DOCUMENT RESUME

ED 388 931 CG 026 697

AUTHOR Bickel, Ann S.
TITLE Family Involvement: Strategies for Comprehensive Alcohol, Tobacco, and Other Drug Use Prevention Programs.
INSTITUTION Western Regional Center for Drug-Free Schools and Communities, Portland, OR.
SPONS AGENCY Office of Elementary and Secondary Education (ED), Washington, DC. Safe and Drug Free Schools Program.
PUB DATE Sep 95
CONTRACT S188A00001
NOTE 83p.
PUB TYPE Guides - Non-Classroom Use (055)

EDRS PRICE MF01/PC04 Plus Postage.
DESCRIPTORS *Alcohol Abuse; *Change Strategies; Drinking; *Drug Use; Elementary Secondary Education; *Family Involvement; Intervention; Needs Assessment; Parent Participation; *Prevention; School Activities; Services; Substance Abuse

ABSTRACT

Intended to aid administrators, school principals, and other program coordinators, this guide was written to improve the effectiveness of family involvement strategies that are necessary for comprehensive school alcohol, tobacco, and other drug (ATOD) use prevention programs. Themes discussed are: (1) reasons for creating many forms of family involvement strategies in ATOD prevention and intervention programs; (2) types of family involvement strategies and how they meet prevention and intervention goals; (3) family involvement strategies for ATOD prevention and intervention programs; (4) criteria for planning effective prevention strategies and outreach; (5) ideas for families with multiple problems; (6) issues blocking implementation and suggestions for overcoming them; and (7) activities for staff development and program planning. An appendix provides samples of awareness, needs assessment, and planning activities designed to improve family involvement strategies in school ATOD prevention programs. Contains 60 endnotes and a 49-item bibliography. (SR)

Western Regional Center
DRUG-FREE SCHOOLS AND COMMUNITIES

FAMILY INVOLVEMENT:

Strategies for Comprehensive Alcohol, Tobacco, and Other Drug Use Prevention Programs

Northwest Regional Educational Laboratory
101 S.W. Main Street, Suite 500
Portland, Oregon 97204

Far West Laboratory for Educational Research and Development
730 Harrison Street
San Francisco, California 94107-1242

The Southwest Regional Educational Laboratory
4665 Lampson Avenue
Los Alamitos, California 90720

Western Regional Center for Drug-Free Schools and Communities
Carlos Sundermann, Director

Northwest Regional Educational Laboratory
101 S.W. Main Street, Suite 500
Portland, OR 97204
(503) 275-9500

Field Office
828 Fort Street Mall, Suite 500
Honolulu, Hawaii 96813
(808) 533-6000

Far West Laboratory for Educational Research & Development
730 Harrison Street
San Francisco, CA 94107
(415) 565-3000

Southwest Regional Laboratory
4665 Lampson Avenue
Los Alamitos, CA 90720
(310) 598-7661

The contents of this publication were developed under Cooperative Agreement Number S188A00001 with the U.S. Department of Education. However, the contents do not necessarily represent the policy of the Department of Education, and endorsement of the contents by the federal government should not be assumed.

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Strategies for Comprehensive Alcohol, Tobacco, and Other Drug Use Prevention Programs

Ann S. Bickel
Southwest Regional Laboratory

September 1995

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ACKNOWLEDGMENTS

Family involvement is a required component of Title IV, Safe and Drug-Free Schools and Communities. However, despite the widespread interest in involving families, many schools experience problems with planning and implementation. This guidebook will help fill the implementation gap.

The guidebook's information, recommendations, and activities are drawn from the combined experiences of the Western Center staff, who have a variety of cultural, socioeconomic, social service, and teaching backgrounds. For the past nine years, they have provided training and technical assistance throughout the western states and the Pacific Islands in a wide range of topics related to comprehensive alcohol, tobacco, and other drug (ATOD) use prevention and intervention programming and school improvement in general. Other ideas are from focus groups held with families and teachers, conversations with professionals and practitioners in the field, attendance at conferences, and a study of the research literature.

The word *we* in this guidebook refers to Western Center staff.

Editing and formatting were done by the Communications Office staff at the Southwest Regional Laboratory.

I want to thank the following people for their thoughtful comments throughout the development of the guidebook: Carol Thomas, Sally Champlin, Jill English, and Carmen DeNeve from the Southwest Regional Laboratory; Andy Duncan, Stevie Burden, Jan Kennell, Harvey Lee, Trudy Lieb, and Mardell Taylor from the Northwest Regional Educational Laboratory; and Nancy Hugo from the Orange County Office of Education.

INTRODUCTION

The purpose of this guidebook is to help administrators, school principals, and other program coordinators strengthen family involvement programs. Its main goal is to improve the effectiveness of family involvement strategies recommended within safe and drug-free schools programs.

The information is unique because it shows how to connect two fields—general family involvement in education and comprehensive ATOD school prevention programs. Even though practitioners in both fields acknowledge the importance of working together, how to connect the fields effectively is not very well developed. On the one hand, research studies showing the effects of family involvement in school on ATOD use by youth are not being conducted. For instance, family involvement research looks chiefly at the relationship between family involvement and measures of school success, not at the relationship between family involvement and the prevention of ATOD use. On the other hand, the prevention field looks primarily at the relationship between parent education and prevention. Its perspective is limited to one very small piece of family involvement. To bridge this gap, this publication explores two questions: "Can strategies other than traditional parent education be helpful in meeting prevention and intervention goals?" and "How can schools organize family involvement strategies to meet prevention and intervention goals?"

Throughout, the term *parent involvement* is replaced by the broader term *family involvement*. Students live in and experience a variety of family arrangements and supports, including grandparents, siblings, foster parents, group homes, and neighbors, all of whom can provide significant educational support. Family involvement programs extend their reach to all who act as family to students.

Themes discussed in this guidebook are:

- reasons for creating many forms of family involvement strategies in ATOD prevention and intervention programs;

- types of family involvement strategies and how they meet prevention and intervention goals;
- family involvement strategies for ATOD prevention and intervention programs;
- criteria for planning effective prevention strategies and outreach;
- ideas for families with multiple problems;
- issues blocking implementation and suggestions for overcoming them; and
- activities for staff development and program planning.

CONCEPTUAL FRAMEWORK

One of the challenges of writing about the parent-school connection is its complexity. The conceptualization of parent and community involvement programs is different from school to school, district to district, program to program, and person to person. A number of schemata identifying the types of roles and relationships that can exist between families, schools, and communities have been developed, but no uniform conceptualization is evident in the literature.[1] Basically, we don't know or haven't clearly articulated what should happen to whom as a result of the many kinds of school-family connections.

Consequently, making suggestions for implementing family involvement is difficult. Nevertheless, we think that applying basic prevention and intervention criteria to planning will enhance the overall quality of family involvement strategies. This section articulates the basic concepts in prevention and family involvement used in this guidebook. First, prevention and intervention goals and methods are identified. Second, family involvement strategies are categorized. Third, implementation issues are raised.

Prevention and Intervention: Goals and Methods

An effective and comprehensive ATOD program needs to address prevention and intervention as separate components, each with different goals. The two components sometimes are confused, particularly in family education programs. Combining them is a mistake.

Prevention is the process of building conditions that promote the well-being of people. Family involvement programs have the potential to accomplish this in two ways:

- helping individuals acquire personal skills for healthy living; and
- shaping healthy community conditions.[2]

First, programs that provide information and awareness, connections to community networks, education and skill-building opportunities, activities, support services, and resources help individuals and families acquire personal skills. Second, programs that change community or school conditions, or both, mobilize the community, address education and social policy issues, or create resilient environments help shape community conditions.

Intervention is the process of interrupting a harmful pattern of behavior and helping the individual to change. Intervention is different from prevention because intervention is offered to students and families when a problem exists. Therefore, intervention is based on targeting identified students or their families, or both. It requires :

- a structured process (often a student assistance program);
- a system of gathering information; and
- methods of working with families individually or in small groups.

Intervention is difficult to categorize or simplify because it can take place in the early stages of a problem or in later stages, when the problem is more severe. The options for support are different all along this continuum of low-level to high-level problems. As a rule, the difference between early interventions and later interventions is that early interventions:

- are less intense;
- focus on fewer family issues;
- require fewer changes in the student and family; and
- are offered over a shorter period of time.

Obviously, intervening early is important when the problems are less severe and the school system's capacity to help is higher. In contrast, later interventions require intense responses and case management not always available at the school. Case management makes one-to-one personal contacts and the coordination of multiple support services possible. Families with multiple and

chronic problems benefit from immediate access to a variety of social services and long-term follow-up and support.

Three Types of School-Family Relationships

To create an organizational framework to present suggestions for program development, this guidebook divides the family-school relationship into three basic types.

Type One

Families in advocacy and support roles are best exemplified by activities or services parents provide to the school, to the community, or to their children to help the school meet its goals. The important aspect of this type of support is that the family works to complement, extend, or supplement the work of the school. Examples of this type of relationship are parents providing homework assistance, attending school events, reinforcing high expectations for school performance, volunteering on campus or in other activities, acting as chaperones for events, raising money, building complementary community resources, activities, and policies, and assisting with special events. The school is in the leadership role and determines the agendas and issues. Most communication is one-way, from the school to the home. Strategies of this type are fairly traditional and scheduled automatically from year to year.

Type Two

Schools in advocacy and support roles for the family are best exemplified by the communication, activities, and services schools provide to help families meet their needs so their children can function better in school. Examples of this type of relationship are:

- family resource centers;
- integrating on-site social, medical, and dental services;
- conducting before- and after-school alternative activity programs and daycare facilities;
- facilitating parent education classes and support groups;

- translating information about school programs and family rights; and
- Conducting home visits.

These practices are not traditional family involvement practices and can develop close two-way connections between the family and the school.

Type Three

Schools and families working collaboratively are best exemplified by activities in which families and schools join together to decide key issues regarding program development and implementation. Examples of these relationships are:

- developing a commonly-defined vision;
- obtaining consensus for goals and objectives;
- sharing authority and decisionmaking;
- working together to evaluate programs or select curricula; and
- building community collaborations.

