

DOCUMENT RESUME

ED 239 140

CG 017 184

AUTHOR Linney, Jean Ann  
 TITLE Implementation of Community-Based Programs: Current Difficulties and Future Issues.  
 PUB DATE Aug 83  
 NOTE 1lp.; Paper presented at the Annual Convention of the American Psychological Association (91st, Anaheim, CA, August 26-30, 1983).  
 PUB TYPE Information Analyses (070) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.  
 DESCRIPTORS Burnout; \*Community Involvement; \*Community Programs; Decision Making; \*Delinquent Rehabilitation; Employee Attitudes; \*Family Involvement; Financial Problems; Labor Turnover; Morale; \*Organizational Effectiveness

IDENTIFIERS \*Deinstitutionalization (of Delinquents)

ABSTRACT

Over the last 10 years there has been a striking development in the system of community-based programs to replace or supplement institutional care for juvenile offenders. However, the analysis of 30 community-based residential programs in six metropolitan areas found that the community-based model of services is still a relatively untried experiment due in part to the lack of clarity in defining conceptual goals and organizational needs. Conceptually, community-based programs were designed to enhance community integration of delinquent youths and to facilitate family involvement. Economic, legal and community resistance factors have limited the effectiveness of these conceptual goals. The use of community resources tends to be limited to medical, police, social, and free recreational services. Family involvement is absent, largely due to the limited avenues of involvement provided by the programs. From an organizational perspective, community-based programs suffer from fiscal difficulties, lack of control in placement decision making, high staff burnout and turnover, and low staff morale. Rather than furthering development of an alternative, community-based model, the adaptive mechanisms available to ensure survival have pushed these programs closer to the self-contained correctional model.

(BL)

\*\*\*\*\*  
 \* Reproductions supplied by EDRS are the best that can be made \*  
 \* from the original document. \*  
 \*\*\*\*\*

ED239140

Implementation of Community-Based Programs:  
Current Difficulties and Future Issues

Jean Ann Linney

University of South Carolina

Paper presented at the annual meeting of the American Psychological Association, Anaheim, California August, 1983 as part of a symposium on "Community Based Services for Juvenile Offenders: Ideology, Problems and Prospects".

U.S. DEPARTMENT OF EDUCATION  
NATIONAL INSTITUTE OF EDUCATION  
EDUCATIONAL RESOURCES INFORMATION  
CENTER (ERIC)

- X This document has been reproduced as received from the person or organization originating it.
- Minor changes have been made to improve reproduction quality.

- Points of view or opinions stated in this document do not necessarily represent official NIE position or policy.

"PERMISSION TO REPRODUCE THIS  
MATERIAL HAS BEEN GRANTED BY

*Jean Ann Linney*

TO THE EDUCATIONAL RESOURCES  
INFORMATION CENTER (ERIC)."

CG 017 184

## Implementation of Community-Based Programs:

### Current Difficulties and Future Issues

Researchers, policy makers and service providers have rallied around the call for alternatives to institutional care for juvenile offenders. Over the last ten years there has been striking development in the system of community based programs to replace or supplement the institutional setting. Like most policy changes however, a variety of professional, practical and organizational issues have accompanied this ideological shift. This paper overviews the types of problems service providers have encountered in the development and maintenance of community-based alternative services, their responses, and implications for the future evolution of service provision within this conceptual model.

Thirty community-based residential programs in six metropolitan areas were studied. Service providers reported a variety of difficulties maintaining operation of these programs. The problems included growing community resistance, problems in establishing community liasons and involvement, difficulty ensuring forms of meaningful family involvement, inadequate numbers of post program placement options and too little control over placement, relatively untrained staff, high turnover in staff, limited career opportunities as incentives for staff tenure, funding cuts, and the absence of long range financial assurances. These problems were believed to seriously undermine both the day-to-day operation of these facilities and to a large degree, the conceptual integrity of community-based alternatives.

These problems can be clustered into two types, 1) conceptual issues relevant to the construct of community-based service, and 2) issues of organizational autonomy which determine the agency or organization's ability

to maintain itself and determine its own direction.

### Conceptual Issues

The major foci of the burgeoning interest in non-institutional settings were the problems of integrating youth within the community where they lived, linking them with more socially acceptable groups in the neighborhood, and facilitating family involvement in the youth's program. These activities and goals were to be the hallmark of community-based programs and what distinguished them from the self-contained correctional facility (Coates, 1981). Community involvement was seen to have several dimensions including location in the community, use of community resources, liaison with members of the lay and professional communities, and involvement and participation of community members in the lives of the residents. Despite increasing numbers of alternative programs there is little evidence of this kind of community-based activity occurring in any generalized or widespread way. Several factors seem to be responsible.

