed by his difficulty in learning and constant aggressive behavior. Efforts by the school psychologist to work with the parents had been met with resistance and eventually they dropped all contact with him.*

*After spending some time getting to know S in the school setting, the PACE social worker began working with S in a one-to-one relationship outside the classroom, in the school setting, on a weekly basis for a period of six months. The purpose was two-fold:*

- 1. To help S experience success;*
- 2. To gain additional insights for making a prognosis.*

*Slowly, but steadily, he responded to the individual attention and a carry-over was reported in classroom performance and behavior.*

*Although mother cancelled the first three appointments, persistence paid off and eventually a relationship was established with both parents. Deep anxiety and apprehension about their son was evident from the start - as was the hope that avoidance of the problem would make it disappear. As they felt more comfortable about discussing S, the parents became increasingly more concerned about what they could do to help. They cooperated by obtaining medical and neurological evaluations, which helped in establishing a medical diagnosis and the need for special education. The parents finally acceded to a designation of mental retardation and S was placed in a special class after four years of successive failure in school.*

#### *Parent-Educator*

*PACE staff was keenly aware of the inner conflicts many parents suffer because of doubts and uncertainties about the adequacy in carrying out their parenting role.*

*Communication between a parent and kindergarten teacher with whom a PACE social worker was involved led to the development of a kindergarten parents discussion group in one of the schools.*

Late in October, a kindergarten teacher began to express concern to the PACE social worker about questions a few parents were asking. Generally, they did not deal with school problems per se, but rather with child development and child rearing practices. Mothers sought advice in such areas as appropriate discipline, helping children cope with stress, sibling rivalry and family jealousies. This first-year teacher was warm, friendly, sensitive, aware - the kind of person to whom parents might readily turn for help. In trying to meet their needs, however, the teacher recognized her own inadequacies and turned to the social worker for help.

Realizing that many parents of young children have similar concerns, formation of a discussion group for kindergarten parents, to be held at the school, was suggested.

Initial reluctance by the teacher, who expressed lack of confidence in ability to deal with child growth and development problems with parents, turned to enthusiasm when assured of the social worker's support and cooperation. Approval was sought from the school principal, who agreed to the idea if parents wanted such a group. A questionnaire was sent to kindergarten parents and when 17 out of a possible 21 replied in the affirmative, we were off and running.

The first year, one kindergarten class was involved. The next year, three kindergarten classes were actively participating.

Generally, meetings were held in the afternoon, but not always. Some schools held night meetings at the request of parents and to insure father participation. Comments from teachers and parents indicated that both profited from the group experience.

In parent meetings, PACE social workers acted as resource people and facilitators to communication - rather than authorities or "experts" in child rearing practices.

#### BARRIERS TO CHANGE:

We believe that the greatest potential for change exists in the minds of individuals involved in the care of children - whatever their role. We believe that it is within the attitudes of these individuals that the greatest resistance to change exists. Frequently the school's expectations of us was that we were in schools to help children understand the hard, cold reality of school work -- and adjust to it. This, of course, puts the onus on the child to change.

Contrary to school expectation, we attempted to involve school people in helping a child by understanding his behavior and helping him find new ways to cope. This reduces the common tendency to make value judgments. It places the responsibility for helping a child change squarely on the adult.

Some school personnel welcomed our help; some were threatened and seemed to make no real effort to understand what we were trying to do. Resistances were expressed in various kinds of reactions - some defensive, some negativistic, some indifferent.

*When three children in her kindergarten class became eligible as PACERS, Miss D was pleased. She had expressed interest in the PACE project and wanted to be actively involved. On her first job as a professional teacher she missed the opportunity to discuss children in her classroom with someone else and she felt the need for help in meeting parents.*

*Meeting time for this teacher was scheduled by the principal, who arranged all meetings between the social worker and teachers in the school. The conference was set for 11:45, but at noon the principal came to remind the social worker that his teacher would miss lunch if we did not curtail discussion. Miss D was distressed by the interruption, stated that she planned a very light lunch and preferred using the time to talk about children. In light of the principal's attitude, however, she felt compelled to cut short the discussion until another time.*

#### *What Facilitated Our Work*

We looked upon the principal as the key person in his school and crucial to the success of what we were trying to do. A positive, supportive attitude on his part was generally reflected by other staff members in their willingness to cooperate with us, even those who felt less than completely enthusiastic.

The social worker retained identity as a unique professional person with a service to offer and not as a member representing the school administration. The PACE staff member's use of self in developing effective working relationships within the school system facilitated functioning.

Unfettered by pre-conceptions of how the job should be done led to willingness to try using old and familiar skills and techniques in new and different ways.

By not having to devote prime time to chronic problem cases, we had time and energy to offer help to school personnel in looking at behavior in terms of cause not effect.

Psychiatric consultation available to staff - individually and as a group - on a regular, recurring basis was of inestimable value in helping us develop resourcefulness and effective ways of carrying out our assignment.

### CONCLUSIONS

To attempt to evaluate results of our work within the schools is a difficult task at this time. PREVENTION was the goal. CHANGE was the focus. The results of either can only truly be reflected with the passage of time. Some observations can be noted, however.

There is a pressing need for multiple special services with a team-oriented approach within the schools to assist personnel 1) to understand the causes of behavior, and 2) to find more effective methods for meeting the needs of children.

Effective communication within a school can make a real difference in understanding and helping a child. And some member of the team needs to carry major responsibility as a facilitator to communication.

There is need for regular, ongoing, on-the-spot consultation to "put out fires" and to "prevent smoldering fires from breaking into flame."

It seems apparent that teacher training is too limited in areas dealing with human growth and development and the processes of learning and motivation. On the whole, teacher observation of behavior is very accurate but the absence of a frame of reference for interpreting it leads to inability to develop a program to meet needs. School may, therefore, reinforce a child's problems - which may well have originated at home. The need exists for increased sensitivity by teachers to the psychosocial factors in human growth and development.

A child's basic need for accomplishment leads to his feelings of self-worth. If this need is met, the child feels good about himself and develops an "I-can-do-it" attitude. The reverse is true if the need is unmet. The adult caretaker is the key in a child's developing self-concept. At home, it is the parent; at school, it is the teacher. The solution to helping children is found in adult attitudes.

**WE MUST BE WILLING AND ABLE TO CHANGE IF A CHILD IS TO CHANGE!**

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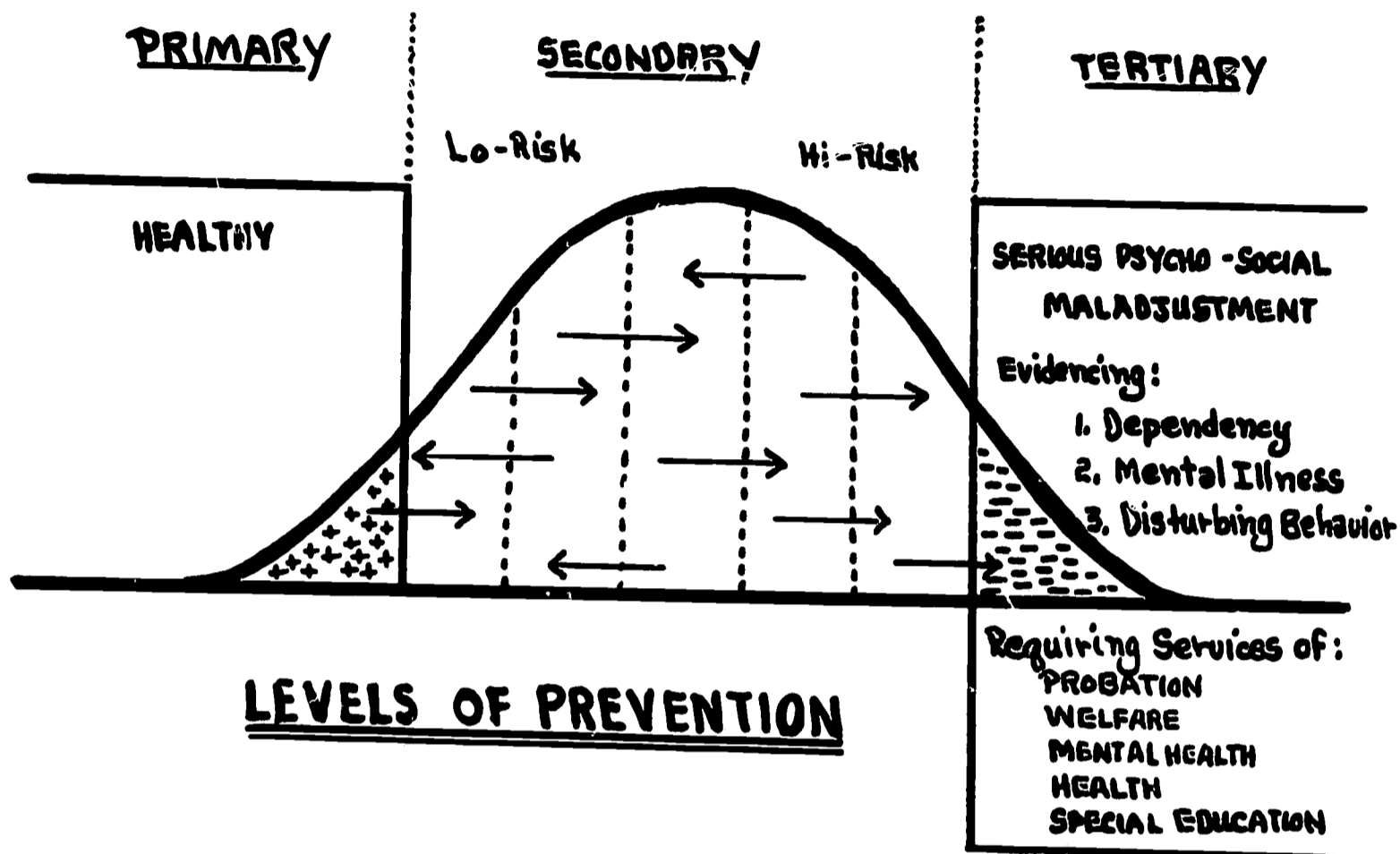
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**PRIMARY PREVENTION** - Even the healthy members of society are vulnerable during their lifetime, in times of stress, e.g., death, illness or accident to a family member, relative or friend, financial crisis, severe disappointment. Primary prevention is aimed at keeping these people healthy and able to cope effectively with problems as they arise.

**SECONDARY PREVENTION** - Secondary prevention deals with the Lo-Risk and Hi-Risk populations. The Hi-Risk group represents a "potential" population, some of whom will require special services, and many will require intermediate kinds of help from teachers, counselors, ministers. The Lo-Risk group are those who are generally considered able to cope with life's contingencies. This group can generally make effective use of friends, relatives, teachers, ministers, and others to help them in time of need.

The PACE I. D. Center program focuses on the Hi-Risk, Lo-Risk and Healthy segments of the population, at the Primary and Secondary prevention levels.

**TERTIARY PREVENTION** - For the most part, existing services are concentrated on that segment of the population who are readily identified because of serious psycho-social maladjustment. These are treatment services - or Tertiary prevention - aimed at helping people improve or keeping them from becoming more of a problem to themselves and to society.



## EARLY INTERVENTION - WITH THE FAMILY

### HOME ENVIRONMENT AND PARENTAL RELATIONSHIPS ARE OF CRUCIAL IMPORTANCE

From Biblical times to the Space Age, from the ancient prophets and philosophers to our present day psychiatrists and pediatricians, the home has been heralded as the foundation of the child's personality and character. Through the ages there has been a gradual and massive accumulation of tenets to instruct parents in the rearing and training of their children. The earliest advice was authoritative indeed and provided parents with succinct patterns of thought and behavior which they could pass on to their children. Life was simple, change was slow, people were more certain of their environment and of each other. Families stayed in their neighborhoods, lived and worked closely together, knew with more certainty what they must do to get along in the world and with each other.

Man's aggressive curiosity developed new inventions which changed and complicated his life style. The automobile and the aeroplane - the telephone and the television - have extended his environment almost beyond his imagination. The venerable institutions of our society are stunned by the changes piling up around them and are struggling to find new equilibriums in this maelstrom of progress. The family, too, is buffeted by change but it still remains the essential core of a child's world. The family still shapes the child's development and colors his beliefs and behavior throughout his life.