The Changing Family

- Families are smaller.
- More children live with only one parent, usually the mother.
- About half of all marriages end in divorce, most involve children.
- More mothers as well as fathers hold jobs and work each day.
- More children live in poverty.
- More children without health care coverage.
- More families with multiple problems.
- Changes in roles and routines resulting in parents and children spending less time together.[3]

The Challenges

Even though we don't know the exact nature of the relationship between family involvement in schools and ATOD use, we do know that all comprehensive programs must implement family involvement. Two challenges confront ATOD program coordinators.

The first challenge is to develop strategies within all three of the above types of involvement while also designing them to support both prevention and intervention goals. Almost all current school-site practices are of the first type, but these strategies were never meant to be used for prevention. In fact, only a few of these strategies have value for prevention efforts and none has value for intervention efforts. Strategies developed within the second and third type have greater potential to help students and families prevent and intervene with problems.

The second challenge is to design programs that are relevant for the changing family and also acceptable to educators. The school is in the position of finding new ways to reach out to families. Traditional forms, such as morning parent association meetings and open houses, are not effective for large numbers of families. But at the same time, because these same demographic changes also affect educators, they are not always available for meetings in nonwork hours. Consequently, the ATOD coordinator is charged with finding alternative ways of including all families.

THE IMPORTANCE OF FAMILY INVOLVEMENT

"Every school will promote partnerships that will increase parental involvement and participation in promoting the social, emotional, and academic growth of children."[4]

Strong home-school partnerships are fundamental to successful schools and are required components of comprehensive alcohol and other drug prevention programs for several reasons.

Strengthening the school-family partnership is a clear federal priority.

All major school change movements, including current systemic reform legislation, emphasize building partnerships with families. The eighth goal of Goals 2000 states, "Every school will promote partnerships that will increase parental involvement and participation in promoting the social, emotional, and academic growth of children." The Improving America's School Act (IASA) strengthens the requirements for family partnerships and allows greater latitude for schools to expand parent services, such as literacy workshops, home visits, and parent centers. Advisory boards incorporating community representatives and parents for school planning and governance are required in all restructuring and reform movements as well as in most categorical programs, such as drug-free schools and communities funding. The new Title I of the IASA requires each school that receives Title I funds to develop jointly with parents a school-parent compact that outlines how parents, school staff, and students will share responsibility for ensuring improved student achievement. The Appendix contains more detailed information on these school-parent compacts. The following table depicts the common characteristics of family and community partnerships in National Education Reform Legislation of 1994 and 1995.

Common Characteristics of Family and Community Partnerships in National Educational Reform Legislation of 1994 and 1995

LEGISLATION	PURPOSE	PARENT EDUCATION COMMUNITY COMPONENT
GOALS 2000: EDUCATE AMERICA ACT	To accomplish national education goals by improving student learning through a "long-term broad based effort to promote coherent & coordinated improvement in the system of education." Encourages local, community based reforms to meet needs of every student at risk, including dropouts, & coordination with school to work & vocational education.	• Encourages parent involvement in education • Provides for the creation of family information and resource centers • Requires that parents be represented on state and local school improvement panels
IMPROVING AMERICA'S SCHOOLS ACT OF 1994	To provide funds for services for students with special needs, with majority targeted for compensatory services to low-achieving students New changes reduce federal role in prescribing use of program funds, increase local accountability for improving achievement & emphasize coordinated use of funding by LEAs.	• Increases parent involvement through policy involvement at school & district level; parent training; shared parent & school responsibility for improved student achievement through school parent compacts • Requires that districts and parents develop a written parental involvement policy • Applies to Titles I, IV, VII
SCHOOL TO WORK OPPORTUNITIES ACT	To establish a national framework to help states create state & local School to Work Opportunities systems integrated with Goals 2000 systems that offer all youth access to performance based education & training that results in portable credentials, preparation for first jobs in high skill, high wage careers & increased opportunities for higher education.	• Requires that parents be partners in the development & implementation of School to Work Opportunities systems at state & local levels
CARL D. PERKINS VOCATIONAL AND APPLIED TECHNOLOGY EDUCATION ACT	To make U.S. more competitive in a world economy through full development of academic & occupational skills in all people by concentrating resources on improving programs leading to academic & occupational skills needed for a technologically advanced society.	• Requires parent notification of available vocational education programs & eligibility requirements for enrollment in these programs • Provides grants to provide vocational opportunities to single parents/displaced homemakers & single pregnant women
INDIVIDUALS WITH DISABILITIES EDUCATION ACT	To ensure all eligible children with disabilities have available a free appropriate public education that includes special education & related services to meet their unique needs; to protect their and their families' rights; to assist states and localities to provide for appropriate education & services; & to assess & ensure their effectiveness.	• Requires parents, LEAs & other agencies to work together to determine the child's appropriate services & educational needs • Mandates parental involvement in development of local plan • Offers training as part of the comprehensive system of personnel development (CSPD) • Requires individualized Family Service Plan for children (birth-36 months) with disabilities or at risk and their families

Parent involvement improves student achievement.

"The evidence is now beyond dispute. When schools work together with families to support learning, children tend to succeed not just in school, but throughout life."[5] And when children do better in school, they reduce their risk of alcohol and other drug-related problems. In her book, *A New Generation of Evidence: The Family Is Critical to Student Achievement,*[6] Henderson describes and analyzes the research evidence on family involvement in education. Her analysis indicates that because of family involvement, students show:

- higher grades and test scores;
- better attendance and homework completion;
- fewer placements in special education;
- more positive attitudes and behavior;
- higher graduation rates;
- greater enrollment in postsecondary education;
- more effective transition to work; and
- increased civic responsibility and citizenship.

Family involvement programs can help to build school environments that foster resiliency in youth.

Resiliency can be enhanced by families and schools working together to build school environments that are caring and supportive, have high expectations for all youth, and provide plenty of opportunities for all youth to participate in school activities. Resilient youth are better able to avoid problems and deal with stress because they have good coping skills.

ATOD prevention and intervention require integrated and comprehensive strategies for both the individual and the environment. "Clearly, a preponderance of evidence demonstrates that schools have the power to overcome incredible risk factors in the lives of youth. In his classic study on school effectiveness,

Ron Edmonds concluded that a school can create a *coherent* environment, a climate more potent than any single influence—teachers, class, family, neighborhood—so potent that for at least six hours a day it can override almost everything else in the lives of children."[7] Working together, the family and the school can build this type of educational environment.

Family involvement programs can increase family learning and the capacity of families to reinforce school learning.

Evaluations of family literacy programs indicate that children and families improve their learning and parents also change attitudes and improve parenting skills. Also, parents' expectations of their children's future education improve significantly. For instance, parents:

- gave their children more choices and increased independence;
- increased reading at home;
- engaged in "school-like" activities with children, and sang songs with children;
- provided more reading materials at home; and
- used less physical punishment and more positive discipline with their children.[8]

These results are consistent with the protective factors described earlier.

Family involvement programs build a united front to address needs and problems.

Schools and families need to be consistent and predictable. Health concepts taught in the classroom need to be reinforced in the home. Rules established on the school site need to be supported by the family. Interventions for problem behaviors need to be handled as a team effort. Effective policy needs to be developed jointly.

Clearly defined and consistently applied rules form the foundation for good prevention. The community and the school have to

decide what's OK and what's not OK regarding alcohol and other drugs. Then they have to communicate these rules, develop ways to respond to broken rules, and create support services to provide to youth and families when the rules are broken.[9]

Family involvement programs can strengthen families.

"Family members, because they influence the child's early psychosocial environment, have a tremendous impact on the child's vulnerability or proneness to alcohol or drug use."[10] Early family environments, in particular, play a key role in ATOD behaviors.[11] Children raised in nurturing environments have fewer problems.

Family involvement programs have the potential to provide education and support to families to increase their capacity to prevent problems and to help their children when problems do occur.

Family involvement programs can help align the culture of the home with the culture of the school to improve interactions.

Significant differences exist among the values, structure, and language of schools and the home cultures of many students and families. When school staff represent many cultures in school programs and activities, they increase school bonding for students and families. One obvious way to reduce the gaps between the home culture and the school culture is to ask family members to help with program planning and implementation. Increasing two-way communication between families and schools will increase understanding and create a climate of shared understanding for successful problem-solving.

Family involvement programs can increase bonding to the school.

Effective prevention reinforces bonds between families, schools, and communities. Bonnie Benard's summary of resiliency research states, "To ensure that all children have opportunities to build resiliency—to develop social competencies (like caring and responsiveness, problem-solving skills, autonomy, and a sense of purpose and future), we must work to build linkages between families and schools and between schools and communities."[12]

When students, families, and teachers know each other and have ongoing opportunities to communicate, students feel supported, problems can be resolved early, and student failure is reduced.

"Recovery is not a simple matter of the chemical dependent just changing roles (dependent for sober). A whole new 'person' is added about whom no one really knows much and, least of all, trusts."[13]

Family involvement in intervention increases the likelihood of successful recovery.

Recovery from ATOD-use problems almost always requires people around the recovering student to change. Even though the main work of recovery must be done by the youth, others also must change. Very often family, friends, peers, teachers, or the environment have accommodated themselves to the habits and problems of the student. The family, in particular, is frequently locked into rigid roles that can maintain rather than stop the problems. Furthermore, the family often feels so overwhelmed that it has a hard time knowing how to solve its problems. Some families have a hard time seeing the full nature, scope, and implications of their children's problems.

Recovery usually requires either the student to leave the family system or the family to change. Family involvement programs for students in recovery provide information and support to change the family along with the student.

Although many questions remain unanswered, it is clear that involving the family in school partnerships can pay dividends for all: students, parents, districts, and communities. "In general, the research demonstrates that parents can be powerful contributors to their children's education, both stimulating and reinforcing their children's learning."[14] And all families, regardless of socioeconomic or cultural backgrounds, can be helped to help their children.[15]

PROGRAM STRATEGIES

The following program strategies are organized by the three previously outlined types. Only those strategies that offer potential to enhance prevention and intervention programs are included. Those selected are broad and diverse enough to provide a number of options to meet the needs of almost any school and community. Strategies with little relevance to prevention and intervention goals are excluded. When possible, a practical example illustrates each strategy.

Type One Strategies: Families Supporting the School

When families complement the efforts of the school by taking an active role in shaping the safety, health, and resiliency of their school and community or by supporting student learning, they are engaging in prevention.