(1) Economic and legal considerations, i.e., land costs, zoning laws, rent or mortgage expenses limit the locations of a community-based facility and sometimes force a program to locate in a less than optimal place.

(2) The program's economic resources often limit the degree to which residents may utilize community resources and activities. (3) Community resistance to a program for troublesome youth limits the degree of reciprocal community involvement possible. Within our sample 16.7% of the program directors reported current community opposition to their program. Although open opposition is not the norm, programs seem to operate around the potential of community resistance and the risks of stirring community sentiment. The myth of community hostility may do more to limit the degree of reciprocal

involvement between program participants and neighbors than any other factor. When staff fear community opposition the program doesn't make an effort to become integrated within the community. In fact many of the programs we visited had made substantial effort to acquire recreational facilities and equipment for within program use. Social activities such as a dance or party were often arranged between two programs. These strategies further reduced the chance of community resistance by reducing the need to mingle in the community, but also minimized opportunities to accomplish the integrative goals conceptually central to community-based programs.

In the programs we sampled the community involvement observed tended to come from a community group with a mission or message in their involvement. For example, the largest single category of involved groups were church affiliated organizations who provided some recreation and religious instruction or information. In a few instances the members of the Board of the agency increased community involvement by enhancing public relations for the program. One program included local high school students on their board. The agency's intention was to receive this input for the design of services rather than to enhance the quality or extent of interaction with the community however. A few individual programs involved community people on a sporadic and selective basis, for example staff members might bring non-staff friends for dinner. One facility established a visiting family program for those residents who couldn't visit their natural family.

Each program generally utilized other professional services such as medical and counseling facilities, police and social services. Beyond that use of community resources tended to be limited to free recreation facilities or public entertainment. The residents tended to use these on a scheduled,

group basis. Residents in community-based facilities often attend public school, but typically in special classes, and rarely do they participate in extracurricular activities.

We saw a few examples of residents establishing some fund-raising activity to which the community was invited. This was the extent of residents "reaching out" to the community or actively participating in community activities. One program involved residents as volunteers at a home for the elderly. This was perhaps the only example of residents contributing to the community apart from program interests.

On the basis of this sample and our experience we conclude that community-based programs choose to function with a "low profile", doing little to draw the community in to their program, and concentrating on how to remain invisible. While this modus operandi minimizes stigma effects and the potential risks of community resistance, it also results in some degree of isolation for the residents and begins to replicate the self-containment philosophy of the institutional setting.

Generally family involvement was absent in the program of the facilities in this sample. The family involvement that was observed fell into the category of counseling. Three emergency shelters required a family session at the admission or release of a youth. The group homes operating on the teaching family model of Achievement Place (Fixsen, Phillips, & Wolf, 1973) had weekly parent meetings and family visits.

Staff repeatedly commented on the difficulty in getting families involved. It was our observation however, that the avenues for family involvement were limited to a counseling format. We heard only two other examples of different types of family involvement. One agency offered

their living room for a weekly parent support group and found a consistent turnout. A large, city based transitional facility had a family picnic for their residents and half of the families attended!

Family involvement in these community-based programs seems to have been operationalized in a uni-dimensional manner. This definition is remarkably similar to that of the institutional setting which these programs are intended to replace. It appears that a great deal of effort has been expended to draw families in for counseling with minimal pay-off. Despite the low return, new strategies have not been sought, rather the limited success has been attributed to the failings of parents. An alternative direction is to view the community-based program as a catalyst to stimulate positive family interaction and as a mechanism to reinvest parents in their child so that other productive family processes might take over. Within this framework family participation might be predominantly recreational and social initially, with counseling available for families who were ready to take on that task.

#### Organizational Autonomy Issues

Issues of organizational autonomy appear to be critical to preservation of community-based alternatives. The community-based agency like the correctional facility is part of a larger network of services and programs. As the "youth in trouble service system" (Lerman, 1981) has developed the community-based facility is the newest addition to the network and functions as a placement for those less serious offenders or troublesome youth (Linney, 1982; 1983).