There are innumerable studies relating to the process by which the development and the socialization of the child occur; how character and achievement are influenced by different family environments; and how emotional health can be affected by familial interaction. John Bowlby states, "Among the more significant developments of psychiatry during the past quarter of a century has been the steady growth of evidence that the quality of the parental care which a child receives in his earlier years is of vital importance for his future mental health and social adjustment."(1) And more recently, in The Most Probable World, social critic Stewart Chase writes that "A stable environment, whether tribal, peasant - agricultural or technological, must be firmly in place - not for moral reasons, if you please - but simply to shelter, care for and bring to maturity the young of the species. It takes up to 18 years of family stability to accomplish this, in any culture at any time. Trends which are weakening to the institution of the family not only will be reversed by deliberate planning but ultimately will be reversed by blind nature, though they may have to take us back to the Stone Age in the process. The family, normally monogamous, is the one universal human institution that cannot be tampered with indefinitely."(2)

But there are those who say that the family unit is obsolete and certainly statistics relating to illegitimacy, divorce and abandonment indicate that this hallowed house now rests on shifting sands. Couples who try to repeat their traditional family pattern feel as if they are traveling by horseless-carriage in the Jet Age. In our fragmenting society

the modern family is finding it hard to stay together and to see things whole. Parents are confused by the tumbling value system and the welter of media swirling on all sides. They find it difficult to steady themselves and to sort out what concepts are important to pass on to their children. They are finding it increasingly difficult to set parental patterns for their children to imitate, to teach their children how to handle themselves in a turbulent, violent environment, and to inspire in them a self-motivated desire to achieve and produce in our affluent society. Parental fears and frustrations are reflected in their children with the result that the social adjustment and school achievement of many children are impaired across the social strata.

### NEEDED - AN INTERVENING AGENT WITH SPECIAL SKILLS

Since the home is the vital center of a child's early environment, it is imperative that society lend its support to balance and bolster the foundation of the family. The PACE social worker made use of the process of social casework to improve the climate and communication of the child's family environment in an effort to modify his behavior and to prevent further pathology.

It is very difficult to define the complex process of casework but it is relatively simple to summarize the traditional goals of casework: *to help people with problems*. The casework goal is to develop a productive relationship with all of the forces in the child's environment, to define together a framework of mutual endeavor, and to serve as a catalyst in assisting the family to improve their ability to handle problems. The most important instrument of the casework process is the Interview, channelled to facilitate communication and to build a relationship and an area of trust and cooperation.

### THE SCHOOL - A BRIDGE TO HOME

#### *Becoming Acquainted with PACER and School*

After the initial introduction to the school - principal and teacher - the workers began to assemble a "School Study" on each PACER in preparation for work with the school and the family.

When the identified PACER was considered a problem to the school, there was little question but that the worker could contact the family immediately. But when principal and teacher were resistive to establishing home contacts, the social worker continued her observation of the child and waited until there was an opportune time to intervene.

#### *Initial Resistance - an Expected Barrier*

In the beginning, there were few who openly would challenge a project that was proposed to help children. When the PACE social workers fanned

out into their respective schools, their receptions were varied. The school wanted help with their "problem" children - but beamed in on their wavelength. Projection is always the prime defense in any difficult situation. The school seemed quick to hold the home and the child responsible for the problems, and reluctant to become aware and involved in their part of the change process.

It was a new concept for many school personnel that the adult caretaker would be considered as the essential change agent with a responsibility for a modification in their own attitude and behavior to effect a difference in the child.

An integral part of our service was to bring the school and family closer together in a cooperative endeavor by helping them to better understand each other.

If there had been a prescribed format outlining the process by which the schools introduced the social worker to the PACE families, there are those who would have felt more comfortable. But here again we "free associated" with the school system to find our avenue of approach. The important part of this phase of the intervention process was a clarification of role functions and responsibilities among school personnel prior to any intervention by the social worker with the family.

#### FAMILY INTERVENTION - THE APPROACH

The PACE worker's approach to families was highly flexible, determined by the need of the child, the philosophy and pressure of the school, and the attitude and readiness of the parents. And in the end, each worker tried to speak directly to the family in the voice and at the moment to be best heard.

##### *The Time and Place*

The PACE worker was relatively free in her ability to schedule herself to the needs and wishes of the parents. The meeting might be in the family home, parent's place of employment, in the park, library, bar or cafe - wherever parents felt free to talk.

Recognizing the importance of the child's total family to the child, the worker aimed to see all of the important members of his immediate home environment. It was a sensing of the situation, an evaluation of the need and the environment, an interest and commitment on the part of the parent - that established the threshold and degree of interaction.

##### *Building a Relationship*

The professional social worker proceeds cautiously in building a relationship and waits patiently for some indications of change. But when

the school has the problem and reaches out to interest and include the parent, the set is different and so must be the initial approach. There is a distinct difference here in the degree to which a parent will become involved and the commitment he is willing to make toward any change in attitude or behavior that might disturb the family pattern.

We had to sell our frame of reference - our perception of the problem and our services. We needed to describe the school evaluation of their child that had made him eligible for the services of our project.

What we tried to bring out and to discuss together was the way parents saw and felt about the child, the PACE project, their child's school problem and, even more importantly, how they felt as a family and as parents about their child. We tried to establish at once a recognition and acceptance of true feelings and to begin to build a relationship of mutual trust and respect so that we could proceed to explore - at various levels - the problem, the need, the interest in involvement, and the possible alternatives to consider in bringing about change.

### *Mutual Trust - a Basis for Change*

The sanctity of the home and the privacy of the familial relationship always has been a treasured value in our American culture. Even when parents recognize and seek help for a problem, they always have ambiguous and anxious emotions as they approach the source of help. In all helping relationships, it is necessary to be aware of this initial resistance - these fears - and to deal honestly with them in working toward a relationship of trust and cooperation. Early in the relationship the social workers tried to explore the negative ideas and to facilitate the expression of negative feelings so that they could proceed more harmoniously toward understanding and problem-solving. A discussion is helpful only to the degree that two minds have spoken and both participants feel they understand and are understood. There must be a real communication of thought and feeling if there is to be mutual trust.

How was this accomplished? First, by understanding and accepting the fact that it was quite natural that there should be these negative feelings - this suspicion, this resentment, this fear. And second, by working to help the parent verbalize and understand these feelings.

Often when expressed feelings were heard by an understanding and supportive listener, the fear and hostility drained off, leading to a more open and respectful partnership. And so, caseworkers might be called "professional listeners," drawing upon the arts and skills of their professional practice in developing creative conversations that could be truly helpful.

The primary task in a good interview is to enable the person to talk about his true feelings. The social workers encouraged parents to talk freely - reflected back and clarified what they heard, assuaged guilt, relieved anxiety and slowly paved the road to trust and cooperative

endeavor. It took time for the "friendly intruder" to become the "trusted helper." Indeed, sometimes, the parent never opened the door to a relationship, never became involved.

Other parents were willing to communicate but unable to see that their child had a school problem, perhaps hoping that, if they ignored the problem, it would melt away. The workers very gradually chipped away at the resistance of these parents, working to build a bridge of mutual understanding and acceptance of the problem. It was important here to recognize the level of the parents' ability and willingness to involve themselves in a change process. They did not recognize the real problem, and had not made a request for help or a commitment for introspective involvement and change. How did they see the child's behavior? What did this behavior mean to them? What need did it serve, to the family as a unit and to the individual parent? As workers and parents were able to move toward each other, to talk together and to share - people, problems and pressures took on new meaning - and sometimes there were shifts in the family pattern that made a significant difference to the child. What PACE workers tried to do, each in his own professional style, was to secure the degree of parental interest and involvement that was appropriate to the child's problem and need, keeping in mind that family equilibrium is a delicate balance and that parents, as well as children, have problems and needs which are maintained within the balance. Each family and each child has its own story.

### THE FAMILIES

The home is the most important setting for providing for the physical and psychological needs of the young child, to insure his physical and emotional development. When these needs are not properly met - are not satisfied - the child fails to develop normally and is not able to cope with the expectations he encounters as he leaves his home to take his place in school and in the larger society. When this breakdown of need satisfaction occurs, when basic physical and emotional needs are frustrated, the child reflects his tension by behaving in ways that often impede his ability to adjust to new situations and to learn. Those who would help, then, have the task of understanding the child's behavior in order to improve his opportunities for successful living. To do this, we must understand the climate and equilibrium of the child's family.

Most of our PACER families represented a cross-section of the average suburban family - young parents interested in their children and engrossed in supporting their homes, subject to all the modern stresses, anxious, concerned, coping as best they could to maintain status and to care for their children. It was only when we became familiar with their problems that we learned that a significant proportion was struggling with difficult problems that were upsetting to both the parents and the children.

### *Low Risk Children*

It is almost a colloquialism to say "Every family has its ups and downs" and by the same token, every child goes through periods when he may be a problem to himself and to others. The child may become temporarily blocked in his intellectual and emotional development, react with behavior that symbolizes his distress, and begin to fail to cope with his social and school environment. This is the child for whom early intervention is of crucial importance. If the child's distress signals are properly comprehended he can be given appropriate understanding and help before problems become crystallized. If parents can be helped to meet his special needs more effectively, he can then move forward more productively.

The PACE I. D. Center has described the "Low Risk Child" as presenting problems that are not so disorganizing or deteriorating as those of more acutely or chronically disturbed children. Although their behavior may be less upsetting, it is important that they be recognized and helped before they become more fixed in their distress, and, therefore, unable to realize their full potential, academically or socially.

What are some of the characteristics of this "Low Risk" group?

1. They are often physically and emotionally immature and their coordination poor.
2. They have poor self-image.
3. They may have feelings of inadequacy and so are anxious and depressed.

### *Low Risk Parents*

The parents of these Low Risk children can be any of the "normal" citizens in the community. For the most part, they handle their family responsibilities quite adequately, but, as is normal, react to stress in ways which may be disturbing to their children. These parents want to resolve the problems and are capable of bringing about some change.

Our society is becoming more complicated and more demands are made of the family than ever before. Our society is highly mobile and these young couples often move from their home communities and do not have the support of their own family group. These young parents have not had much life experience. They often feel anxious and insecure. They may feel lonely because their social relationships are so often transient and meaningless. They often pressure themselves to succeed on their own. They sometimes lose their traditional, meaningful values and take on new values that leave them uncertain as to what is or is not important. Low-risk parents often feel anxious and depressed and may try to satisfy some of their own needs through their children.

These parents:

1. often are unprepared for their parenting role, are unable to meet the social and economic expectations put upon them, feel inadequate and frightened;
2. may feel confused by their problems, are unaware of their own feelings, and just don't know what to do;
3. may need to succeed through their children and so expect excessive achievement and conformity from them;
4. may need to over-control their children so do not encourage their children's growth and independence;
5. may need to over protect and overindulge the child and thus do not foster effective impulse control and emotional growth.

*"You can't do anything with those people."*

*J - J attended school where the principal and teachers knew by "sight" and "reputation" most of the parents. It was a conventional community and whatever went on was of interest and speculation to the school. J's parents gave them plenty to talk about. The father rode a motorcycle, wore shaggy hair and a beard. The mother coiffed and costumed herself in an unusual manner. The parents were "easy going," intelligent and artistic, did not accept the pressures and value system of THE SYSTEM. The father worked and supported the family. Their home was casual, pleasant and family relationships were affectionate and congenial. But the children didn't care to work hard in school and the parents didn't push them to accomplish.*

*The school perceived the parents as "irresponsible Hippies," the "lackadaisical" children to be under the influence of drugs; "all kinds of things" going on in the home. The parents became angry at the school for pressuring their children. Each thought the worse of the other. Misunderstanding was beginning to crystallize into antagonism. The social worker had several talks with both principal and parents, explaining each to the other, emphasizing and interpreting their good points and strengths, encouraging parents to arrange an appointment with the principal. This they did, and later they came to Home Room Day eating ice cream cones. A congenial and cooperative spark was struck between the home and school and the hostility melted away, even though the mutual stereotyping may have remained.*

### *Casework with Low Risk Families*

The "average" family under stress usually does not request or require intensive service. What is needed and helpful to these families is some slight modification of family environment - this may take the form of increasing the awareness of parental responsibility, opening up better family communication, developing more understanding and acceptance of feelings, clarifying and establishing realistic goals. A brief but appropriate intervention may shift a frustrating situation to a satisfying home environment. The family dynamics are not significantly changed but they are less abrasive and more conducive to family harmony and child development.