Type One strategies are prevention strategies when they:

- improve student success;
- target community problems;
- meet unmet needs;
- reward teachers;
- raise money;
- increase cultural pride;
- influence community norms and policies;
- reduce ATOD availability;
- improve social and economic conditions for youth and families; and
- reinforce school policy throughout the community.

In these activities, the school and the family communicate and cooperate basically in parallel. Little joint work or mutual decisionmaking is necessary.

Family Action Teams[16]

Action teams are parent organizations that take on projects, usually focused on a single issue, to reinforce the school and community no-use norms. These groups vary widely because activities are determined by local needs and the age of the students. Action teams work in four primary areas: (a) legislation and policy, (b) school safety, (c) alternative activities, and (d) information and awareness. Some examples are:

Legislation and policy: These action teams work on issues such as zoning for alcohol outlets, regulations on liquor and tobacco sales, legislation to ban sale of drug paraphernalia, use of forfeiture assets, laws designating drug-free zones around schools, policies encouraging community policing, and curfews. A few have tackled sales of fortified wines containing 15 percent alcohol or more, such as Night-train and Thunderbird, and the sales of single cigarettes. Others focus on advertising and media images promoting the use of alcohol and other drugs.

> *In Orange, California, parents persuaded several local limousine services to sign contracts not to serve or allow alcohol in their vehicles. Companies' names were published and parents were urged to use their services.*[17]

School safety: These action teams work to improve school safety and reduce problems with fighting, violence, and gangs on school grounds and in the schools' immediate neighborhoods. The teams focus on issues such as safe passage to and from school, patrolling halls and campuses, dress codes, and graffiti. Examples of such teams follow.

"When the parent shows up at the school door and takes part in the life of the school and obviously cares about what happens to his or her children, that makes the teachers care more and work harder." Nydia Mendez, Principal, Paul Dever School, Boston.[18]

Parents on Campus, Kennedy High School, Sacramento City Unified School District, Sacramento, California, for example, formed in reaction to a shooting on a nearby campus. They improved school safety by walking the campus. Suspensions, on-campus violence incidents, and injuries declined, and school-home communication also improved as a result of their support to the school.

The ATOD Prevention Steering Committee at Monte Vista Elementary School in Highland Park, California, picked gang-related drug sales and graffiti as their two main problems to address.[19]

Alternative activities: These teams sponsor events that usually are associated with alcohol and other drugs, such as graduation or prom night, and conduct them in a drug- and alcohol-free atmosphere. Grad night parties are good examples of parent-sponsored activities. The teams also organize alternative activities and daycare for youth.

In Los Alamitos, California, parents and students organized Drug Alternatives Nights and Counseling Events (DANCE) to provide weekend alcohol- and drug-free dances for high school students. Activities have expanded to include middle school students.

At Kauai High School in Lihue, Kauai, Hawaii, a partnership between Parents in Support of Raider Students, the Parent Community Networking Center, PEP, RAAD, and the Kauai High School Drug Advisory Core Team sponsors Project Graduation, an alcohol- and other drug-free celebration.

Information and awareness: These teams organize awareness and information campaigns, such as Red Ribbon Week, to make the community aware of the problems and to generate support for problem-solving. Teams build awareness campaigns around school-sponsored events, such as Halloween

carnivals, health fairs, contests, races, sporting events, concerts, parades, and assemblies. They write columns in home-school newsletters. They use bulletin boards, school buses, banners, bumper stickers, billboards, pencils, student ID cards, T-shirts, lunch tickets, milk cartons, and athletic uniforms to get their messages across.

Information programs for parents and other family members often are sponsored by action teams. Programs can be held on prevention and intervention strategies, risk, and resiliency; the continuum of alcohol and other drug use, abuse, and dependency; the dynamics of denial; systems of enabling; children of alcoholics; components of a student assistance program; treatment and recovery; support groups; and relapse prevention.

The Parent Advocacy Committee formed by the Los Angeles Alliance and the Mexican American Legal Defense Education Fund (MALDEF) organized parent leadership workshops to help families learn to communicate with teachers and administrators.[20]

Parent Networks

Parent networks are organized groups of parents who support each other in discouraging the illegal use of alcohol and other drugs by their children.

A good example of a parent network is the Kennewick Parent Network in Kennewick, Washington. Starting in winter 1991, a team of 50 parents and 13 school staff members met over a four-month period in workshops to learn alcohol and other drug information, school and community prevention *and* intervention strategies, and how to organize a parent network. Network parents sign an agreement stating that they will oppose ATOD use by youth, work to educate themselves about the issues, actively chaperone events and not serve ATOD in their homes, endorse general weekend curfews, and communicate with other families about youth activities and plans.[21]

Support for Learning

"School failure is a significant influence on both initiation and escalation of use, and especially as it affects peer associations."[22]

Although support for learning is not a specific program model, it is included as a Type One strategy, because it meets prevention goals. When families reinforce the academic work of the school, they reduce the chances of school failure, and school failure is linked with problems with ATOD use.[23]

Type One activities can support prevention but not intervention programs because these activities do not target specific populations with tailor-made strategies.

Type Two Strategies: School Supporting the Families

Prevention and intervention goals can be met from implementing Type Two strategies because they strengthen individuals and families. Type Two strategies range from comprehensive on-site family resource centers to simple educational classes. Their commonalty is the role the school plays in helping families meet their needs.

Type Two strategies are prevention when they offer families opportunities to:

- meet basic needs;
- access social, mental health, medical, and other community resources;
- develop relationships with other families;
- increase trust and bonding with the school;
- understand their role in improving student learning;
- participate in activities;
- improve literacy;

- acquire information in a range of areas;
- improve family management techniques; and
- develop life skills, such as decisionmaking and stress reduction.

Type Two strategies also can be adapted to serve as intervention strategies. As such, they must be designed to offer individualized, in-depth service over a period of time.

For many schools, this form of reaching out to help families represents a major shift in the school's relationship with families and other community institutions. Don Davis, a prominent researcher in the field, says many schools are "redefining themselves as community institutions."[24] They are assuming a responsibility in addressing social and economic needs so students can learn better.

Family Literacy Programs

"Family literacy programs combine adult literacy education and early childhood education with parenting education."[25] They help families not only to acquire skills to support themselves, but also to feel comfortable and confident with schools. Ultimately, family literacy programs help parents become better equipped to support their children in school.

The Even Start Family Literacy Program, funded by Title I through the U.S. Department of Education, focuses on parents with children from birth to seven years of age. California administers a variety of Migrant Education Even Start Programs, also for parents with children from birth to seven years of age. These programs help migratory parents increase their literacy and parenting skills. Some Even Start projects also offer intergenerational activities, physical education experiences, and home-based instruction.[26]

Family Resource Centers

What Family Centers Give

- hope and expectation;
- a way to dramatically and symbolically say that our school is "family friendly";
- creative space;
- a meeting ground for diverse programs;
- new energy to the school's climate;
- new strength to the bond between families and school;
- tangible support for families, teachers, and children; and
- a way to build on the cultural diversity of the school.[27]

Family resource centers are places within schools that are set aside for family activities. They create a positive relationship between the home, school, and community. Centers provide parent training, support groups, tutoring, volunteer training, social events, and access to community resources. According to Vivian Johnson from the Center on Families, Communities, Schools, and Children's Learning, family resource centers communicate to families that they are important to the fabric of the school.[28]

At Memorial Academy for International Baccalaureate Preparation, a junior high school in San Diego, California, composed primarily of Latino students, high levels of parent involvement are maintained through family center activities. One unique program, Parents' Presence, uses parents to "sit in" with teachers who are experiencing disruption or misbehavior in a class.[29]

Mobile Outreach Units

Mobile outreach units bring information and resources to families. Like parent centers, they build trusting connections with families, particularly hard-to-reach, isolated families. Parenting skills classes, literacy training, introductions to computers, math and science basics, how to communicate with teachers, and how to help with homework are standard offerings for mobile outreach units.

In the Natchez-Adams School District, the Chapter One Learning Labs on Wheels travel between four housing projects. Vans are equipped with computers, educational software, and learning areas.[30]

Home Visits: Family Advocate and Outreach Liaison

"One junior high school class whose parents had individual meetings with counselors the summer before seventh grade not only had higher attendance rates, but also better grades and lower dropout rates, compared to the class entering the year before."[31]

Home visits, like mobile units, are personalized outreach activities for promoting collaborative, successful relationships between home and school. Home visits are good ways to get to know a family and to gain insight into culture, values, and expectations. Beyond traditional written methods of inviting families to events, home visits are effective personal invitations to come to school. Home visits are important for both prevention and intervention. Prevention visits, conducted for all students before they enroll or enter a new school, build trust and rapport between the school and the family. Intervention visits, conducted to solve problems, signify to the family that the school is interested in helping them. Further, it's difficult for families in poverty or those without phones, child care, or transportation to visit school. Others don't speak English. Still others have little familiarity with educational institutions and are uncomfortable coming to the school.

In Atenville Elementary School, Harts, West Virginia, home visits are used not only to help families but also to learn about the attitudes and barriers that keep many families from being involved in school. Parent volunteers, the parent coordinator, and teachers all assist in home visits.[32]

Tutoring and Homework Support

"For most districts where parent involvement was 'pro forma' and consisted either of filling out a questionnaire or attending large group meetings, the achievement of the pupils was similar, but less than the achievement in the district where parents participated in deciding what was taught and had responsibility for working with the teachers and children."[33]

Homework support strategies help both students and families. These support strategies make teachers, phones, and rooms available to help students or families in the evenings and on weekends.

Both on-site and off-site locations can be used, depending on the needs of the families. Satellite tutoring centers in neighborhoods, churches, housing projects, storefront rooms, shopping malls, or homes meet the needs of families unable to come to the school building.

In McAllen Independent School District, McAllen, Texas, Parent/Student Community Evening Study Centers are available in four locations, two nights a week. Centers house tutors for students and they also offer oral language development, reading, and parenting skills to parents. Funding comes from Titles I and II and Migrant Education.[34]

Family Support Groups

Support Groups for Families: Tips

Support groups for families will be effective when they offer the following:

- instillation of hope;
- sense of safety and support;
- cohesiveness;
- universality;
- vicarious learning; and
- interpersonal learning.[35]

Support groups offer parents the opportunity to share similar experiences and problems with other parents. The groups should be small, emphasize problem-solving, and organize around common concerns. Support groups for families of substance-using youth are particularly important for two reasons. First, they help families break the isolation that often accompanies alcohol and other drug use. Families feel supported by others who are experiencing similar problems. Second, they bring the family into the recovery process. Recovering youth who return to families that have not changed are at very high risk of returning to old patterns.