From an organizational perspective the community-based facility is in a precarious position. With the exception of detention facilities, community-based agencies tend to be on very soft money, generally grants or

purchase of service contracts. A sizeable portion of time is by necessity devoted to securing funds and/or ensuring that beds stay full. If these funds don't come in the program won't survive. Programs are often forced to accept different types of youth or youth not as well suited to their program because "they need the referral", or are forced to increase the size of their resident population because of budgetary issues (e.g., to accommodate salary increases and rising costs; to comply with state determined cost-effectiveness ratios). In the absence of long-range financial assurances programs are unable to plan program change or handle capital improvements and repairs. These programs are particularly susceptible to changes in funding allocations and regulations.

Apart from the obvious financial problems, administrators and staff complain of having little control over post-placement options for their residents, little say in discharge plans (which are too often determined by funding considerations or the decision of nonprogram staff), and receiving no feedback on youth after they leave the facility. There is often a sense of futility and powerlessness among staff, youth come and go by rules determined externally to the program and staff receive little or no feedback on the effects of their effort.

Economic instability and underfunding create conditions of low pay, uncertain job security, and few opportunities for career advancement. Coupled with the frustrations of lack of control within the system, staff burnout, high staff turnover and low morale are problematic.

Programs have been forced to adapt to these conditions, however the adaptations have contributed to new problems. Some of the solutions may be antithetical to the concept of community-based programs.



To insure more control over the flow of referrals and post-placement options programs are seeking to become multicomponent facilities with diagnostic, emergency, and short and long term residential units. With this structure referrals might come into multiple units, a youth could move through several programs in a sequential pattern, and the organization could better insulate itself from rapidly changing funding formulas by offering multiple services that could be scaled up or down depending on the circumstances. This type of arrangement resembles the old institution and risks the problems of overtreatment and youth becoming enmeshed in the system.

Other programs have adapted to organizational problems by describing their services in such a broad way that almost any youth could be eligible. This keeps all referral bases covered but undermines some of the philosophy of separating status offenders from delinquents, emotionally disturbed youth, etc.

A small number of facilities have contracted with a funding agency (e.g., corrections, welfare) for a fixed dollar amount covering the expenses of a full house, but the program retains control over admissions. This arrangement maintains the agency's autonomy and stabilizes its economic needs. The uncertainties and instability generated by funding problems remain a core issue in the development and functioning of community-based programs.

Several facilities have attempted to generate staff autonomy and rewards from within the program's operation. A few facilities have adopted a horizontal structure of decision-making to increase staff involvement and sense of control within the program. Most programs have tried to develop in-service training programs of some kind not only to enhance staff training

but also as a fringe benefit to individual staff members. The most financially secure facilities provide for regular staff retreats away from the program, graduate coursework at a nearby university, or as in one facility, a sabbatical year with pay to be used for personal and staff development.

Economics is frequently at the root of these organizational concerns, because it is so crucial to the agency's stability and continued existence. A critical issue for these programs is the degree to which fiscal allocations and funding formulas make it possible for organizations to maintain at least a marginally healthy lifestyle and be consistent with the community-based concept.

### Conclusions

The community-based model of services is still a relatively untried experiment in part because conceptual goals have not been clarified and organizational needs have not been adequately considered. The practical feasibility of this conceptual model necessitates a systemic commitment both in fiscal areas and in terms of the organization of services within the system. If a community-based system is desired to replace the institutional statewide system of juvenile programs, it will need adequate organizational supports to accomplish that mandate, and of equal significance, a conceptual framework translated into practice that distinguishes it from the traditional correctional system. Having been established on a shoe string budget and emotional and intellectual commitment, the typical community-based program has been forced to focus on survival issues over program issues. The adaptive mechanisms available to ensure survival have pushed these programs closer to the self-contained correctional model rather than further development of an alternative, community-based model.

References

- Coates, R. B. Community-based services for juvenile delinquents: Concept and implications for practice. Journal of Social Issues, 1981, 37(3), 87-101.
- Fixsen, D. L., Phillips, E. L., & Wolf, M. M. Achievement Place: Experiments in self-government with pre-delinquents. Journal of Applied Behavior Analysis. 1973, 6, 31-57.
- Lerman, P. Trends and issues in the deinstitutionalization of youths in trouble. Crime and Delinquency, 1980, 26, 281-198.
- Linney, J. A. Alternative facilities for youth in trouble: Descriptive analysis of a strategically selected sample. In J. Handler & J. Zatz (Eds.), Neither Angels nor Thieves: Studies in deinstitutionalization of status offenders. Washington, D. C.: National Academy Press, 1982.
- Linney, J. A. Deinstitutionalization in the juvenile justice system. In N. D. Reppucci, L. A. Weithorn, E. P. Mulvey, & J. Monahan (Eds.), Mental Health, Law and Children. Beverly Hills, CA: Sage, in press.