Initially, a few discussions with the parents around the problem area, always focusing on the child and his needs provided more adequate understanding and improved behavior management on the part of both home and school. When there was a need for assistance from community resources and their use was suggested, the parents usually were able to take advantage of these services.

*"Has anyone seen my father?"*

*W - W, a kindergartener, was a stolid, uncommunicative boy, withdrawn and unhappy. He could not seem to participate in any kindergarten activities, his mother was very upset and blamed father and teacher for his poor progress. Mother considered W to be backward. She babied and protected him. Mother had had a most unhappy relationship with her own father, was depressed, and was hostile toward her husband. She saw her husband as a very inadequate man and a poor father to the children. Father was interested in his children and responsible, but he was totally intimidated and confused by mother's hostility and did not know how to take his place in the family.*

*Mother could not tolerate the social worker looking at her part in W's problem, but she was willing that the worker meet with the father to discuss and define W's needs for masculine identity and independence. Through these discussions, father began to understand mother's depression and was able to set limits for her and to be more assertive and positive as the family head. Father was encouraged to take a very active role with his children. There was more communication and sharing between them, particularly with the father who began planning weekend excursions and began to define and expect various family responsibilities from them. As a first grader, W joined the Boys' Club.*



"We treat them both alike."

Mr. and Mrs. C were a young couple, good parents to their two little boys. The boys were less than two years apart, and to simplify the routines of child care, were treated very much alike. They got up and went to bed at the same time, were encouraged to spend most of their time with each other, the parents tried to "treat them just alike" to avoid jealousy. This lack of individualizing each child created problems for them both. The older boy was too dependent, babyish, lacked confidence, did not apply himself in school. The younger boy was aggressive and demanding. Both children were poorly disciplined and did not play well together.

The parents recognized their childrens' immaturity and were interested in discussing how to help them become more mature and independent. The father had always worked at night and on weekends, and this made it difficult for him to spend much time with the family. As the parents became increasingly aware of the father's role in the boys' development, he changed his job to have a schedule which would enable him to spend much more time with them.

The parents began to differentiate the boys in ways appropriate to their ages and capabilities. The older was given little extra privileges as to bedtime and allowance. They each were given some individual parental attention and some daily household responsibilities. The parents asked for literature regarding child development and special problems and we discussed this together. Several times, the mother asked for a personal interview to discuss specific problems.

"We hate to see him grow up."

T, a second grader, was a bright boy but he was so impulsive and inattentive that he was a constant problem in the classroom. The mother always took his part, claiming the teachers didn't understand the natural needs of her "average American boy." This was a stable and responsible family, affectionate and close. T had three older siblings, all late teenagers, and he had been born so late "because we just had to have another baby." T was treated as a toy by the whole family - pampered and indulged. The parents could discuss their difficulties with a source apart from the school - and they could intellectualize about the problem and a plan. Their own emotional gratifications made it difficult for them to begin to require more mature behavior from T.

However, the school was supported to take a firm stand with this obstreperous little boy and his indulgent mother, defining what was expected of him and being consistent in the "follow through" of classroom misbehavior. Mother was encouraged to ob-

serve T's misbehavior and to take some responsibilities for his school performance. He was sent home once - to mother's chagrin and anger. But this seemed to crystallize for the family that the school meant business and T began to have a bit more respect for school authority.

"Nobody's going to knock my kids around."

The Z family had lived in the same neighborhood for many years and their children had progressed through the same elementary, intermediate and high schools. The home was comfortable, the family affectionate, the children attractive and intelligent. But they had not done well scholastically and all were unpopular with their teachers and their classmates because they were so lazy and quarrelsome. The mother was a warm person, close to her children, protective of them. She was a minority person, hostile to society, quickly projected all responsibility for her children's difficulties upon the school. She was convinced the teachers "had it in" for her children and always excused and defended their misdemeanors. It was impossible to involve these children in change because mother did not consider that they had a problem.

"He's doing the best he can."

E, age 7, was considered a "funny kid" - passive, withdrawn, shy in the classroom but aggressive and "sneaky" on the playground. His home was stable and responsible and his parents had a loving and supportive relationship with their children. They were distressed at E's poor school achievement and adjustment because he presented no problem to them and seemed so happy around home. This child was slow in academic areas - but he excelled in athletics. When he felt pressured to learn beyond his achievement level, he withdrew from competition and used various subterfuges to hide his scholastic inadequacies.

Group tests indicated that E had limited intellectual capacity. He was slow. When the teachers and parents learned that E was limited in certain areas, they were able to relax their expectations and pressures as to scholastic performance and to stimulate and encourage him in areas where he could achieve and succeed. His interest in sports was encouraged and opportunities were made to provide special grouping and remedial work for him. He joined the Boys' Club and spent much time after school in very active play rather than in the futile make-up work previously scheduled.

*"As long as they stay out of trouble."*

*Since kindergarten P, aged 8, had been unmotivated and uninterested in learning. She was friendly, enjoyed her classmates, was not a behavior problem. But she disliked to work, was sloppy, careless, inattentive, professed not to care if she learned to read and write. Her teachers couldn't interest or challenge her, she remained pleasantly passive, her achievement was very low even though she was repeating second grade.*

*The parents worked long hours to support their children. The father was a periodic drinker and the mother devoted much time helping him at work and attempting to curb his drinking. They had little time or energy to spend with their children.*

*P reflected her parents' involvement in their own concerns, their lack of awareness of their children's intellectual and emotional development, their disinterest in school success. They loved and were affectionate with their children but expected little from them as to personal responsibility and learning achievement. The children were not troublesome but they were disinterested in anything except their own pleasures. Though intelligent, they all were poor achievers.*

*During several interviews with the parents, the social worker spelled out the school's concern with the children's lack of interest and success. The parents pleasantly and politely agreed it would be nice if P worked a little - but nothing changed. Then father dived into a drinking bout and mother talked with the worker about his dependency and need to lean on her, and of her struggles to cope with the problem and maintain family balance. She was aware of some of the dynamics involved, of her own part in the problem, but neither parent wanted to have professional help. Mother shepherded the family through the storm until father pulled out of the spree. During this time, mother seemed to get support from our talks together and my recognition of how hard it was for her to hold the family together. We talked about ways parents could help their children to become more mature, to be able to cope with their world, and to acquire good work and study habits.*

*In addition, the social worker had six sessions with P at school. We talked about what she liked and didn't like about school, favorite subjects, friends, and activities. We played games together - guessing, counting, puzzles - and read together. P craved attention, always came on time, and was dressed up special. She was enthusiastic about the games and reading; liked the suggestion that learning was a game that she could play with herself and with others. Almost at the end of our sessions together, she spoke of how ashamed she was to have failed to pass, of how dumb she felt and of how afraid she was of failing again. This was shared with the teacher, who talked with and reassured her.*

The school began to speak much more positively of the children. They really were more interested and productive. And for the first time, mother came to parent conferences and to Open House. There was minimal involvement here - but there was definite change.

"We understand each other now."

J, a kindergarten-age, petite Latin-American girl, was difficult to manage, negative about instructions and direction, frequently in difficulties with other children. She was domineering, always trying to be first, constantly in motion, often over-reacting to activities, or pouting when things did not suit her. She had frequent asthmatic attacks. She expressed dislike for her three-year old brother, and worried about her parents who "yelled at her."

The kindergarten teacher was helped to recognize the child's anxieties and tensions, and could relate the aggressiveness to a fear of criticism, or punishment, or failure. As the teacher used more positive ways to approach J, the child quickly responded to approval, acceptance, and encouragement and much of the negative behavior subsided. J participated in the summer activity program, enjoyed herself, but was easily upset by the disorder and disruption by other children.

In the first grade the same patterns reappeared with the new teacher finding her discipline ineffective. Again, with interpretation and support from the PACE worker, the teacher increased her positive responses to this child, working toward developing a better communication between J and herself. As J sensed interest and support, she settled into a more comfortable classroom relationship, became more cooperative and productive, more friendly with other children. She still talked about how her father lost his temper, and she often expressed frustration and anxiety about her inability to control her younger brother.

The PACE worker's contact with the parents quickly brought out a picture of an intelligent, sensitive, attractive, but immature young couple with high personal standards, strong family ties in their native lands. Both felt lost in the community. The father, disillusioned and angry at his circumstances and demeaning social position, worked some evenings and took college courses at night, leaving his young wife along almost every evening in a turbulent ghetto neighborhood frequently visited by the police. J's mother was frightened, lonely, angry, and disappointed at being depreciated by her husband, and being left in such a difficult position. She had used little J as the outlet for her anger, and delegated to her much responsibility for care and supervision of the younger and obstreperous brother.

*The lid came off at one crucial evening home visit by the PACE worker, with both parents expressing their anger and frustration, with each other, the community, society, the school. The marital conflict erupted and opened the way for constructive discussion and action. The parents eventually came to recognize the burden placed on J, each saw some of the resentments of the other parent, and better communication developed between them. Over a period of months the mother developed new channels for her own activities (sewing class for herself, nursery school for the four-year old boy with her own parent-observation participation, driving lessons to re-establish the mother's shaken confidence in her driving ability). The father gained new perspective on the family's needs and clarified his own long-term goals for dental training. He mobilized himself toward getting out of the difficult neighborhood, received enthusiastic cooperation from his wife. By the end of the year, the family had painted and sold their home, moved temporarily into a pleasant neighborhood and completed plans to move to the father's native country where his family was in a position to help him complete his professional training and offer the young family emotional support that this couple appeared to be able to use appropriately.*

*Little J, relieved of excessive responsibility, was able to work well in class, was interested and productive. She was happy with the harmonious communication that developed between her parents and between the teacher and her parents. She was especially pleased when her father took a day off from work to join his wife in the parent-teacher conference. The strengths in this family unit permitted rapid re-establishment of effective family functioning when the PACEworker's intervention offered support during the process of solving their temporary communication breakdown.*

### **High Risk Children**

It is imperative that the Low Risk Child be helped before his problems become so acute and chronic that he becomes a High Risk child - a child who has severe adjustment and learning problems. The general characteristics of the High Risk child are:

1. physical handicap such as neurological impairment, malnutrition, severe illness or accident.
2. behavior and/or learning problems due to severe emotional disturbance, a character disorder or an incipient psychotic condition.
3. reaction to severe emotional stress due to cultural disadvantages, crisis situation, or disorganized and deteriorating home environment.

The High Risk child may be unable to learn, to adjust, or to cope with the severe stresses he encounters. He may already be experiencing the traumas or futility of acute or chronic family problems and reflecting these at school.

### *High Risk Parents*

For some parents, the registration of their first child in school is like the opening of Pandora's Box. Up to this time, the family has been self-contained, yet they have managed their affairs in their own way, and the community has not been aware of their problems as parents. But now, as the first child enters school, it becomes obvious that he is not able to manage this next step and the parents are faced with a new situation. This can be a very frightening experience, particularly if the parents have many problems of their own. The family equilibrium be so shakey that the least stress precipitates a family crisis. These are the young families that may - as their problems accumulate - become the acute or chronic cases known to one or more community agencies. These families include the High Risk parents of the High Risk children. These families and their children very soon become known to the school because of the severity of the child's behavior and learning problems.

The High Risk family, which may consist of both parents or a single parent, presents a real problem to the community because the parents themselves have so many unmet needs that they cannot offer the child a secure and satisfying home environment. Very active intervention is necessary to prevent the High Risk families from becoming the "Hard Core Families," so frustrating and expensive to the community because of the multiplicity of their problems.

Frequently, for the child, the school becomes his only satisfying and stable environment. What are some of the characteristics of these severely disturbed families?

Immaturity: One or both parents may be so psychologically immature and inadequate that they are unable to assume adult responsibilities. They are dependent, irresponsible, impulsive, unstable, unpredictable. They are unable to set consistent limits or to be good identification models for their children.

Emotionally Disturbed: One or more of the parents may be so emotionally disturbed that he is unable to provide any proper and consistent care for his child.

Acting Out: One or both parents may present problems of addiction, criminality, sexual deviation, child abuse. They may become a disturbing force in the community and if active psychological treatment is not available, their difficulties progress until hospitalization or imprisonment may be necessary.

## *Casework with High Risk Families*

High Risk families usually present recurring problems to the school, which often expects the worker to transform the situation with her professional magic. It often is difficult to motivate these families toward change and the necessary community resources frequently are inadequate to meet their needs. Very often there is a lack of awareness or denial of problems. The social worker needs to be aggressive and imaginative in trying to work out some of the problems presented by High Risk families.