Some support groups are self-help and are conducted without leadership; others are facilitated by a parent or professional facilitator skilled in group process.

A unique grandparents' support group in Monterey Peninsula Unified School District, Monterey, California, connects custodial grandparents. In group discussions, they share experiences and ideas about health care, community resources, alcoholism and other drug addictions, co-dependency, caring for drug-exposed babies, and parenting skills.

Family Mentoring

Mentoring programs place parents in supportive relationships with other parents. The existence of a positive relationship between a child placed at risk and at least one adult outside the home is known to be an effective prevention strategy.[36] This research

finding applied to adults helps families cope with conflicts, identify resources, and handle other parenting challenges.

At the Paul Robeson High School in Chicago, mentor parents nurture other parents and students and reach out to new parents to welcome them to the school and encourage them to become involved.[37]

Family Social Activities

The purpose of providing social or recreational activities for families is to connect them with one another and to the school. Activities should be fun. In needs assessments we conducted with families in two elementary schools in the Los Angeles area, we found that parents want to make friends with their neighbors, create support networks, and interact informally with the school. In addition, families with substance-using problems have been found to have fewer social supports in the community, and school-sponsored events might serve as good opportunities to break some of the isolation.

At P. S. 146 in East Harlem, New York, the principal sees the school as "being in the family education business." Consequently, she offers a variety of resources and opportunities for families on the school's campus. For example, on Thursday mornings, the psychologist runs an art club that brings families together in a nonthreatening atmosphere. Basically, the school is an extended family for parents and children.[38]

At Pearl City Highlands Elementary School in Hawaii, a kite-making workshop was held for families and children to work together to build a kite. A family outing to fly the kites followed.

Leadership and Development

The purpose of parent leadership development programs is to help family members acquire the personal and social skills necessary for them to become leaders in parent groups, communities, and schools. Programs should be offered over a long period of time because building skills requires many opportunities for practice and feedback. They should begin with community, grass roots

outreach, extensive information, and awareness classes, and personalized mentoring and counseling. They should offer ample opportunities to observe classroom instruction and to communicate with school staff.

Family Phone Tree

The purpose of helping families create a family phone tree is to connect families with one another, assist in bringing information from the school to homes rapidly and systematically, and develop social and personal skills for the individuals doing the phoning.

Schools using *Tribes, A New Way of Learning Together* incorporate aspects of leadership development, parent mentoring and pairing, and a phone tree. Teachers identify two parents of students in each classroom. These parents are invited to become facilitators of parent groups. The parents then receive training to facilitate parent discussions, after which they phone all other classroom parents to invite them to the discussions, and finally they organize the parents into support and information networks. The system is based on parents reaching parents rather than teachers reaching parents.[39]

Family Math, Science, or Language Arts Project Events

The purpose of offering project events is to increase understanding of the science, math, or language arts curriculum, to show families how to have fun doing projects together, and to encourage high expectations in students and families. Events can be held in the evenings or on one of the weekend days. Mobile outreach units also conduct these types of events in neighborhoods.

The "Say YES to a Youngster's Future" program in Houston, Texas, is designed to engage the families of elementary school children. Students must be accompanied by a parent or another adult relative at the "Say YES" sessions, which meet on Saturdays for classroom experiments or field trips. For some families in Houston, these are completely new experiences. All activities are hands-on approaches to science and math. Examples are "kitchen chemistry," observing celestial bodies, understanding simple machines, and studying plants and animals.[40]

School-Based Services

"All families need support at some times—support that transcends any single agency's mission. Collaboration among child- and family-serving agencies offers an important mechanism to meet multiple needs of parents and children."[41]

School-based services programs provide families with convenient access to a wide variety of social, emotional, and health resources. Because many families are unable to access community resources, these programs bring the services to the schools. Services range from on-site health and dental clinics to full-service support centers containing welfare offices, family counselors, job search and employment counselors, food and clothing banks, and other support services for families.

The U.S. General Accounting Office report concludes that school-based health clinics do improve children's access to health care and that locating services where the children are increases the convenience for students and parents.[42]

The Family Support Wing at O'Farrell School in San Diego County, California, occupies an entire wing of the school and is staffed by a full-time coordinator and a psychologist, counselors fluent in Spanish and Laotian, and family advocates, among others. The school has formal relationships with nine community agencies. Services include gang intervention, crisis intervention, parenting skills and support, drop-in services, counseling, service learning opportunities, drug and alcohol counseling, employment training, tutoring, parent involvement, etc. Monthly meetings are held where all agencies involved with the O'Farrell School talk about how they can work together.[43]

Family "Customer Service" Phone Line

The purpose of creating a "customer-service" special telephone line for families is to build trust with families, to help families answer their questions, to encourage two-way communication, and to increase access to a broad range of diverse families. Calling a school can be confusing, intimidating, and time-consuming. How do parents know whom to call when they have general questions or when they want to express complaints or concerns? Impersonal answering machines that are used widely for homework hotlines,

to report absences to families, or to answer the general switchboard calls act as a barrier to many families.

We suggest schools consider establishing a toll-free 800 number reserved just for parents or other family members to contact the school. It only needs to be staffed for a portion of each day, but it is highly identified by families as their link to the school. Some family members can't read, some have never been to school, and others need alternatives to written communication.

Parent Universities

The purpose of parent universities is to provide information for families on topics related to school success, to provide an occasion for families to meet one another, to disseminate resource materials, and to build strong connections between the families and school staff. Parent universities are conferences, usually held all day Saturday, that include a variety of seminars on self-esteem, gang violence, ATOD use, communication skills, school programs, homework, and other topics of interest to families. Lunch, baby-sitting, workshops in several languages, and community resources normally are provided.

Family Education/Training

The purpose of providing parent or family education is to increase the effectiveness of family functioning and, in particular, to help families prevent ATOD use by their children. Many family-related factors place students at risk for substance use or other problems. Inconsistent family management and discipline, unpredictable rules, inappropriate expectations for the child's age, negative role modeling of ATOD use, undefined or reversed roles, and the inability to communicate needs and feelings are a few of these factors.

Parent Education for Multiple Problem Families: Tips

- Link parent education to the school identification and referral process so youth and families can be helped at the same time.
- Offer support when the problem is the most severe, don't wait.
- Contacts always should be personal.
- Phone throughout the program, immediately before and after each meeting.
- Have reliable and swift contacts with individual counseling, family support groups, and other community resources.
- Use well-trained, paid staff.
- Teach very practical, daily problem-solving strategies.
- Avoid video-based programs, rely instead on group discussions and role playing.
- Support and encourage, don't lecture.

Parenting programs strive to help families create effective child-rearing skills and knowledge of how to maintain a supportive family environment. Communication skills, appropriate behavioral expectations, ways to supervise and discipline, early warning signs of alcohol and other drug use, problem-solving techniques, building and setting limits, and family bonding are standard for most programs. The most effective programs provide information and opportunities to learn and practice new skills.

Parent education should be personalized to the maximum extent possible. Effective programs offer different curricula for different groups, and they also separate programs for general prevention from those for intervention. Kumpfer suggests offering three different types of programs: general population family programs, high-risk family programs, and in-crisis family programs. She further suggests using family education programs that work on developing or changing specific parenting skills because these behavioral parent training programs show the best results for improving family functioning.[44]

Type Three: Schools and Families Working in Collaboration

Collaboration is the process of working together to identify and achieve common goals that could not be accomplished by working independently. Currently, the driving concepts in federal, state,

and local policy development are collaboration, partnership, inclusion, and shared governance.

Do school-family collaborations have anything to do with ATOD prevention and intervention? Will youth be prevented from taking health-compromising risks or will youth receive better intervention supports because the school and the family plan and work together as one unit? We think partnership programs increase communication and can establish trust and mutual support between schools and families and have the potential to reduce student problems. Also, joint problem-solving, or the strongest form of collaboration, has the potential to result in significant changes in school policy, school organization, and community norms.

Type Three strategies are prevention when they:

- offer families meaningful opportunities to participate;
- strengthen the relationship between the home and the school;
- build leadership capacity in family members;
- give families ownership of some aspects of school; and
- increase mutual understanding between diverse social and cultural groups.

Community Mobilization

Community mobilization activities coordinate and expand community prevention efforts. Leadership for community mobilization is shared frequently by school and community leaders, often families of students in school. They work to bring together a broad-based coalition to assess the needs, build a plan, identify resources, take action, and follow through with evaluation and monitoring for improvement.

Community Education

Parent-Community Networking Centers (PCNCs), in Hawaii since 1986, are designed to address the needs and goals of the school and community. "The centers are school-based gathering places for

parents, teachers, volunteers, and professionals to foster learning, sharing, and caring and to generate programs and activities responsive to expressed needs and concerns." Their mission is to "facilitate a sense of community in and among home, classroom, campus, and neighborhood so that supportive networks for personal development and performance are created and nurtured."[45] Each center is staffed by a part-time facilitator who is under the direction of the school principal. Programs might include the following types of components:

- drop-in center;
- parent education;
- literacy classes;
- after-school enrichment activities;
- family camps;
- homework center;
- family support services;
- food and clothing centers; and
- partnerships with other agencies.

Over 60 percent of Hawaii's 238 schools have fully funded PCNCs.

School Improvement Teams

School improvement teams plan, implement, and evaluate school improvement plans, which are developed with parent input.

Goals 2000 Community Collaborations

The purpose of the Goals 2000: Educate America Act is to accomplish the national education goals by improving student learning. The vehicle for these long-term, broad-based efforts is a community collaborative that requires the participation of families/parents in meaningful roles.

Advisory Boards

All education reform legislation requires family/parent advisory groups for services for students with special needs or for services targeted to low-achieving students. Other categorical programs, including some funded outside the Department of Education but nevertheless affecting schools, require advisory processes, e.g., safe schools, vocational education, school-to-work, bilingual education, migrant education, Head Start, Indian education, and Even Start.

Four School Improvement Models[46]

The School Development Program's model brings about school restructuring and academic improvement for poorly performing public schools serving the poor. Two teams guide the process: a governance team and a mental health team. Parents work with administrators on the governance team.