It is not easy to involve these parents because they have become so enured to their situation. They have been hurt; are suspicious and relationships are quickly terminated. They have worked out their own particular equilibrium to their situation and the threat of change is very frightening. They are struggling to control deep feelings of inadequacy, hostility, guilt or depression, and a slight provocation of these emotions can be overwhelming. They are so emersed in their own needs and hang-ups that they find it almost impossible to involve themselves in a consistent resolution of their problems.

The caseworker needs to reach out toward them and to take more responsibility in helping them begin to obtain the help they so desperately need. It is important to make an early diagnosis and assessment of problems, to be able to proceed slowly and carefully, trying to communicate with the parents in terms they can understand and accept. It is also important to keep focused on the child and his immediate needs rather than to get submerged in the global family problem. For these families who have so many problems and so little ego strength, it is necessary to turn to the school and to community agencies for active assistance. It is these outside agencies that may provide the substance, structure, and stability necessary to bring some equilibrium into the home. It is possible to improve the communication and cooperation between these distressed families and the community agencies if the worker interprets and prepares them for each other. Every small success is a significant accomplishment.

*The following vignettes describe PACERS from potential or already "High Risk" families:*

*G - G, a kindergartener and the oldest of four, was described as rough, impulsive, aggressive, and clumsy. He used infantile language and was difficult to understand. He was considered as having strong potential for behavior and learning difficulties inasmuch as some of his older relations were known as low achievers, disorganized, disruptive, and hostile in school. The mother was not active at school, and was regarded as "possibly retarded." The father was considered "very immature." He expressed concern about his son, asked the teacher's advice and opinions. He reported that G had never talked intelligibly, had been seen by several doctors and had received speech therapy before kindergarten. The father was puzzled, defensive and anxious about G's school performance.*

The teacher's relationship with G was emotionally supportive, but expectations were not high. Containment of G was the immediate goal, with protection of his fragile self-controls and limited self-confidence. G was responsive and usually aroused a helpful, protective reaction in adults and children until his defensive impulses brought him into flashes of combat. Primitive, infantile reactions were frequently observed, and often G could not complete average kindergarten tasks, but his attempts were recognized and encouraged by the teacher.

G attended the PACE summer activity program but frequently became disorganized and destructive unless sustained by a one-to-one relationship with an adult. G's parents were eager to give him all advantages, and responded to invitations to PACER parent meetings. The mother gradually came to react positively to interest expressed in her and her participation in family discussions. Language difficulty had been a basic handicap in her communication with the school, along with her passive assent to the cultural pattern of male domination in family affairs. A public health nurse had given family planning services for about three years, gradually gaining the timid mother's confidence. The mother felt that her early, harsh discipline of G was responsible for his difficulties at school, her guilt being compounded by the father's criticism of her early efforts to control G's hyperactivity.

The kindergarten teacher and the principal tailored a first-grade plan for G, including speech therapy and language classes. However, the plan required too much attention from the teacher and adjustments had to be made to permit more activity for G. At the suggestion of the social worker, a complete pediatric and neurological examination for G was arranged by the parents. Soft signs of neurological impairment were discernible but not definitive, and medication was prescribed to minimize G's disorganization and impulsivity.

The family moved to a new neighborhood to improve their surroundings. G attended the Boys' Club enthusiastically, encountered similar problems in self-management there that he met on the school playground, but he was helped by staff members to utilize the program successfully. By now he was relating well to a skillful first grade teacher and teacher's aide in the new school, who both understood G's efforts toward self-control and his social limitations. Evaluation by the school psychologist resulted in recommendation for G's admission to a small class geared to individualized programming, as G required and depended upon a close, positive relationship with adults. At home G was the leader and model for three younger siblings. He received praise, encouragement, and some pressure from parents' high expectations and the father's identification with him. G's performance was often hampered by parental inconsistencies, too casual routines, and still unrealistic perceptions of G's capabilities.



The parents were able to incorporate some concepts of child development and more consistent patterns of child management in the process of practical planning with them. Efforts were made to involve the mother in a parent-observation nursery school program for a receptive four-year old, and to obtain pediatric attention for an extremely hyperactive, aggressive two-year-old boy, but these attempts were not completely successful. There was some understanding of the needs of the children but the father still retained some suspicion regarding the school's attitude, a feeling that "they" did not always "level" with him, nor did "they" tell him what he needed to know. The PACE worker's efforts were supportive and geared to increasing communication between parents and school.

G was accepted for a small class for educationally handicapped children at the beginning of second grade, and continued on medication. He responded well to intensive classroom help. The parents participated actively in the coordinated, intensive home-school program, and were exposed to additional parent education in this process. They showed growth in their ability to approach the children with more awareness of individual needs as a result of the consistent interest, encouragement, and involvement of community and school. The father's immaturity and the mother's passivity make ongoing involvement essential to sustain a cooperative communication with these parents. All four children in this family could easily become the objects of misunderstanding, hostility, and inappropriate responses from adults if communication with this family is not kept open and clearly understood.

*"Why can't I do what they do?"*

"Fr", age 9 and repeating second grade, was in trouble from the time of his birth. The parents had been married very young and had premature twins - Fe and Fr - within the first year. The early physical condition and development of the twins was hazardous and considerable medical and parental attention was necessary for their survival. From the first, Fe was the stronger twin and in time, he began to develop normally. Fr remained delicate and was plagued with developmental hang-ups requiring regular medical observation. He had a slight heart irregularity, a slight hearing loss, a slight muscular weakness of one eye and a slight speech defect. Both twins were close to the mother, who paid much attention to any problems they might have. Another boy was born when twins were less than two years old, a booming boy who was father's pride and joy. All of the boys were intelligent, but they did not begin to realize their potential because they all were so immature. In addition, the twins were too passive and retiring while their younger brother was too aggressive and competitive.

These were united and responsible parents - very aware of their sons being unable to achieve and adjust in school and they had regular consultations with the social worker - individually and jointly - to understand the family's problems. Father began to spend more time with the boys, giving each individual attention. The parents had been treating them all alike and they began to see and relate to them as individuals with special needs. They tried to respond to the ability of each child and to promote development of independence and responsibility. They began to work with the competitiveness of the boys. The stronger twin and the younger brother began to thrive, to do well in school and with their peers. But Fr was caught in the middle with his real deficiencies and difficulties being compounded by his feelings of inadequacy, jealousy, and anger. He withdrew from the struggle, became even more passive, withdrawn, expressing his emotional misery in explosion in the classroom and on the playground. It seemed that nothing really turned him on - the PACE summer activity program, teacher efforts, all parental attempts in understanding management and involvement seemed fruitless. The neurological and psychological evaluations were completed for Fr to be considered for admission to the class for educationally handicapped, and parents made application to a counselling clinic at the close of the year.

"He's been through so much."

It was evident that Y had problems as soon as he started school. He was observant and alert to everything around him but he refused to involve himself in any of the activities or to interact with the teacher or his classmates. He was serious, suspicious, refused to talk. Y looked and acted like a little old man.

This child was the first born of a very, young couple, already having marital problems. Shortly after his birth, it was evident that he had a very serious medical problem. He spent nearly all of his first three years in the hospital, undergoing painful tests and treatment. The young parents were overwhelmed with anxiety, particularly when hormonal treatment ushered in several physical changes. For a long period, it was questionable that Y would recover. Meantime, a younger sister was born, a beautiful and normal child who presented no problems. After Y returned home, the parents separated and mother went to work, leaving both children with a babysitter. The father and Y had an especially close relationship and so the parents did not let Y know that they were separating and father visited very day. Meanwhile, mother had a boyfriend living in the home who took an interest in the children and was strict with them.

Both mother and father were interested to help Y. They were able to understand how Y had reacted with damaged self-esteem and depression to his medical problem and with confusion and depression

to the parents' separation. With increased understanding of the effect of these traumas, they both were able to be open with Y about their separation and divorce and father continued his interest in Y. Y had a difficult time in first grade as his teacher was not able to devote enough time to him. The mother was aware of this and tried to give support and help at home. She made special provisions during the summer to separate him from his "shining sister" by sending him to a special, ungraded child care center. Then, in the fall, Y went to live with his father and was registered in an ungraded, private school in a new community.

"That dumb kid has got to behave..."

B, age 9, second grade, an intelligent boy, was a continual problem because he was failing academically, was miserably unhappy with his peers, and was disrupting the classroom with his emotional explosions. He was an only child of older parents, born years after their marriage. The parents were rigid and restricted people accustomed to spending their leisure together, drinking heavily. They did not enjoy the boy's companionship, were critical of him and demanded that he conform to very unrealistic expectations as to performance and behavior. B collapsed under this overwhelming burden, refused to learn and to cooperate at school.

Both parents refused to meet and talk with the social worker. They held B totally responsible for all his troubles and placed him under treatment with a child psychiatrist, refusing themselves to be involved in treatment with him. Throughout the year, B's teacher was most understanding of his emotional turmoil and worked with the social worker and psychiatrist to make his school experience as therapeutic as possible. That summer, the parents refused to allow B to attend the PACE summer activity program, instead, sent him to a "military summer camp."

Come fall, the insurance policy which had paid B's psychiatric treatment expired and B's therapy immediately was terminated and parents placed him in a foster home in a distant school district. Here, again, the school warmly rallied around the boy, understanding the school problem as being related to his disturbing family situation and supporting him toward better understanding and acceptance of his parents and better control and use of himself. Then, when he was becoming more comfortable at school, the parents decided to take him home again.

Immediately, B began to repeat the old school patterns. Once more, the school was most sympathetic of him and we had several conferences to plan for a supportive school environment. Together, psychiatrist and social worker met with the principal and teacher to discuss classroom and playground management of B. The parents still refused to be involved with the social worker or the school. But they did not interfere. For B, it was the school that made the difference.

*"We're alright--why don't they leave us alone?"*

*R, age 6, was identified as a child with severe problems within a week after entering kindergarten. He was a handsome, well-developed boy with a tremendous interest and enjoyment of life but he was so immature and impulsive that he created havoc in the classroom. He could not sit still, he could not pay attention and he "tuned out" principal and teacher when they tried to settle him down. He was irrepressibly curious and very mischievous.*

*R was the oldest of four children - all extremely immature. He was the first to go to school and parents wanted him to do well. The father supported the family, the mother took adequate care of their physical needs. The parents loved their children but were not able to help them move ahead in their emotional and social development.*

*The mother had had a meager childhood, was very infantile and narcissistic, could not extend herself to consider her children beyond their basic needs. The father, too, had had a traumatic childhood, was desperately afraid that there might be mental illness in his heritage. The children were treated affectionately and casually but the parents were too impulsive and bent on satisfying their own wishes and needs to guide their children toward growth.*

*When the parents were approached about R's problem, father was angry and aggressive and mother was frightened and passive. Father threatened to sue the school for "not being able to make a little kid mind" and threatened R with being placed for adoption. Mother was more aware, protective, cooperative - but intimidated by father. The home situation was so explosive that there was no handle to "take hold." Father vigorously rejected suggestions toward understanding the behavior and blocked attempts to secure physical, neurological, psychological evaluations or to consider referral to a counselling clinic. There were no protective services available and a conference of community agencies (including school) evaluated that court action was not appropriate. The school was able to maintain a contact because the parents wanted their child in school. But R's anxiety had blossomed until he could not stay in the classroom and was excluded from school. Legally, this boy did not have to be in kindergarten.*

*The parents were certain that R would "grow out of it" and were unwilling to change any of their parenting patterns. They did agree to allow R to attend the summer activity program, expecting that he thus would catch up on what he'd missed in kindergarten and be admitted to the first grade. This was a most enjoyable and helpful experience for him and he made real gains. But when he again entered school, it quickly was apparent that a structured situation still was difficult for him. He repeated kindergarten*

*and the principal and teacher worked hard to help him incorporate some controls and to "catch up." The parents finally were persuaded to consent to neurological and psychological testing, to cooperate with prescribed medication, and R was recommended for placement in an educationally handicapped class. The younger children seem to be headed for similar problems as they begin school. They are so immature that the school must be willing and able to make unusual classroom provisions so that they can have an enriching and supportive school experience, even through they are unable to function at kindergarten level. Here, again, the school makes the difference for these children.*

### Conclusion

There is much concern at the injustice and violence in the world of today. There is such disagreement and disruption among even the most venerable institutions that their function is severely crippled. People are frightened, concerned, bewildered. There is an increasing awareness of the need for change. Who is to do what? How? For whom? Where and when to start?

If we are to build a more humanistic world, we must be aware and concerned for all. We can start with our children. We can begin to reassure each child for his own worth and work to enable him to be and to give his best. Every child has a beginning that includes a variety of experiences to which he responds in his own unique way. The home and the school share the responsibility of nurturing and educating the children of our society. Parents and teachers are the significant adults in every child's life. Can they not begin to communicate and cooperate together toward the fulfillment of his potential as a good human being? If we are concerned for the child, he then will be more able to concern himself with his fellows. The Chinese have a saying: "One generation opens the road upon which another generation travels."

### REFERENCES

1. Bowlby, J. Child Care and the Growth of Love. Baltimore, Maryland: Penguin Books, 1965. p. 13.
2. Chase, S. The Most Probable World. New York: Harper and Row, 1968.

Parents Comment:

*It was of very great assistance to our family. In looking back now I can see how PACE and our social worker showed us the feelings of our child, her own opinion of herself, and then we were more able to find our ways in overcoming the problems. Our social worker opened doors for us to understanding ourselves and our child that we otherwise might never have found. We were unhappy the way our daughter was growing up and just didn't have the knowledge to change. Now, our family can look forward to a life filled with many successful days because we learned how to become well-adjusted adults and can now pave the way for our children. S is doing so much better in school now and I find it hard to believe that just three years ago S never felt the joy of succeeding because now it is an everyday occurrence.*

*We think it has helped us by making us realize that our children had problems we were not aware of and by suggesting new ways in which we could help them overcome these problems.*

*My son, H, seems to be getting along quite well at school, the first time since he started school. I feel PACE has helped him where he is now applying himself more fully - especially the summer program.*

*Helped to bring better understanding between parent and child.*

*As a mother, I knew something was wrong with B's behavior. But the doctor and his first teacher didn't seem to find anything different. I was actually relieved to find that some one else was aware of what that something was. As a result, B is on medication which enables him to perform quite well in a normal classroom. So far he has had no stigma attached to his "differentness." Our social worker is the greatest. I really think my husband accepted the problem so easily because of her.*

*It gave me a much better understanding for my children, as well as for myself. I can see the difference in their school grades which proves your program was helpful. I sincerely hope your agency can continue to help others as it has helped our family.*

*I think its tragic that the taxpayer's money is being spent on programs such as this.*

*In every way to know myself and my children and how to deal with them. It is wonderful to know people care and really want to help - not just talk.*

*It showed me different ways in which to get through to my child.*

*It brought out the fact that my child felt unloved or unwanted and was acting with bad behavior to have attention.*

More Parents Comment:

*C was a very unhappy boy. The PACE social worker helped us to understand our son and his problems. We sure hope the program can be renewed.*

*PACE gave my child a feeling of belonging. No real father at home. He got a lot of someone just caring about how he feels about things.*

*The PACE program in the school was of the most assistance. Taking the learning out of the home and having a special learning program in school, was the most help. The fact that the principal and teacher better understood my son was invaluable.*

*I think it may have helped him in some ways in his first year. It prompted us to consult a neurologist who recommended a tranquilizer for stress situations. I would have done this anyway when he was recommended to the psychologist, though.*

*Mirrored poor behavior habits which were adopted by my child.*

*After the PACE summer program, when L returned to school the following fall, she had such self-confidence in herself that she improved in her school work. Also, she acquired some friends and became a more outgoing and friendly child.*

*Helped very much in English and all other subjects. Also helped me to understand the teacher and her methods because of the language barrier.*

*The most help that came to G was that he finally learned to join and associate with other people. It seemed to me that he began to have more confidence in himself and not to seem so lonely.*

*Helped to provide better communication and improved relations between parents and child. Provided better understanding between the teacher and my son. Our "Social Worker" helped us as parents to become more aware of our own behavior as it relates to our son's behavior and feelings.*

## NOTHING

The night passes by, And still it is dark,  
For inside of me, There is no spark.

Not wanting to face, the day that's come.  
Just wanting to hide, or wanting to run.

Just knowing the day, will be like the last  
With nothing ahead, The same as the past.

Oh! A smile will be different, And the words  
changed.

But still all in all, They mean just the  
same.

The same things to do, the same people  
to see

The ones who pretend, yet really don't  
care about me

The world of the greedy, The world with  
its sin

All crowding around me, And pulling  
me in.

The meaningless days, the nothingless  
night.

Can this be my God given, meaning of  
life.

The End

--- written by a PACER PARENT



## THE SPANISH-SPEAKING COMMUNITY

### Intervention Process in a Subculture

#### GENERAL ORIENTATION TO THE MEXICAN-AMERICAN COMMUNITY

History books generally have overlooked the contributions of the Spanish influence in the United States. Preference has been toward the glorification of the contributions of the Anglo.<sup>1</sup> People of early Spanish or more recent Mexican traditions largely have been ignored and stereotyped. Many times their efforts and achievements have not been chronicled and what is heard is a stereotyped description of their behavioral patterns - to the extent that many of them live out their images.

Census data show that Spanish-speaking Americans constitute the largest minority group in California. The recognition that in 1960, there were twice as many Mexican-Americans in California than Negroes brought about a new public interest in this almost forgotten group. Between 1950 and 1960, the Bureau of Census indicated that an increase in the number of persons with a Spanish surname in California was almost twice the growth of the total population. While the total population was increasing 58.5%, the Spanish surname population increased 88.1%. If this rate of growth has continued through the 1960's, the number of Mexican-Americans soon will exceed twice the 1960 data.<sup>2</sup> Public interest has been heightened further by the now famous "grape strike" and union organizing activities in central California begun in 1965, and by Congressional legislation outlawing the use of Mexican "Braceros." Mexican-Americans, nonetheless, have remained politically impotent and educationally and economically disadvantaged.

The 1967 Racial and Ethnic Study of California Public Schools reported that Mexican-Americans made up 14% of all students enrolled in the South San Francisco Unified School District.<sup>3</sup> They made up 15% of the elementary grade students and 10% of the high school students. In the Fall of 1968, the two elementary schools which served the greatest concentration of the Spanish-speaking had 28.7% and 25.3% children with Spanish surnames. These schools are located in three adjacent census tracts, tending to show a strong tendency toward the ghettoization of Spanish-speaking people. The 1960 Census states that 35% of the city's Spanish surname persons live in one of these three tracts. This particular tract had 60% of the city's unemployed with Spanish surnames; 30% were over age 25 and functionally illiterate; the median schooling was 7.8 years, as compared with 12.1 years for the total city; 6% of this tract had no schooling; and no person in this area held a college degree at the time the survey was taken.<sup>4</sup>

In the past there has been a minimum of local unrest among both the Anglo and Mexican-American communities in South San Francisco, even though it was apparent that the Mexican-American community had special problems in education and employment. More recently, however, there appears to be a rapidly growing awareness of their isolation and an increasing expression of their needs. Social forces and gains attained by Negroes have given impetus to these expressions, and some ensuing action has occurred. Throughout California, Mexican-American youth and young adults are becoming engaged in direct social and political action, e.g., the Third World Movement in California colleges and universities.

## *Education*

An area which dramatically demonstrates the effects of social isolation and discrimination toward Mexican-Americans by the dominant culture is education. Upon entering school, Mexican-American children are faced with adjusting to the discipline of school, to a new language and to a culture foreign to them. Education for Spanish-speaking children in the United States has meant a frustrating and irrelevant exposure to an educational system built upon American middle class values and not geared to meet the learning and socializing needs of a minority group with a different language and with different values. Since it is not prepared for such a task, the school system, with the public's sanction, continues to depress the opportunities of the Mexican-American student. Simultaneously, the educational institution has been serving the nation's economic sector by providing it with an uneducated labor pool that is forced to accept low wages and often poor work conditions. Mexican-Americans, especially in California, have made up a large part of this labor pool. The educational-industrial partnership, until recently, has been difficult, if not impossible, to break through. There is evidence, however, that it is beginning to crumble due to major social changes taking place in many, if not all, of our social institutions.<sup>5</sup> Most of the teachers encountered by these children speak only English and do not understand the cultural values of the children. Thus, these students are often labeled, misunderstood and poorly educated. A disproportionate number in some school districts are placed in lower level ability groups from which many are likely never to rise. Accordingly, their school performance often lives up to the academic expectations held by the school. This factor when arising from or combined with the language barrier can devastate a child's self image and motivation to the point where he is permanently crippled - socially, intellectually and emotionally.<sup>6</sup> It appears that many teachers are neither trained nor able to structure activities for this child, within the school, which will provide him the opportunity for significant scholastic and social success.

Dr. Glen Nimnicht, who has explored ways of teaching minority children, writes: "The primary concern of the teacher is the intellectual development of the child, but the first objective in the education of the child must be to help him develop a positive self-image. This objective poses a dilemma because the teacher's success in helping a child develop his intellectual ability is dependent to a great degree upon the child's self-concept; yet the teacher's ability to help the child develop a positive self-image is limited (a) because the problems go beyond the classroom, and (b) because of who the teacher is."<sup>7</sup>

Dr. Sol Gordon states that educators "must learn to shatter some long-standing attitudes about the disadvantaged child. We must be prepared to discard some sacred commandments and 'accepted' rules of education . . . and some of our supposedly 'exciting' innovations as well.

"In short, we must start relying on creative teaching rather than curriculum innovation; on early prevention, rather than later remediation, to reach children with limited backgrounds and opportunities."<sup>8</sup>

A study made in 1965 by a South San Francisco elementary school principal pointed out that Mexican-American students in the school under study were more

frequently placed in lower learning tracks than other children. This was due to the school's apparent belief that these children were academically limited. It is well known that educational opportunities in these lower groups compare unfavorably with the high track groups. When students were divided into high, middle and low learning tracks, one half of the Mexican-American students were placed in the low track while only 15% were placed in the high track.<sup>9</sup>

The school dropout rate among Mexican-Americans in California is generally high, although there is no way of knowing from presently available information the exact dropout rate of Mexican-Americans in South San Francisco. However, the U.S. Civil Rights Commission reported in 1967 that "it has been estimated that 50% of the Spanish-speaking students in California drop out of school by the twelfth grade. Although no figures are available for the Bay Area, it is a fair assumption that the dropout rate in the Bay Area is considerably higher for the Spanish-American than for the rest of the population."<sup>10</sup>

In 1960 in South San Francisco, the median years of school completed by Mexican-Americans was two years less than that completed by the total population. Where one half of the total population had graduated from high school, only 1/3 of the Mexican-Americans had. Where 1/5 of the total population had completed one year of college, only 1/10 of the Mexican-Americans had.<sup>11</sup>

### *Employment*

The 1960 Census shows that in California, Mexican-Americans are noticeably absent from such occupations as professional and technical work, managers, proprietors, and salesmen. On the other hand, they are extremely over-represented in unskilled and semi-skilled work in industry.<sup>12</sup> A stereotype has grown up about the Mexican as an unskilled laborer, uninterested in education, political activity or union membership.

In South San Francisco, jobs are of major concern, ranking along side education as the critical problems to be solved. "Housing no problem - just jobs." This is the cry of the ones who dare to be vocal in local meetings and public hearings. They feel that the language barrier and racial prejudice are creating employment problems for the Spanish-speaking people.<sup>13</sup>

Young people often must drop out of school and go to work in order to supplement the family income. In many cases, the father makes very poor wages in non-skilled jobs such as flower cutting. The Mexican-American leaders feel that industry could train Spanish-speaking workers for more highly skilled jobs. They also believe that local business should hire more Spanish-speaking people. While a majority of Mexican-Americans lack the educational background to obtain better paying jobs, it is felt that those few who are fully qualified for good jobs usually are discriminated against both on the job and when seeking employment.

### *Not Qualified*

*A middle aged Mexican-American man, active in the community, invested considerable time and energy in obtaining an education. When applying for a job requiring some skills, he was told to forward in writing his job and personal qualifications. The company said he would be informed whether or not he would be hired when they received his resume. Much to his shock and surprise, before he had the opportunity to respond, the company informed him by mail he was unqualified for the position applied for.*

A Mexican leader met many times with city officials about the problem of low wages earned by Spanish-speaking workers. There are many families with as many as 10 or more members whose chief breadwinner may earn \$1.50 an hour. Except for a small elite group, most of the Mexican-American population consists of unskilled laborers who work in garden nurseries, factories, or stores.