Shared Decisionmaking: Tips

To avoid confusion, shared decisions must be thought through carefully beforehand. You should know:

- Who will be involved in the decision?
- At what level will each team member be involved?
- Will decisions be made by majority rule, consensus, or unanimous consent?

The Accelerated Schools' model brings about school improvements through a comprehensive planning process. The steering committee and the task forces involve parents.

Both the League of School's Reaching Out and the Center For Collaborative Education's models bring about school change through partnerships with families, schools, and communities. Each believes that building on the strengths rather than the deficits of families will improve student social and academic growth, and foster family participation as critical to resolving ethnic, racial, and class tensions. Shared decisionmaking, parent and teacher work study groups, parent centers, parent training programs, and parent outreach workers are common features.

Nevertheless, despite the rhetoric about the need to include families in decisionmaking processes, meaningful roles for families as partners are not yet a reality in most schools. The absence of the "parent voice" is particularly marked among parents who do not speak English.[47]

"In fact, it appears that the more programs take on a "partnership" relationship with families, the more successful they are in raising student achievement to national norms."[48]

CHARACTERISTICS OF EFFECTIVE OUTREACH AND PROGRAM PLANNING

A good relationship is far more important than any single activity in establishing an effective family involvement program. Careful planning and effective outreach are the two most important aspects of building a good program, because the basic relationship between the home and the school is defined through them. To illustrate, programs that include families in the planning stages communicate that families are important and considered partners. On the other hand, programs offered at times when most families are working or unable to attend communicate that the needs of families are less important than the needs of the school.

Even though no formula exists, successful programs have most of the following common characteristics. All of these are appropriate for both prevention and intervention programs, but some additional suggestions for intervention programs are made in the next chapter.

Relevance

Relevance is the single most important characteristic of effective family involvement programs, both prevention and intervention. People participate when their personal needs and interests are understood and met. Ask parents what they want, provide it, then ask them if they got what they wanted.

Programs relevant to families might not be relevant to schools, e.g., schools provide parent education classes, but they are poorly attended, because the majority of families believe they are doing well with parenting. Most of the time parents want information on specific educational programs, testing, or curricula. They want to know how to interact with the school to benefit their children or how to bring their children under control. Relevance is only obtained by including families in program planning.

Trust

People become involved when they trust the setting. Some family members do not trust school environments, because they have had negative experiences with schools. Individuals who were labeled,

dropped out, can't read, don't speak English, or experienced other rejection and failure in school will not participate in programs at school unless trust is established.

To increase trust:

- Offer understanding, hope, and acceptance. Communicate such messages as, "You are not alone." "Other parents have similar worries." "We can provide you with support and assistance." "It's tough to be a parent today."

- Be positive. Communicate such messages as, "Other families have worked things out, you can also." "We can work together."

- Go to families—their churches, neighborhoods, housing developments, shopping malls, or street corners. Use mobile outreach. Establish a storefront office.

- Show family members that you understand something about their decisionmaking or why they have made the choices they have. Don't lecture or preach. Listen.

- Make one-to-one contacts. Never use flyers or letters in intervention programs. Telephone or visit homes. Use another parent or community person, if necessary. Be relentless. Call the day before an activity.

- Use parents to conduct outreach.

- Match the backgrounds of the outreach staff with the backgrounds of the families you want to involve. Communicate in the language of the family, when it's possible.

- Ask parents to evaluate family involvement programs and modify them accordingly.

Incentives

People participate when they get something in return. Even though relevance and trust serve as incentives, other intangible and tangible rewards also do. Families want practical applications,

strategies to try, and answers to their questions. They don't want their time wasted. Communicate clearly that they will go home with something important and useful. Additional intangible incentives are making friends, helping their children, finding families who speak their language, and feeling important. Schools motivate people with some of the following tangible incentives:

- meals;
- gifts;
- door prizes;
- entertainment;
- certificates;
- child care; and
- transportation.

Child care is a very important incentive. It is less important than relevant programming, but essential for families that are very hard-to-reach. [49]

Participant Ownership

People participate in what they create. When families share in the decisionmaking, they are more likely to be committed to the programs that emerge. When families have the opportunity to participate, they are not passive recipients of information, but partners with responsibility to shape the programs to meet their specific needs.

Shift responsibility for planning and decisionmaking from the program coordinator and school staff to the families. Place the emphasis on working with the family rather than on providing for the family. Other suggestions for building family ownership are:

- Use a parent advisory board.
- Build groups of parents and teach them to teach others or to recruit others.

- Create a parent hotline network.
- Have parents conduct program evaluations.
- Train parents to lead or co-lead discussion or support groups.
- Have parents conduct needs assessments.

Creativity

Use a variety of program formats to provide information and teach personal skills. People learn and accept new information in many different ways. Some youth, for example, excel in the arts but fail in math or spelling. Parents are the same. When possible and feasible, use alternatives, such as the arts, drama, music, or photography.

Convenience and Safety

Make access to program activities easy and direct. Reduce fragmentation as much as possible. Hold programs in convenient locations and at times when families are available to attend, such as weekends and evenings. Use well-lit and comfortable rooms with easy access to parking. Post signs so people know immediately where to go. Obtain adult-size chairs and tables if meetings are on an elementary campus.

Space

Designate a place for families in the school to congregate, organize activities, conduct meetings, post information, share ideas, and meet with school staff or community or business partners.

INVOLVING FAMILIES WITH MULTIPLE PROBLEMS

High-risk, hard-to-reach families with problems do not flock to programs. All families protect the status quo, but families with problems resist change the most. Provide support by using characteristics discussed earlier plus others presented here.

"Homeostasis is the strongest of forces. When all the props are knocked from beneath the chemically dependent family, there are frantic attempts to get back into balance."[50]

Some hard-to-reach families have characteristics that make them more likely to have problems with their children. These might include alcohol and drug abuse, mental or physical disorders, homelessness, child neglect or abuse, persistent poverty, chronic unemployment, trauma and loss, or frequent moves. "Programs that succeed in helping the children and families at highest risk are more intensive, more comprehensive, and sometimes more costly than those typically needed by families living in less disadvantaged circumstances. Successful programs provide intensive, comprehensive, individualized services with aggressive attention to outreach and maintaining relationships over time."[51]

Leverage is an important feature of intervention programs with students and families. Some people do not engage voluntarily in intervention programs because of the pain and upheaval caused by change. So, extra incentives or negative consequences often help them to mobilize their resources.

The most effective method of reaching families with multiple problems is through personal contact by staff who are trained in dealing with resistance. Family fear and ambivalence are difficult to overcome. It is also important for the intervention program to be part of a comprehensive student assistance program or an integrated services unit because families with multiple problems need multiple services and interventions.

Other recommendations are:[52]

- Provide programs of sufficient intensity.
- Match the program to the family's needs.
- Time programs for developmental appropriateness.

- Make programs culturally relevant and easily understood.
- Pay attention to parental dysfunction—screen excessively disruptive parents.
- Measure program effectiveness.

An effective intervention for ATOD use will:

- ask what parents need to be aware of that they are not;
- clearly spell out the nature of the problem;
- clearly delineate the scope of the problem;
- clearly define the implications of the problem; and
- avoid threatening parents' self-esteem.[53]

BARRIERS TO FAMILY INVOLVEMENT

Several institutional and personal barriers interfere with program development and implementation and are common to all school districts. They apply to home-school partnerships and to comprehensive ATOD prevention and intervention programs alike.

Unclear definitions lead to mixed expectations, blame, and conflicts.

Agreement on the purpose of family involvement does not exist. That's the biggest problem. Family involvement means different things to different people. Some believe family involvement is parents volunteering in the classroom. Others believe parents helping with homework is family involvement. While still others think family involvement is families attending school-sponsored events. In ATOD programs, parent education is usually the only required family involvement activity.

The expectations of parents and administrators often are very different. To illustrate, the findings of a six-year study of attitudes sponsored by the U.S. Department of Education indicate that administrators and principals want parents to come to the school for traditional support and advocacy roles, such as parent education classes, parent-teacher conferences, fundraising, and other similar activities. Parents, on the other hand, want to come to school to participate in decisions that guide the school. They want a voice.[54] So, the one area where parents say they most want to be involved is the one area where administrators least want parents' involvement. Left unresolved, these mixed expectations result in each side blaming the other.

Lack of information about families inhibits relevant program development.

Effective outreach and planning depend on good data, but data are hard to collect and organize. Despite the fact that ethnic, achievement, income, and language data are collected, educational institutions just don't have the resources and personnel to develop family profiles. Rather, most data are used to determine individual

student placements or to determine school or district eligibility for categorical program funds. Two examples follow:

> *California's State Department of Education collects and stores information about languages spoken at home when students enroll for the first time in a school. The enrollment questionnaire asks about languages spoken at home. This information is used to determine whether or not to conduct an individual language assessment. Results are filed in the cumulative folders. The problem is these data are not used to profile the families in the district. The questionnaire doesn't ask the families in what language they prefer to receive communication, and it's not administered each year for all students, new and old.*

> *Emergency cards containing all kinds of useful information are always maintained in attendance offices. However, this information is almost never used to compile a description of the characteristics of students' families. Other gaps exist. Almost nothing is known about marital status, education, employment, work schedules, income, child-care, or transportation needs.*

Therefore, programs cannot target the needs of the families. Inadequate and inappropriate one-size-fits-all programs are common to both the field of family involvement and ATOD programs. The only strategy that is appropriate for wide and diverse audiences is a general awareness campaign, such as Red Ribbon Week. But, even this requires flyers and brochures designed to meet specific audience needs.

Almost all programs, prevention and intervention, need tailoring. Prevention for the family of a student new to the U.S. is different from prevention for other families. The family of a fifth grader, unlike the family of a first grader, needs preadolescent development information. Custodial grandparents require different activities than single-parent families. Relevance is obtained by offering small, carefully designed and tailored activities.

Natural, built-in tensions in the relationship between the school and the family are overlooked.

"Many families feel that their interests are not fully taken into account by educators. At times, parents feel that educators talk down to them or speak in educational jargon they don't understand."[55] The school-home interaction is not neutral ground. The atmosphere is tense. When parents come to the school for a conference or to solve a problem, often they are terrified, full of shame, angry, embarrassed, or guilty. Educators also are scared, defensive, guarded, or angry. Sometimes, a lot is at stake for both, and each wants a concession from the other. In most cases, the school defines the issues and makes the decisions, and the family's role is quite limited, other than to support the school.

At the biggest disadvantage are families who are significantly different from the school in language, socioeconomic level, or culture. Examples of some families' reactions are:

> *"It's that they don't pay attention to us. They know we aren't citizens and they don't care what we have to say. They think that we will stay quiet and not demand any services and they're right. Many of us do that. Even if we ask we still won't get it." (Maria)*

> *"We're all sitting listening attentively because we want to help our children. How am I going to help them with their homework when I can't read English? I never went to school. I ask them if they finished their homework and they say yes. Now they are telling me that I must read stories to them every day. One teacher sent a letter home that my child must take back a note to school with my signature saying that I read to him 15 minutes a day. I work cleaning other people's homes and go to and from work on the bus. When I get home it's too late to do anything. Well, this meeting didn't help me a bit. I just went to waste my time." (Berta)*[56]

Most home-school interactions are polite, but impersonal. Contacts are abbreviated—too short to become well acquainted, but long enough to accomplish tasks. Student intervention team meetings are good examples of uncomfortable and abbreviated contacts. In these short meetings, the family is surrounded by professional staff, all of whom have evaluated their child. Most of

the time, they stick to a carefully organized agenda. Besides being intimidating, they do not allow much time for the family and staff to become acquainted. Open houses and parent teacher conferences are other good examples of polite but impersonal contacts. Open houses are held basically to inform parents about school programs, not to develop mutual understanding. Advisory boards meet to develop or approve school-site plans. Back-to-school nights showcase classroom activities.

Conversely, many school staff feel their interests are not considered by some families. Parents can be judgmental and unrelenting in their relationships with school staff. Most teachers have had negative experiences with a few difficult parents. Some fear that individuals with little experience in education will be given too much authority or individuals with values and ideas quite different from theirs will interfere with the programs they value.

Denial in families and schools inhibits both from taking action.

Denial is "the failure of an individual (or student, family, or school) to fully appreciate the nature, scope, and implications of a problem."[58] It protects people from acknowledging their problems, it helps systems maintain equilibrium, and it protects them from changing. When denial's protective cover is lifted, everyone is placed in uncomfortable and vulnerable positions. Therefore, resistance to family involvement comes from all sides—the community, youth, school, and families.

"I simply would not believe that my son was chemically dependent....No matter what I found in his room or in his pockets at laundry time, and no matter what his clothes smelled like on Saturday morning, I could not believe that my baby was capable of getting mixed up with drugs. We are a good family."[57]

Acknowledging and confronting an individual's alcohol or drug use can surface rage, panic, fear, shame, embarrassment, or guilt in the family and the school. A history of alcohol and drug use by other members of the family might be exposed, as well as abuse and neglect, mental illness, parenting problems, poverty, chronic illness, or unemployment. Long-term school problems, including student ATOD use on campus or at school-sponsored events, inconsistent discipline, preferential treatment for selected students, and staff enabling also might be exposed. Sometimes, a history of use by school personnel will surface. These secrets generally are protected from public exposure until attention is paid to students' alcohol and other drug use.

Confronting exposes enabling. Students with problems sometimes have other family members and others from the school (teachers,

friends, or coaches) involved with their problem. Enabling is thought by those who enable to be helpful, not harmful. Harsh and punitive school policies, for example, enable students' problems to increase, not decrease. Covering up, rescuing, and protecting also prevent students with problems from getting help. Such ingrained and positively reinforced behavior is difficult to stop.

Confronting also exposes gaps in knowledge, skills, and experience. Watching people protect alcohol and other drug use despite life-threatening consequences is crazy-making. Without adequate training, counselors and teachers run the risk of getting discouraged and exhausted. Families and students with addiction and other similar problems lie, manipulate, sabotage, refuse to attend meetings, and align together against the school. Resistance to family involvement protects the staff from being vulnerable.

Family involvement programs add to the teacher's workload without additional training or compensation.

Involving families is time-consuming, relentless, and difficult work for which there is often very little training and sometimes no reward. Overloading teachers leads to burnout, low morale, resistance, and ultimately the end of new program implementations. Working with families is not necessarily what teachers want to do. Some teachers teach because they want to work with children, not adults.[59] Asking staff to work with families in collaborative ways is just not part of their training or experience.

Family involvement and ATOD programs rely on simple educational programs and isolated one-shot events. Neither changes behavior.

One-shot information programs or short-term education programs, common to many schools and districts, show no demonstrated effectiveness in the prevention or intervention of problems with ATOD use. Programs that combine multiple strategies for families over long periods of time are much more likely to be effective than one-time general events. But many schools do not at this time have the capacity to offer these activities.

Family involvement programs lack coordination and funding.

Successful programs are well-funded and staffed. Common sense tells us that a structure for organizing family involvement

activities, such as policy, family outreach, needs assessments and data gathering, planning, program development, training, implementation, dissemination of resources, and evaluation is important. Administrative consolidation is particularly relevant now. Previously separate and district categorical programs now must submit consolidated applications that demonstrate serious attempts to connect disconnected programs.

Federal education programs requiring family initiatives are Title/Chapter One, Title VII, Even Start, Head Start, and Migrant Education. Wide variations in philosophy and implementation can exist between programs within the same district or school. It isn't unusual, for example, for the drug-free schools and communities' coordinator not to know about the family involvement activities within the bilingual education programs.

Overcoming Barriers

To overcome these barriers to family involvement:

- Form a partnership with families and break down the broad definition of family involvement into smaller, more workable definitions. If the rhetoric stays too global, nothing will happen.

- Spell out the roles people play in family involvement programs and publish them. When the expectations for both families and school are not articulated and written, the relationship cannot be sustained.

- Assign leadership and coordination responsibilities. Without leadership nothing happens, both sides blame each other for the inaction, and valuable time and resources are wasted.

- Gather information about families—their characteristics, needs, and interests. Craft programs carefully to match characteristics and needs.

- Train staff and families in areas such as collaboration techniques, communication skills, resiliency and protective factors, family support strategies, and ATOD prevention

and intervention. Include addiction, family dynamics, enabling, and denial.

- Supplement traditional family involvement strategies with strategies to increase two-way communication.

- Allow time. Creating a home-school partnership is developmental and orchestrated over time.

SUMMARY AND RECOMMENDATIONS

"When parents, teachers, students, and others view one another as partners in education, a caring community forms around students and begins its work." [60]

Nevertheless, implementing a partnership and a caring community connection is very difficult, particularly between the fields of ATOD prevention and intervention and family involvement. It requires weaving together knowledge of prevention and intervention, an understanding of the needs and limitations of educational institutions, and a good grasp of the diverse characteristics of families. It further requires working with a number of unknowns, including the lack of a good research base.

This guidebook is designed to help further the connection between implementing a partnership and a caring community by offering a framework for planning family involvement strategies. All three strategy types have high potential to enhance prevention because they offer various ways to:

- improve school programs and school climate;
- provide family services and support;
- increase parents' skills and leadership;
- build broad outreach mechanisms; and
- help teachers support academic growth and development.

Type Two strategies, in particular, have the potential to meet intervention goals. Effective intervention requires personal contacts and tailored support services, so often it is not done within the educational setting, except through parent education classes. However, intervention is possible through many of the varied program models described under the Type Two strategies.

Type Three strategies, although limited, offer several suggestions for collaborative work to improve family involvement and encourage school reform.

Obviously, the best comprehensive programs offer various strategies to meet the needs of many families and tailor broad models to meet the needs of the school, students, and their families, and surrounding neighborhoods.

APPENDIX

AWARENESS ACTIVITY

ACTIVITY: IDENTIFYING FEELINGS OF FAMILIES AND EDUCATORS

OBJECTIVE: Compare and contrast the feelings families and educators have about coming to school

PURPOSE: Staff development, parent meeting, or study/planning committee activity

DIRECTIONS:

Use chart paper or a large board. Write the word, *home,* on the left-hand side of the paper. Write the word, *school,* on the right-hand side of the paper. First, ask staff to put aside their role as educators for a few minutes and think of themselves only as parents. Next, ask them to think about coming to school to meet with their child's teacher because their child has been having behavior and homework problems. Finally, ask them to generate a list of feelings a parent might have in this situation. Write them on the chart paper under the column titled, *Home.*

Ask staff to think about preparing for the meeting with a parent described earlier. Ask them to generate a list of feelings a teacher might have in this situation. Write them on the chart paper under the column titled, *School.*

Ask the group to:

- compare and contrast the two sets of feelings; and
- discuss the importance of these feelings when developing school-family partnership activities.

EXAMPLE

HOME	SCHOOL
anxious	*angry*
afraid	*afraid*

AWARENESS ACTIVITY

ACTIVITY: IDENTIFYING HOW THE SCHOOL APPEARS TO FAMILIES

OBJECTIVE: Identify the welcoming and unwelcoming features of the school

PURPOSE: Staff development, study/planning committee, or parent meeting

DIRECTIONS:

Ask participants to take a "mental trip to school" and to think about parents' experiences coming from their homes to the school. Ask them to consider:

- their route(s);
- number of children with them;
- their mode(s) of transportation;
- safety of neighborhoods or areas through which they travel;
- time it takes them;
- parking at school;
- signs greeting them at school;
- location of main office;
- staff greeting them; and
- arrangement of desks and waiting area in the main office.

Allow a few minutes for them to share their ideas with a neighboring participant. Discuss their welcoming and unwelcoming experiences. List those experiences on a chart.

Welcoming	Unwelcoming
School secretary is friendly and greets parents promptly.	*No signs are posted welcoming visitors.*

Discuss what can and cannot be changed and the steps the school could take to become more welcoming.

NEEDS ASSESSMENT ACTIVITY

ACTIVITY: FACTORS INFLUENCING SCHOOL-FAMILY PARTNERSHIPS

OBJECTIVE: Identify schoolwide factors that promote and hinder the development of school-family partnerships and family participation

PURPOSE: Staff development or study/planning committee

DIRECTIONS:

Divide into small groups of five to six participants each. Ask half of the groups to brainstorm a list of schoolwide factors that promote partnerships. Ask the other half of the groups to brainstorm schoolwide factors that hinder partnerships. Allow approximately 10 minutes.