Mexican-Americans resent the economic dominance of the Anglo. A feeling pervades among them that the Anglo has great amounts of money and power, monopolizes most jobs and controls the police force and the immigration service. English is considered the language of authority and power. From this grows an attitude of fear and mistrust of the American which subsequently nourishes a subcultural inferiority and low self image. Each group holds a stereotyped image of the other.

### *The Individual and the Family*

Our observations and those of others who have been concerned with this subculture, suggest that within the Mexican-American community a way of life is established which involves very little participation or active interest in the larger Anglo-dominated community. Family loyalty is held to be almost sacred, and admitted conformity to any group outside of the family is not considered very desirable. The Mexican-American family does not fragment into small biological units as the Anglo family does upon marriage. When a Mexican-American refers to his family, he includes not only his wife and children but his parents, grandparents, uncles, aunts and cousins. This also is characteristic of all the Spanish-Americans. (Although cultural in nature, this may be a function of economic conditions). The bonds of the extended family give the Mexican-American a sense of belonging that makes it unnecessary for him to organize and affiliate with others in activity groups or clubs. The Mexican-American is no joiner. This may explain, partially at least, why attempts to organize them on a permanent basis is usually unsuccessful.

### *Organizing Where They Are*

*In order for a local Head Start Pre-School Program to be funded, it was required that the local community form a representative*

*Community Action Council to serve as an administrative and fiscal agent for the school's operation. The Council was organized and the majority of its members were Mexican-American mothers with children eligible for the school. In the beginning, Council members actively participated in organizing the school and in selecting children to attend. Once the school was in operation, however, they gradually withdrew from regular Council activities. While withdrawal from continuing group participation is not solely attributable to Mexican-Americans, this tends to prevent and lessen opportunities for education, jobs and housing.*

Many of the older residents have retained their traditional ways of life with a minimum of community participation; however, some younger and young middle-aged people have begun to take the first steps to enter the mainstream of community life. Then, there are those who after several generations of exposure to the English language and to Anglo mores and values have become completely Americanized (at least outwardly). They retain little of their linguistic or cultural heritage. On the other hand, others who have been here equally as long speak only Spanish, follow Mexican ways of life, eat only Mexican food. Many elderly people look forward to returning "home" to Mexico.

There seems to be increasing self-imposed isolation of the population. The lessening contacts with the dominant portion of the community creates a kind of invisibility. Such invisibility may be partly to blame for the relative indifference of the Anglos toward this minority. Another major cause is the tendency of Anglos to ignore (really deny) the existence of social problems, as in the following vignette.

#### *Invisibility and Mutual Exclusion*

*Even physical proximity seems to have little penetrating effect on this "wall of invisibility." This was vividly evident in the social worker's experience of visiting Mexican-American families on a very short street inhabited by both Anglos and Mexican-Americans. Included among the former was a public school teacher with whom the social worker was acquainted. Frequent visits were made by the worker to the neighborhood where she often saw and talked with children and their families in the street. When discussing these visits one day with the teacher, the teacher revealed she had never spoken with her neighbors and had little knowledge of the impoverished conditions among the Spanish-speaking. This, in spite of the fact that she both lived next door to them and taught many Mexican-American children in school! At the same time, similar attitudes and actions were observed in Spanish-speaking persons toward their Anglo neighbors. Such "mutual exclusion" appeared to be quite prevalent.*

It was found that there are different categories of Spanish-speaking people in South San Francisco who have had different lengths of exposure to

different influences in the Anglo culture. These categories are: (1) native born of native born parents, (2) native born of foreign born parents, (3) foreign born of foreign born parents. They may be further fragmented by differences in degree of acculturation. A large number of persons, identified by others as Spanish-speaking, carry a Spanish surname although their principal language during their childhood was English. Others who obtain a Spanish surname through marriage may also identify themselves with the above group. On the other hand, there are many persons with Spanish surnames who do not wish to be identified with the Spanish population.

Thus it is easily seen that there may be an undercount of the Spanish-speaking population; at any rate, it is practically impossible to obtain an accurate count of this population. This dilemma is further complicated by the large number of Mexican-Americans who have entered the United States illegally and are missed in census counts.

While our interest was in the Spanish-speaking community in general, the majority of the Spanish-speaking population in South San Francisco is Mexican-American. The term Mexican-American is used commonly by the community at large to designate all Spanish-speaking persons. We found, however, that persons from other Latin American countries such as El Salvador, Peru, Columbia, Cuba, Chile, Puerto Rico and others prefer their nationalistic labels or to be identified as Latin American or Spanish-American. A resistance exists toward being submerged within a Mexican-American category.

### *Language and Acculturation*

Through her contact with families, it appeared initially to the social worker that few adults spoke English, when in fact, as she found later, many can but hesitated to do so in the presence of Anglos.

### *Parent-Teacher Conference*

*At one of the public schools, during Parent-Teacher Conference Week, the social worker was invited to participate in conferences to facilitate communication and understanding between parents and teachers. The expressed reason offered by many parents for not attending these conferences was their inability to communicate in English. Sometimes, during the course of the conference, parents who had admitted lack of knowledge of this language gradually started loosening up and spontaneously spoke in English. It is possible that once the parents knew that the teacher really cared, and accepted their English language limitations, they began to trust the teacher and lost some of their self-consciousness, and thus, were able to communicate in English in spite of errors.*

Many present day Mexicans, whose families have been exposed to the English language for many years, still speak Spanish at home. This applies especially

to the parents, though the children may use English occasionally. There seems to be a concerted effort to retain the language; it may be a source of cultural pride, in a sense, a kind of cultural tenacity. They also have a sense of closeness of kin, as if they were fearful of venturing beyond the confines of their family group. Mexican-American families are encumbered by deeply engrained values and life styles which are inevitably in conflict with the middle class values and life styles of the larger Anglo culture.

Many are recent immigrants from rural Mexico. A significant number also have come from the metropolitan areas where rapid changes are taking place. The continuing effect of both these rural and urban influences on Mexican-Americans is due not only to immigration but also to extensive visiting back and forth across the border. These ongoing contacts may be responsible for keeping many cultural patterns nearly intact.

### THE PROCESS OF INTERVENING

#### *PACE I.D. Center and the School - A Point of Entry*

Among the social worker's case load were children from the Mexican-American community. It was the mother of one of these PACERS who was especially helpful in acquainting the social worker with the community. From her, the social worker learned of the existence of a civic cultural group formed by and exclusively for Mexican-Americans, devoted mostly to recreational purposes. At a time when the group was preparing for a special festival in celebration of Mexican Independence Day, the social worker was invited to participate in that event. Although unable to attend, the fact that the social worker was invited was significant, for it meant that doors were beginning to open to the Mexican-American community.

Through this relationship, the social worker had the opportunity to sense the pride most Mexican-Americans have about their cultural heritage, "el orgullo de la Raza" (Pride of the Race). Throughout the United States, Mexican-Americans consider themselves as members of "La Raza" which can be literally translated "The Race," but carries the broader meaning of a group of people united by common values and customs. In Mexico "La Raza" carries strong connotations concerning the strength of the people. Mexican-Americans use this term to characterize themselves as a minority group within the context of the American culture.

The mother who introduced the social worker to the Mexican-American community was not typical of her Spanish-speaking neighbors. Her upper-class background in Mexico gave her a sense of dignity and of self worth quite different from what the social worker saw in most of the mothers she later contacted. This mother was very distressed because her youngest boy was included in the project. To her, it was a label or a stigma hard to accept. She was so proud of the way she and her husband had been raising their family. She was unable to understand the preventive purpose of our intervention and resisted the social worker's professional approach, although socially she was very friendly. Apparently, she was able to accept the social worker as another friendly Spanish-speaking person, but not as a professional in a helping role. Although she did not feel the need for any kind of counselling, she became a "door opener" for the social worker into the Spanish-speaking community.

Within the schools, casual or unplanned intervention occurred in response to specific situations. This was especially true of one school whose Spanish surname population made up over 28% of the total school population. By making herself highly visible throughout the school, the social worker made the staff and students aware of her presence; she was available when needed and was willing to respond immediately to specific needs of school personnel.

### *"The School Cares"*

*Very frequently the teachers, the nurse and speech therapist, in one particular school, requested help from the social worker because of her ability to speak Spanish and thus to serve as an interpreter when contacts were made with parents. The specific requests were related to children who were not PACERS. However, the social worker felt it was worthwhile to go beyond the research limitations for the sake of future work with the community and present intervention within the school system. For instance, the social worker frequently was asked to make telephone calls to homes in order to convey a message concerning a child. The request was specific and usually required a single contact with the family. The social worker made use of these single contacts to convey to parents the school's interest in their children and to stimulate in them a desire to keep in close touch with the school. The feeling tone was, "You are not forgotten, the school cares about you and your children, so come out and let us know more about you."*

After meeting the specific requests of the school personnel, the social worker reported back to them relevant and helpful information. The social worker could sense the positive responses in the parents to her reaching-out efforts; especially evident was the parents' relaxation in being able to communicate with someone who spoke their own language. An initial attempt was made to bring them out of their encapsulated lives where the larger system and their own subculture was maintaining them. In talking many times with other Spanish-speaking families, the social worker could sense hopelessness, despair, resignation, a certain timidity and a feeling of not being worthy of attention and concern.

Another instance of unplanned intervention and response to immediate needs was the social worker's collaboration with a remedial language teacher who also spoke Spanish. They worked together in translating report cards into Spanish. It is hoped that communications in both Spanish and English coming from the schools can become an established procedure for Spanish-speaking families. The potential effect of preparing communications in Spanish can be seen in the case of one mother.

### *Back-to-School Night*

*One elementary school prepared "Back-to-School Night" for parents by sending invitations written in Spanish to all Spanish-*



speaking parents. The PACE social worker assisted by serving as Spanish-English interpreter for two kindergarten teachers and visiting mothers. One of the four Spanish-speaking mothers who visited the two classrooms commented that she had come because the invitation had been written in Spanish. To her the invitation was something personal and she took great delight in being invited to such a special event. Although this mother had three other children in higher grades, this was her first visit to the school. The small effort spent in preparing the invitations bridged a wide gap between the school and the home. Later the mother became involved with the school and was one of the two mothers who regularly attended and helped in organizing meetings for Spanish-speaking mothers of kindergarten children.

### *The Visible PACE Worker - A Catalyst in the Community*

During the project's second year, initial, unplanned intervention was followed by planned efforts to get acquainted with the community. The concept of gaining visibility was of prime importance in this phase of the process of moving out of the school into this special segment of the community. Visibility had dual connotations. The social worker, as an intervening agent, gained knowledge and understanding about this population and its relationship to the broader community, she helped both groups gain more understanding. Communication channels began to open between them.

Inquiries were made about local leadership. The social worker introduced herself, reached out, and consequently was invited to meetings of local organizations. As an example she was given an open invitation to attend regular meetings of the Community Action Council. She was able to identify the various groups and their leaders and she met key persons in the community.

Major Mexican-American leadership was carried by one or two persons who were and remain dedicated and impatient to improve their people's social and economic conditions. The leaders were forced frequently to dictate "solo" decisions. These actions grew chiefly from frustrations with the apathy and helplessness of the majority of persons in the Mexican-American community. The social worker observed a unilateral communication - leaders reporting what they had done, the rest of the people listening and accepting the decisions they had not been involved in making. This engendered some resentment and ambivalence toward the leaders and their popularity was often in jeopardy. Formal and informal discussion in the meetings attended by the social worker indicated that the primary problems were lack of employment and lack of education. One of the leaders maintained that education was especially important. "Why be pleased and happy to be a laborer and a dishwasher when, if you have the talent, you can be a teacher, engineer, technician. . . ?" There was also much concern about the needs of very young children - a concern turned eventually into action which will be discussed later.

There was a lack of community involvement in any action plan even though there appeared to be opportunity for brainstorming around needs. The leaders alone

were involved in decision making. The leadership seemed to enjoy doing things for the group and while there was much appreciation from those who were helped, there was resentment and ill feelings from those who were not.

### *Full Circle - The Community Seeks Out PACE*

In this process of exploration it was apparent that different persons and groups in the community were becoming more aware of each other. The beginnings of expressed unrest were seen and the need for more communication was being created. People became curious about what was going on. They became restless because little seemed to be accomplished. In talking and listening to each other, they began to discover common areas of concern and began to think about joint planning and action. The social worker stayed in the background, was supportive when needed, but active all along in the sense of facilitating some awakening and social action in this community.

The social worker's activities led to closer communication with various Mexican-American, Anglo, and church groups. Persons from the College of San Mateo and the University of San Francisco were contacted and became involved. Teachers from adjacent communities who had shown concern for the Spanish-speaking people were also contacted. The chemistry of the community life became more and more complex as the ingredients of social interaction increased in number and, when mixed, showed a variety of new characteristics. There occurred a series of individual responses, people calling the PACE I.D. Center in request of information, many coming to meet with us to share their ideas. This period really portrays the effectiveness of a catalytic agent. Since the social worker was an element within the PACE program, it was essentially the PACE project and not the social worker which was causing the catalysis. At this particular phase of the process, there was a sudden change in the direction of the communication. The social worker was no longer reaching out; different representatives of the community now looked toward the PACE Center as a source of information, support and counsel.

### *Local Organizations and Projects*

In the process of exploring the community, various organizations were discovered. The oldest and most important of these was officially incorporated in 1926. Its origin dates back to 1924 when eight men formed a committee to solicit and receive donations to celebrate the Mexican fiestas. Apart from being a mutual benefit society, this organization has an educational, social and recreational character, whose motto is "Instruction, Protection and Recreation." Recreation has become its major purpose, however. The organization could be an effective social action group but was not organized for the purpose of promoting social change.

Many of its members have verbalized that they are not, in fact, a group and they do not speak with a common voice; they do not have mutual agreement; they

are fragmented and isolated. What has kept them together is a rather nostalgic cultural tie to a romanticized Mexican heritage. They regard Mexico as the ultimate source of philosophical truth and the center of the appreciation of beauty and the arts. Because of their strong national feeling (toward the mother country), they were able to raise funds and purchase their own building in 1948. After twenty years and although this hall is available to the entire Spanish-speaking community for wedding receptions, social gatherings and meetings, a significant number of this population was unaware of its existence - further evidence of the isolation of families of this subculture.

In August 1965, a group of Spanish-speaking people from San Mateo County met to seek representation on a newly organized advisory committee, whose goal was to stimulate county-wide programs to improve the economic and social conditions of Spanish-speaking residents. South San Francisco was represented on this committee by two persons. The committee participated in the Federal Manpower Development Training program administered by the State Department of Employment. Classes in English, basic education and vocational training were to be the focus of the program.

Two years later, the first Community Action Council was organized to administer programs funded under the Economic Opportunity Act of 1965. The need for a bilingual Head Start program was brought out in the early meetings and was endorsed by the group. There were, however, organizational problems which delayed its implementation. Ineffective leadership, frequent changes in the Council membership, and group impatience for action all contributed to the delay of the Head Start program. It eventually was organized, however, and has become an important vehicle for change in the community.

Concurrent with the activities of the Community Action Council, the need for a county-wide human relations committee with local representation was considered. An active Mexican-American leader was appointed by the town's Board of Supervisors to study the need for this committee. To this end, a public hearing was held at City Hall early in 1968 and members of the Spanish-speaking community testified about their problems. Most of the people present favored the creation of a County Human Relations Commission and called for training programs to prepare people for jobs and for acceptance in the community. The Commission was created within the year and is headquartered in the County Government Center.

#### *"No Problem"*

*At this hearing the mayor said the city government had not been aware of the existence of a serious job problem in the Spanish-speaking community. He told the committee he had asked the leaders of the minority group to provide a list of the unemployed heads of families, and he had received no reply. "If they need help," the mayor said, "they have got to let us know they need it." The mayor pledged to help but couldn't guarantee results. When asked if he*

thought a local human relations committee could help handle the problem he said, "I didn't know we had a problem." The mayor asked for a show of hands of those unemployed; none were raised. A local leader stated that Latin Americans are so proud they would not stand up to ask for anything in public. Most of those who spoke at that hearing emphasized the employment problem and blamed the language barrier for the plight of this minority group. The language barrier, however, as real as it is, also may be a rationalization on the part of many Mexican-Americans. The true barrier may be the Anglo's prejudice and feelings of superiority toward them. This was stated at the hearing by a professional person with a knowledgeable background of the Spanish-speaking community who identified the problem as "outright prejudice and discrimination." The hearing showed the existence of poor communication between city administration and this minority group and also showed the Mexican-American group's own lack of documentation of its people's needs. The city administration's position toward the Spanish-speaking population and its almost complete denial of the existence of any problem became vividly clear.<sup>14</sup>

#### Summer Youth Program

Later in the year, in June 1968, the San Mateo County Board of Supervisors approved funds for a Summer Youth Program for Mexican-Americans in South San Francisco. The program, administered by the San Mateo County Economic Opportunity Commission, was divided into three phases and operated for six weeks.

Summer School (Phase I). The school consisted of two separate two-hour classes each day, Monday through Friday. Children attending were ages four to twelve. Subjects such as English, reading, mathematics, American history and art were offered for Spanish-speaking children and other children who needed assistance in these specific areas. A freshman college student was employed as coordinator, assisted by five teenagers serving as teacher aides and by two volunteer adult advisors. Each member of the staff was assigned to work with a small group of children and their parents.

At the beginning 40 students were expected to participate; the major problem turned out to be keeping up with new enrollees. The group finally increased to 68. Most of those enrolled came from lower socio-economic homes. Many of the younger children were learning to speak English for the first time. The parents hoped that they would be prepared to begin on a more equal educational basis with their classmates when regular school started.

Information and Referral Center (Phase II). Such a Center had previously been staffed daily by volunteers from 3:00 to 6:00 P.M., but now was expanded to a full day schedule. The Center dispensed information on such matters as employment, apprenticeship programs, education, welfare and housing. Though the emphasis of the summer program was on serving the city's youth, all persons who needed help were encouraged to take advantage of the Center's services. The Center was staffed by a coordinator and two teenagers serving as clerk typists along with adult volunteers from the community.

In reality, the Information and Referral Center was confronted mainly with finding jobs for the hard core unemployed.

Employment (Phase III). This phase of the program provided employment in the City Library and Parks and Recreation Department for 14 needy students. The theme was "We are not only concerned about youth in need of money but also about those in need of a place in society." Adult volunteers were asked to serve two to three hours daily.

One volunteer teacher, a young Mexican woman trained in Mexico and married to an American, was very concerned about a popular misconception regarding the Spanish language. She said "We speak Spanish, not Mexican. There are many dialects in Mexico such as Mayani and Otomi but there is no pure Mexican language." She added, "We speak Spanish not Mexican because Mexico was conquered by the Spanish. In the same way, in the United States citizens speak English, not American because this country was formerly ruled by the English."

This teacher taught Spanish daily to a group of children called "Pochos" by the Mexican-American community. (A "Pocho" speaks half English and half Spanish. In Mexico, the term "Pocho" is a derogatory word for a Mexican who emulates American behavior patterns). She devoted her time "with a great deal of pleasure to help my people." She organized parents as class aides and at least five mothers came every day. The first class was formed by a small group of nine children from Spanish-speaking families who did not speak English correctly. The primary teaching technique for this class was audio-visual. A second class consisted of those who could speak but not write Spanish, so here the emphasis was placed on writing and grammar. A third class was more of an enrichment course since these students already could speak, read and write Spanish.

At the beginning of the Summer Youth Program, concerned parents and adults were unsure that the student leaders could perform the tasks necessary for success. A high premium was placed upon their success by the Mexican-American leaders. Failure might mean the loss of future government funding and the risk of further damage to the image of Mexican-American vis a' vis the critical eyes of the dominant Anglo community. These factors reinforced the watchdog attitude of adults and parents toward the youth in the program. An adult group stood close by to "rescue" the program should the youth fail.

Failure did not occur in the Summer Program, however. In spite of all the fears and apprehensions, the project was termed highly successful; the youth were spoken of and rewarded as "responsible youngsters." A comment heard was, "Maybe it is too late for us, but our kids can make it - and will make it."

#### WORKING WITH PARENTS OF YOUNG CHILDREN - NARROWING THE FOCUS

##### *Head Start Becomes a Landmark*

The next step in terms of community action was the Head Start School which opened its doors late in October 1968. It became a vehicle to facilitate

the organization of the Spanish-speaking community. The PACE social worker and the PACE I.D. Center were closely involved in the planning and organizational stages. They were consulted on matters such as approaching community agencies to provide "in kind" services to supplement federal funds, recruitment of personnel, selection of children, contacting parents.

The PACE staff helped to arrange a two week training course for the teacher at the Title IV, ESEA, Far West Laboratory for Educational Research, and to secure the cooperation of other agencies in providing volunteer staff time. For example, a private agency assigned a social worker for three hours a week. A public agency assigned a public health nurse, and a social work supervisor volunteered some time to the early planning sessions.

The PACE worker's function as catalyst facilitated the pooling of resources from different agencies. People started to communicate with each other around a common purpose or focus. In the planning stages, a public health nursing supervisor met with the Head Start Health Coordinator and the social work supervisor. The first two had never heard about each other in spite of the fact that they were in the same field and in the same county. A community mental health consultant was brought into the picture to participate in the planning stages and to be available for ongoing consultation if needed. A local school nurse helped by giving information about volunteers she had trained to do hearing and vision screening. Through these volunteers, Head Start personnel found others in the Anglo community who were willing to assist the program. Residents of the Mexican-American community also volunteered their time.

The inclusion of parents in planning and operating the program - an important requisite of Head Start - became an effective means of organizing at least a small portion of the community in a cooperative endeavor to meet common needs of this subcultural group. The PACE social worker worked chiefly with these parents and another small group of Spanish-speaking mothers during the initial year of the Head Start program and the final year of the PACE I.D. project.

The latter were parents with youngsters in public school kindergarten. This focus on parents of young children was decided upon for several reasons: intervention could be more preventive in effect; with both groups, intervention was at a crucial time in the lives of both the parents and the children - when the children were taking their first steps away from their home and subculture, and toward the Anglo-dominated larger culture.

### *Parents of Head Start Children*

Work with Head Start parents during the first months was limited. All of the mothers were members of the Community Action Council which met monthly. The president was a mother of one of the Head Start children. Her selection to a key leadership position is not typical in the Mexican culture or the Mexican-American subculture. The social worker attended most of the meetings and observed how they now were able to organize their strengths in order to carry out community action programs.

Most of the Council's meetings were dedicated to fund raising. There were nearly 40 children on the school's waiting list and the parents on the Council attempted to raise enough funds to open a second classroom. Due to the time and energy spent on fund raising, the teacher and social worker were not able to conduct or facilitate meetings in which the focus would have been on children, parents and other significant adults.

There was response from the community in helping the school. A local newspaper provided all of the paper the school needed and three women's clubs helped with supplies. Head Start began to demonstrate what can be done by a group of persons who are dedicated, knowledgeable and willing to reach out to the community. When the school opened, nine children came the first day; the group rapidly grew to 22 with a regular daily attendance of about 18. From the beginning, mothers had been very active, participating in the selection of the children and the personnel, and later in doing volunteer work in the classroom.

Over ten mothers were willing to volunteer some time in the school and two persons from the community, other than mothers, helped with some regularity. A few months later, however, the number of volunteers dropped down to almost half the original number. Informal daily meetings were held in which they talked more about themselves than about the children. The teacher intentionally tried to keep the emphasis away from evaluating the children's progress. Instead she attempted to keep the focus on the adults' understanding themselves in order to find out how effective they were with children and other parents. Her efforts, in effect, were geared to mitigate the cultural factors that can and sometimes do negatively effect the children.

The most overwhelming obstacle to the parents' and children's accomplishments seemed to be their low self-image. The head teacher's recognition that self-image is a critical factor in a successful and happy life, and her awareness that there was a deficit of this quality, caused her to place special emphasis on developing a positive self-image in the children.

During the first months of the school's operations, most all those involved were pleased - teachers, parents, volunteers and most of all, the children. The excitement of a new experience, the partial relief of a burden of the mothers for several hours of the day, the reactions brought home by the children, the reponse of the Spanish-speaking community which involved a sense of accomplishment, all created a short and euphoric "honeymoon" period.

A gradual change began occurring in the parents, however, after routines had become more established. Even though they were pleased with the school, the parents began putting pressure on the teacher to have the children do "more learning and less playing". The pressure was not only from the parents, some of whom did volunteer work at the school, but also from the two teachers' aides who were Spanish-speaking, one of whom was a mother of a Head Starter. It was difficult for parents to understand the kind of learning that can occur in this stage of their physical and psycho-social development through play activities. When this situation arose, the social worker intervened to help all of the adults involved to be more realistic in their expectations of each other.