Place all suggestions on a chart similar to the one below.

Facilitating factors	Hindering factors
Many staff are fluent in languages other than English.	*There are a limited number of phones to contact families.*
The principal supports having families on the site and visiting classrooms.	*No staff person is assigned to coordinate family involvement programs.*

Review the list of hindering and facilitating factors. Cross off the hindering factors you cannot influence. Divide the remaining factors among the original small groups. Ask participants to devise plans for overcoming the hindering factors and/or for strengthening the facilitating ones. Allow as much time as necessary for group discussion.

Come together as a whole group. Share information. Devise a group plan.

NEEDS ASSESSMENT ACTIVITY

ACTIVITY: IDENTIFYING FAMILY NEEDS AND INTERESTS

OBJECTIVE: Determine the interests and needs of families

PURPOSE: Written survey or the basis of focus group discussions or telephone conversations

DIRECTIONS:

Using the tips below, conduct a thorough needs assessment before initiating a school-family partnership process and as an ongoing partnership activity. Gathering information must be done in many ways because families are so different. Some families, for example, do not read and write. Other families cannot attend meetings.

Ideas are:

- monthly breakfast meetings with the principal for a few families;
- suggestion boxes located in the front office or a parent center;
- formal parent advisory councils;
- focus groups or small group discussions with families;
- at conference time or open house events, set aside specific process for teachers to gather information from families about overall school-family partnerships;
- home visits; and
- telephone conversations.

Tips for needs assessments are:

- use school or district letterhead;
- address and mail directly rather than sending home with students;
- let families know the information is confidential and they do not need to sign their names;
- enclose a return envelope;
- use language appropriate to the families; and
- omit educational jargon and simplify.

Suggestions for questions and information requested are:

List the grades and ages of the students you have in this school.

Grades	Ages

When do you come to school other than to drop off or pick up your child?

_____to go to the parent center
_____when there is a problem
_____for conferences
_____for back-to-school nights
_____for athletic events
_____for special events, such as room parties or fund raisers
_____for parent education classes
_____for advisory board meetings (e.g., PTA, SIP)
_____other: please list

How do you like to be involved with the school?

How can the school help support you and your child?

What time is it convenient for you to attend conferences or school events?

What can the school do to make it easy for you to attend conferences or other events?

_____provide child care
_____provide transportation
_____serve food
_____other: please list

If we arrange for speakers, what topics interest you?

We are trying to develop new and interesting ways for all parents to be involved at school. Do you have any suggestions?

NEEDS ASSESSMENT ACTIVITY

ACTIVITY: IDENTIFYING CHARACTERISTICS OF FAMILIES*

OBJECTIVE: Identify characteristics of families so programs reflect their needs and interests*

PURPOSE: Foundation for planning

DIRECTIONS:

First, gather the information from the following questions from school emergency cards, enrollment forms, or school and district data. Second, divide workshop participants or planning committee into groups of three to four participants each. Divide the needs assessment questions and answers among the small groups. Third, ask each group to brainstorm program suggestions based on the information they have about the families.

What proportion of students live in: (estimate percent)

_____single-parent households
_____two-parent households
_____foster homes or institutions
_____relatives or guardian homes
_____homeless
_____self-supporting situations, basically alone

What proportion of students have ever experienced a serious disruption (separation, divorce, or death) in the family? (check one)

_____less than 25 percent
_____about half
_____the great majority

What is the economic/educational status of the families in this school? (estimate percent)

_____proportion below poverty level (eligible for free lunch programs)
_____proportion you would consider well-to-do
_____proportion with at least one college-educated parent
_____proportion owning at least one automobile
_____proportion without telephone
_____proportion without computers at home

* This needs assessment is adapted from Henderson, Marburger, & Ooms. (1986). *Beyond the bake sale: An educator's guide to working with parents.* Columbia, MD: National Committee For Citizens in Education. Other excellent needs assessment ideas and checklists also are included in the book.

What are the racial/cultural backgrounds of families in this school? (list)

_____list proportions of racial and ethnic groups

_____list languages spoken by parents

What proportion of children live in families where both parents, or the custodial parent, are employed outside the home for most of the school day? (check one)

_____less than 25 percent
_____about half
_____the great majority

How many children need after-school day care? (check one)

_____less than 25 percent
_____about half
_____the great majority

What proportion of families is new to the community this year? (estimate percent)

_____less than 25 percent
_____about half
_____the great majority

What proportion of families are migrant workers? (estimate percent)

_____less than 25 percent
_____about half
_____the great majority

What proportion of families take their children out of school for extended periods of time? (estimate percent)

_____less than 25 percent
_____about half
_____the great majority

What proportion of families live outside this attendance area? (estimate and list the areas from which they come)

_____less than 25 percent
_____about half
_____the great majority

What proportion of students at this school need some form of intervention for alcohol, tobacco, and other drug use? (estimate percent)

Alcohol	Tobacco	Other drugs
grade _____ percent _____	grade _____ percent _____	grade _____ percent _____
grade _____ percent _____	grade _____ percent _____	grade _____ percent _____
grade _____ percent _____	grade _____ percent _____	grade _____ percent _____
grade _____ percent _____	grade _____ percent _____	grade _____ percent _____

NEEDS ASSESSMENT OR PLANNING ACTIVITY

ACTIVITY: IDENTIFYING CURRENT FAMILY INVOLVEMENT PROGRAM CHARACTERISTICS

OBJECTIVE: Assess the characteristics and effectiveness of current and previous family involvement program activities

PURPOSE: Staff meeting, small committee study group, or parent-teacher association meeting

DIRECTIONS:

What are the strong and weak features of this school's family involvement programs?

Grade level	Successful practices	Unsuccessful practices
K-1	*home visits before school starts*	*flyers we send home don't seem to attract many parents*
2-3		
4-5		
6-7		
8-9		
10-12		

What practices help families either prevent or intervene with alcohol, tobacco, and other drug problems?

Grade level	Support prevention *(help individuals and families acquire personal skills for healthy living or shape healthy community conditions)*	Support intervention *(the process of interrupting a harmful pattern of behavior and help for change)*
K-1		
2-3	*healthy start center that offers access to health and social services*	*support group for families needing to improve discipline*
4-5		
6-7		
8-9		
10-12		

Which parents are easiest to involve, in general?

Which parents are hardest to involve, in general?

What are the advantages of family involvement for the school staff?

What are the disadvantages of family involvement for the school staff?

List the school's current advisory boards.

List the family members who serve on each of these boards.

How are these family members selected to serve?

What funds are allocated to family-school partnership programs?

Where is the leadership for school-family initiatives located within the school?

NEEDS ASSESSMENT OR PLANNING ACTIVITY

ACTIVITY: ANALYZING POLICY

OBJECTIVE: Review characteristics of current school-family partnership or family involvement policies

PURPOSE: School board, planning committee, site administrator

DIRECTIONS:

Place a check mark in the appropriate box. Use for program improvement or program development.	Yes	No
Does this school have a **written family involvement policy**?		
Does the policy contain a **mission statement**?		
Does the policy include program recommendations to:		
• help parents foster conditions at home that **support learning?**		
• provide parents with **knowledge of techniques** designed to assist children in learning at home?		
• provide access to and **coordinate community and support services** for children and families?		
• promote clear, **two-way communication** between the school and the family as to school programs and children's progress?		
• **involve parents**, after appropriate training, in instructional and support roles at the school?		
• support **parents as decisionmakers** and develop their leadership in governance, advisory, and advocacy roles?		

Were parents or other family members **involved in writing and reviewing** the policy?		
Has the policy been **presented to all school-site staff**, including custodial, clerical, and other paraprofessional staff?		
Has the policy been **presented to parents** and other family members during a schoolwide meeting?		
Is there a provision for a yearly evaluation of the policy to determine its **effectiveness?**		
If there are substantial minority language populations in the school, is the **policy translated** in these languages?		

PLANNING ACTIVITY

ACTIVITY: PLANNING PROGRAMS AND OUTREACH

OBJECTIVE: To identify strategies known to aid effective program development and outreach

PURPOSE: Staff development, parent meeting, or study/planning committee

DIRECTIONS:

Divide into groups of five to six participants each. The tasks are:

- Select one family involvement strategy for the school.
- Write a brief description of the strategy, the goal, and the objective(s).
- Describe how each characteristic will be incorporated into planning and outreach.

Characteristics of effective outreach	How this characteristic will be incorporated into the program design
Relevance *Relevance is providing a program that meets the needs of families.*	
Trust *Trust is confidence in the honesty, integrity, or reliability of the school.*	
Incentive *Incentives encourage or motivate a family member to become involved.*	

table continues

Characteristics of effective outreach	How this characteristic will be incorporated into the program design
Ownership *Ownership gives leadership to the participants.*	
Creativity *Creativity and variety allow families to participate in many different ways.*	
Convenience *Convenience makes it easy for families to become involved.*	
Space *Space for adults makes families feel welcome in the school.*	

PLANNING ACTIVITY

ACTIVITY: CREATING A SCHOOL-PARENT COMPACT

OBJECTIVE: Develop jointly with parents a school-parent compact (Title I regulations require that all schools receiving Title I funds develop compacts with the parents of the students receiving services.)

PURPOSE: Build a strong and mutually supportive relationship between the school and the family to ensure improved student achievement. The compact is fundamental to alcohol, tobacco, and other drug prevention.

DIRECTIONS: Place a check mark in the box. Use to assess or develop a compact.

Characteristics of the school-parent compact outlined in the Improving America's School Act (IASA) legislation, Section 1118.	Yes	No
Contains a **description of the school's responsibility** to provide high quality curriculum and instruction in a supportive and effective environment that will enable students to meet the state standards.		
Describes the **ways in which each parent will be responsible** for supporting their children's learning. Examples are:		
• monitoring whether children have finished their **homework**		
• ensuring **attendance**		
• monitoring **television watching**		
• monitoring how students use their **free time**		
Addresses the **importance of communication**, specifically how the school and the family will communicate throughout the school year, including:		

table continues

Characteristics of the school-parent compact outlined in the Improving America's School Act (IASA) legislation, Section 1118.	Yes	No
• number of parent-teacher **conferences** (at least once/year)		
• number of **reports to parents** on their children's progress		
• how provisions will be made for the parent to have **access to the school staff,** volunteer in the school or classroom, and observe the instruction		

Additional Areas To Consider:

How have parents been involved or how will parents be involved in drafting the school-parent compact?