The main goals of the school were to awaken each child to the richness of the world around him, give him a sense of self-hood, make him eager to learn and to continue to learn. These culturally disadvantaged children very much needed to have a sense of accomplishment, and to feel the thrill it can bring. The short-term goal of the program was directed towards preparing a child for school success, but the long-term goal aimed beyond school toward successful adulthood. It aimed to set the child on a course that would strengthen him all through his lifetime.

### *The Kindergarten Group*

The principal and kindergarten teachers of an elementary school worked with the social worker in selecting sixteen Spanish-speaking families who had children in kindergarten and who seemed to have the greatest problems in communicating with school personnel. The first approach to them had been through the special invitation written in Spanish to come to the "Back to School Night" program described earlier. Only four mothers, however, came to the special program. Consequently, personal contacts were made and were geared to attract the parents to participate more in school related activities.

Another step taken was to translate into Spanish all of the communications sent home by the teachers. This was another way of conveying to them the real interest of the school. Personal telephone calls by the social worker followed, and some home visits were made when there was no telephone in the house. Regular meetings were planned and several took place.

Eight mothers attended the first meeting. They were welcomed by the principal and kindergarten teacher who attempted to make the mothers feel at ease and comfortable in the school. The social worker served as interpreter and tried to stimulate them to continue meeting. The purpose of the meetings, as defined by the social worker and the school, was to establish better communication between the families and the school. Upon learning the mothers' wish to learn English, the social worker believed this to be an area for immediate attention. This could serve as an effective starting point or a potential beginning for a process of meaningful intervention (even though the language barrier was not considered by the social worker to be the major need). A trained Mexican-American bilingual teacher volunteered to organize an English class. When only two mothers appeared at the first planning meeting for the classes, it was obvious another approach must be taken. The social worker next brought an indigenous community worker to a future meeting in the hope that the mothers would respond more favorably to a person closer to their own socio-economic level. This effort resulted in the same two mothers attending who were at the previous meeting. Thus the social and community worker deemed it necessary to "go where the mothers are." The process of organizing small neighborhood groups in different homes of the mothers was begun. At the time of this writing, the two interested mothers are involved in making personal contacts with mothers in the community.

This process of catalysis illustrates three important community organization concepts:



1. It is necessary to separate out a community's expressed needs as opposed to the helping agent's understanding of the community's need priorities.
2. It is important to start where the community members are, in order to gain a toehold in moving toward the ultimate purpose of maximizing opportunities for the community to achieve its major goals.
3. It is important to make optimal use of available resources, in this instance, the two mothers who attended the meetings.

### *Articulation Between Pre-School and Kindergarten*

The kindergarten group became a central point of interest for teachers, parents and community persons. As hoped, it helped to bring the Head Start school and the public school into closer communication.

Establishing a free flow of communication between the public school's kindergarten teachers and principal and the Head Start staff was believed important because many of the pre-school youngsters would attend kindergarten the following year.

Articulation between the schools was initiated through reciprocal visits and observations, a joint Head Start - PTA program for parents, and an exchange of school materials. The PTA program was dedicated to the Spanish community. The Head Start staff told of their program and its goals and provided an exhibit of the school's activities. Presentations were made in both Spanish and English.

A volunteer from the community, a teacher trained in Mexico who had been working regularly at Head Start, is now doing some volunteer work with the public school, as well.

Exposure to the kindergarten program aided the Head Start staff to plan activities more closely related to future kindergarten experiences. It also alerted staff to more realistic expectations of the children's level of performance in the Head Start program. The public school, meanwhile, gained valuable information both about individual children, their cultural background, and the Mexican-American community.

### CONCLUSION

The Spanish-speaking people in this community are beginning to demonstrate a growing ability to organize themselves toward a common goal. The increasing awareness and expression of their needs and lack of equal opportunity is perhaps indicative that constructive changes will be more likely in the future.

The Head Start program provided one opportunity for the establishment of cooperative relationships between Spanish-speaking and Anglos. Till now the Spanish-speaking had financed their own activities among themselves. Experience with the Head Start program, however, showed them the potential for general support from the broader community.

The broader community it is believed, has a responsibility to evaluate the presence and problems of its minority groups in order to facilitate the full expression and fulfillment of their needs. Increased and equal employment opportunities, education and financial assistance for special programs are major objectives for the Mexican-American minority. The main vehicle for attaining these objectives is organization. Without organized, goal-directed community action, the chances of reaching such objectives is minimal. In this paper the reader has seen how the beginnings of organization in one community helped to develop a program focusing on young children.

Implicit in this paper is that the needs of all young children can be pivotal in marshalling a community's resources toward concerted action. While the needs of young children in this and other communities are well documented, it is equally well known that many of the basic needs of large numbers of these children have not and are not being met. Since it is not so much a question of lack of adequate resources to serve these children, the question to be asked is: what elements in our society are impeding the effective use of these resources to better meet the needs of children? We know that some of these are ignorance, prejudice, misunderstanding, poor communication, waste of manpower and money, and conflicting interests among individuals, groups and institutions. Several of these elements were operative in the community and group processes described here; it was shown how attempts were made to minimize their harmful influence through intervention at various levels of both the broader and subcultural communities. The importance of the public school as a point of entry into the community cannot be over emphasized. Nor can the importance of the school's influence on young children - especially those from a minority subculture such as the Mexican-American - be stressed too much.

While an overview of most American schools is rather discouraging, schools do appear to be becoming more sensitive to culturally disadvantaged children. It is hoped they also are becoming more aware that all people possess a valid culture. In modern urban society, however, the fact remains that the middle class American has a distinct advantage and that cultural differences among certain ethnic groups are a hindrance to education and achievement. The recognition that the consequences of these differences impede and limit progress at an early age has led to the pre-school movement. Programs like Head Start can become more effective through concerted articulation of pre-school and regular school.

Acculturation, socialization and educational processes for minorities must be available, active and ongoing beyond the pre-school years on into adult life. Unless they are equally accessible to Mexican-Americans, Negroes, Puerto Ricans and other minority groups, and especially to their children, whatever gains achieved early by a child through isolated programs are quickly lost.

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## MY INNER SELF

A person an Image, for all to see.  
But my Inner Self, is a secret to me,

A person of love, and untold shame.  
My Inner self, they cannot frame.

Of secret desires, and things I feel.  
My Inner self, They cannot steal.

The things I think, They cannot see.  
And the dreams I dream, are just for me.

Why I laugh, And why I cry.  
And sometimes wish, That I could die.

My Inner self is a priceless thing.  
It makes my heart want to sing.

For no one else will ever know.  
Except the things, I choose to show.

So let them guess, from day to day.  
What makes me go on, In the same old way.

As the years go by, They'll never know.  
For my Inner self, Is my very soul.

The End

--- written by a PACER PARENT

Teachers Comment:

*I felt the social worker was excellent, very professional and helpful in finding solutions or possible solutions to many of my parents' problems.*

*Individual contact with PACE social worker has helped me. Her mobility through the district points up need for better intra-district communication on a regular basis.*

*I would like much more of the same kind of help.*

*May do some good but children have too many crutches handed them for their lack of behavior. Parents aren't really given the truth about their failures. Seems just another waste of taxpayers' money.*

*I was skeptical of the program at first but soon saw results and benefits. It has helped, to a great extent, the PACERS in our school.*

*As a teacher of educationally handicapped children, I sincerely state that without your program being officially instituted in our educational system we shall never make any gains to make up for the many lost years of mental hygiene for our children: Please make your research evaluation such that although funds are being cut your results will necessitate your program becoming an integral part of our schools.*

*The program was of some value to me only because it made me more aware of the many difficulties my one PACER faced at home. The social worker helped the parent and the child by having him placed in a foster home.*

*PACE certainly provides the materials and motivation needed by children who are experiencing academic problems. The change is gradual, perhaps even non-apparent to the casual observer, but positive changes occur!*

*I can only answer good. The child I have is still a problem, but perhaps without PACE he would have been worse.*

*Our social worker has been invaluable in her assistance with the parent conferences for the Spanish-speaking families.*

*I saw great things happening in resolving the problems of my PACER and his family.*

*I feel the PACE program is a terrific one! It has helped me as a teacher and has helped me deal with children in my classroom. I see that finally the children who really need help are getting it! The assistance the social worker, an extremely professional, warm person, gave me was great!*

*The program has pointed out the need for a full time social worker at the elementary school level.*

More Teachers Comment:

*There seems to be a disturbing amount of apathy and ignorance among teachers and administrators. Their "resistance" to the help available deprives children in need from improving their lot in life.*

*I'm so convinced of the value of this program that I personally would like to become more directly involved.*

*Once again the outstanding characteristic in my mind has been in articulation and communication.*

*I feel very fortunate to have had contact with the PACE worker. She was excellent in her handling of my Parent Discussion Group.*

*A great deal of help by the PACE worker has been given me personally in identifying and evaluating problems of children.*

*The PACE social worker was very cooperative and was helpful in decision making about the brother of a PACER.*

*The social worker has been the core of our Parent Group. She is the real reason for it's success. She has shown constant interest in each child in the Developmental Kindergarten.*

*This has been the best thing that has come to our school. The help, the knowledge, the great insight into all problems, the personal help is beyond measure.*

*The child showed no change. He just missed class. The worker tried to take up my lunch periods for repetitious and unproductive discussions.*

*Have found PACE worker to be a good listener; adept in delineating problems and articulating specifics regarding problem.*

*The one opportunity that we as a faculty met with one of the PACE workers at our school left me the impression that PACE workers are very necessary for our children who have special needs.*

*I think this program could be of great value because it is reaching children when they are young enough for behavior and learning difficulties to be modified and dealt with.*

*The program provides another "view" and this is necessary if we are to benefit the whole child.*

*Dedication of personnel involved was highly apparent. . . .*

**A PACER Comments:**

on Monday - *"I hate God for letting people like  
you try to help me."*



on Wednesday - *"What's gonna happen to  
me if nobody can help me?"*

Prologue - The Map

A purpose is an assumption  
We make to justify our behavior.  
A form we pattern ourselves after  
In order to make a meaningful commitment  
to Something.

We are going somewhere, doing some thing,  
that takes Time and Energy and therefor  
Is Important.  
It is called a Map. It is also an Illusion.

- I. From our Map let us choose a path  
And discover new things on our journey.

A path has History, see how well worn it is.  
A path is Efficient for it leads somewhere  
easily and Quickly  
A path is New for it changes as we walk  
upon it.

- II. Let us call our journey an Initiation  
a Beginning.  
First make a plan to get to the Path.  
Then overcome Uncertainty and Superstition  
and Self.  
Then start to walk and learn the skill  
of Knowing.

- III. Why is this Initiation so hard and painful?  
Our ground so unfamiliar  
More like Fantasy than Fact.

You only get what you create  
Not even what you wanted.

As in a dream, you carry yourself  
And have to trust your own strength.  
Is this then our uncertainty?

- IV. Why the Superstition, the thought-fear of  
the Trip?  
Superstition insists on Not Knowing Why Things  
are the way they are.  
OR why things work, the way they work.  
Even denies the Energy to Change.  
Is there Order, Plan and God?  
Are we Responsible Creators with Energy  
to spare.  
OR is this also Superstition?

V. And what of Self; the Fear of  
Losing an Identity and Distinction?  
The only thing to lose is separateness  
and isolation.  
Does a droplet become less fluid  
When it joins the River.  
Is a bead unstrung more beautiful  
than the Necklace.  
Is this then our final barrier to  
Beginning.

Epilogue - Another Map

To be a Responsible Creator one learns to conserve  
Energy.

Allow others to do for themselves  
What you would want yourself to do.  
Never Contain what you Know.  
Never hold it in reserve  
Tell everyone, Everything you can.  
And How they can tell it to others  
And call it Sharing.

Once on the Path, walk softly  
Protect the growth of every living thing  
And call it Caring.

And if you stray off the path  
Don't get Mad at the new Territory.  
Check your Map again.  
You might even ask for help.  
There May be others just as lost  
And just as alone as you are.

Put your heads together.  
Exchange some energy.  
Concentrate.  
On Where you are.  
Where you want to be  
And how you're going to get there.  
Together, This Time.

--- David J. Schwartz

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