How will parents with low literacy levels be given the information about the school-parent compact?

PLANNING ACTIVITY

ACTIVITY: BUILDING CAPACITY FOR PREVENTION

OBJECTIVE: Identify prevention objectives in family-school partnership and other family involvement strategies

PURPOSE: Planning study group

DIRECTIONS:

Match the strategies in the school with the prevention objectives.

Prevention objective	Strategy and its capacity to meet prevention objectives	
	Family-school partnership strategy	How this strategy meets the prevention objective
Improve student success		
Target community problems		
Meet families' and/or students' basic needs		

table continues

Prevention objective	Strategy and its capacity to meet prevention objectives	
	Family-school partnership strategy	How this strategy meets the prevention objective
Increase cultural pride		
Influence community norms and policies		
Reduce alcohol, tobacco, and other drug availability		
Improve social and economic conditions		
Reinforce school policy in the community		

table continues

Prevention objective	Strategy and its capacity to meet prevention objectives	
	Family-school partnership strategy	How this strategy meets the prevention objective
Improve access to social, mental health, medical, and other resources		
Develop networks with other families		
Increase trust and bonding with the school		
Increase families' capacity to improve student learning		
Increase family participation in activities		

table continues

Prevention objective	Strategy and its capacity to meet prevention objectives	
	Family-school partnership strategy	How this strategy meets the prevention objective
Improve family literacy		
Improve family management		
Develop life skills, such as decisionmaking		
Build leadership capacity of family members		
Increase mutual understanding among diverse social and cultural groups		

END NOTES

[1]Rutherford, B., Billig, S. H., & Kettering, J. F. (Not Available). *Creating family/school partnerships: A review of the research and practice literature on parent and community involvement and literature related to the middle grades* (p. 4). Washington, DC: U.S. Department of Education, Office of Educational Research and Improvement.

[2]Lofquist, W. A. (1983). *Discovering the meaning of prevention: A practical approach to positive change* (p.2). Tuscon, AZ: Associates for Youth Development, Inc.

[3] National Commission on Children (U.S.). (1991). *Beyond rhetoric, A new American agenda for children and families*, Final Report of the National Commission on Children.

[4] Goal Eight, National Education Goals.

[5]Henderson, A., & Berla, N. (Eds.). (1994). *A new generation of evidence: The family is critical to student achievement* (p. 1). Columbia, MD: National Committee for Citizens in Education.

[6]Ibid.

[7]Benard, B. *Fostering resilience in kids: Protective factors in family, school, and community* (p. 14). (Western Regional Center For Drug-free Schools and Communities). Portland, OR: Northwest Regional Educational Laboratory.

[8]Connors, L. J. (1994). *Small wins: The promises and challenges of family literacy* (Center on Families, Communities, Schools & Children's Learning. Report No. 22). Boston: U.S. Department of Education.

[9]Speech by Peter Bell at a Department of Health and Human Services Seminar on March 4, 1988.

[10] Kumpfer, K. L. (1989). *Prevention of alcohol and drug abuse: A critical review of risk factors and prevention strategies. Prevention of Mental Disorders, Alcohol and Other Drug Use in Children and Adolescents.* OSAP Prevention Monograph - 2. Rockville, MD: U.S. Department of Health and Human Services.

[11] Ibid.

[12]Benard, B. *Fostering resilience in kids: Protective factors in family, school, and community* (p. 19). (Western Regional Center For Drug-free Schools and Communities) Portland, OR: Northwest Regional Educational Laboratory.

[13] George, R. L. (1990). *Counseling the chemically dependent: Theory and practice* (p. 54). Englewood Cliffs, NJ: Prentice-Hall, Inc.

[14]Rutherford, B., Billig, S. H., & Kettering, J. F. (Not Available). *Creating family/school partnerships: A review of the research and practice literature on parent and community involvement and literature related to the middle grades* (Office of Educational Research and Improvement). Washington, DC: U.S. Department of Education.

[15]Epstein, J. L., & Becker, H. J. (1982). Teachers' reported practices of parent involvement: Problems and possibilities. *Elementary School Journal, 83* (2), 103-113.

[16]League, V. C. (1991). *Prevention planning manual: A guide for successful alcohol and other drug prevention programs.* Oakland, CA: Vincenté & Associates.

[17]Ibid.

[18] Clinchy, E. (1994). Building a family school partnership at a Boston school. *Equity and Choice, 10*(2), 51-55.

[19]LA Alliance For a Drug-free Community. (1994). *New city: The magazine for a drug-free Los Angeles.* (Volume 1, No. 3). Los Angeles

[20]Ibid.

[21]Western Regional Center for Drug-Free Schools and Communities. (1990). *Sharing your success* (Volume 1). Portland, OR: Author.

[22] Austin, G. (1992). *School failure and alcohol and other drug use*. Madison, WI: Wisconsin Clearinghouse.

[23]Austin, G. (1992). *School failure and alcohol and other drug use*. Madison, WI: Wisconsin Clearinghouse.

[24]Davies, D., Burch, P., & Palanki, A. (1993). *Fitting policy to family needs: Delivering comprehensive services through collaboration and family empowerment* (Center on Families, Communities, Schools & Children's Learning. Report No. 21). Boston: U.S. Department of Education.

[25]Connors, L. J. (199). *Small wins: The promises and challenges of family literacy* (Center on Families, Communities, Schools & Children's Learning. Report No. 22). Boston: U.S. Department of Education.

[26]Holt, D. (Ed,). (1994). Family literacy: Building a partnership among families, communities, and educators. *BEOutreach: A news magazine from the Bilingual Education Office, 5* (2).

[27] Institute For Responsive Education, Working Paper #1, Family Centers

[28]Johnson, V. R. (1992). *Parent/family centers: Dimensions of functioning in 28 schools in 14 states* (Center on Families, Communities, Schools & Children's Learning. Report No. 20). Boston: U.S. Department of Education.

[29]Holt, D. (Ed.). (1994). Family literacy: Building a partnership among families, communities, and educators. *BEOutreach: A news magazine from the Bilingual Education Office, 5* (2).

[30]Rioux, J. W., & Berla, N. (1993). *Innovations in parent & family involvement* (p. 307). Princeton Junction, NJ: Eye On Education.

[31] Henderson, A., & Berla, N. (Eds.). (1994). *The evidence continues to grow: The family is critical to student achievement.* Columbia, MD: National Committee for Citizens in Education.

[32]Ibid., Pg. 69.

[33] Henderson, A., & Berla, N. (Eds.). (1994). *The evidence continues to grow: The family is critical to student achievement.* Columbia, MD: National Committee for Citizens in Education.

[34]Ibid., Pg. 296.

[35] George, R. L. (1990). *Counseling the chemically dependent: Theory and practice* (p. 146). Englewood Cliffs, NJ: Prentice-Hall, Inc.

[36]McIntyre, K., White, D., & Yoast, R. (1990). *Resilience among high risk youth* (p. 35). Madison, WI: Wisconsin Clearinghouse.

[37]Rioux, J. W., & Berla, N. (1993). *Innovations in parent & family involvement* (p. 240). Princeton Junction, NJ: Eye On Education.

[38]Heleen, O., & Thompson, S. (Ed.). (1992). Making the System Work for Poor Children. *Equity and Choice, 8* (2), 28-34.

[39] Gibbs, J. (1994). *Tribes: A new way of learning together.* Santa Rosa, CA: Center Source Publications.

[40]Garlington, J. (1991). *Saying goodbye to Harlem Park.* Columbia, MD: National Committee for Citizens in Education.

[41] Bruner, C. (1991). *Thinking collaboratively: Ten questions and answers to help policy makers improve children's services.* Washington, DC: Education and Human Services Consortium.

[42]Nadel, M. V. (1994). *Health care: School-based health centers can expand access for children* (GAO Publication No. HEHS-95-35. Gaithersburg, MD: U.S. General Accounting Office.

[43]Olsen, L. (1994). *The unfinished journey: Restructuring schools in a diverse society* (pp. 156-157). San Francisco: California Tomorrow.

[44]Kumpfer, K. L. (1993). *Strengthening America's families: Promising parenting strategies for delinquency prevention* (OJJDP Publication No. NCJ140781). Washington, DC: U.S. Department of Justice.

[45]Brochure, Parent-Community Networking Centers. Office of Instructional Services/Community and Special Education Branch Department of Education. State of Hawaii. RS 93-3499. March 1993.

[46]Fruchter, N., Galletta, A., & White, J. L. (1992). *New directions in parent involvement* (pp. 49-67). Washington, D. C.: Academy for Educational Development, Inc.

[47]Olsen, L. (1994). *The unfinished journey: Restructuring schools in a diverse society.* San Francisco: California Tomorrow.

[48] Henderson, A., & Berla, N. (Eds.). (1994). *The evidence continues to grow: The family is critical to student achievement.* Columbia, MD: National Committee for Citizens in Education.

[49]Dolan, L., & Haxby, B. (1995). *Removing barriers to learning: Factors that affect participation and dropout in parent interventions* (Center on Families, Communities, Schools & Children's Learning. Report No. 27). Boston: U.S. Department of Education.

[50] George, R. L. (1990). *Counseling the chemically dependent: Theory and practice* (p. 60). Englewood, NJ: Prentice-Hall, Inc.

[51]Schorr, L. B. (1989). *Within our reach: Breaking the cycle of disadvantage* (p. 285). New York: Doubleday Anchor Books.

[52]Kumpfer, K. L. (1993). *Strengthening America's families: Promising parenting strategies for delinquency prevention.* (OJJDP Publication No. NCJ140781). Washington, DC: U.S. Department of Justice.

[53] Anderson, G. L. (1993). *Intervening with parents of students who abuse alcohol or other drugs.* Greenfield, WI: Community Recovery Press.

[54]Chavkin, N. F., & Lubeck, M. -G. (1987). *A regional directory for training teachers and administrators in parent involvement in education* (pp. 12-13). Austin, TX: Southwest Educational Development Laboratory.

[55]Riley, R. W. (1994). *Strong families, strong schools: Building community partnerships for learning* (p. 23). Washington, DC: U.S. Department of Education.

[56]Darder, A. (Ed.). (1993). *The struggle for educational justice*. Claremont, CA: Claremont Graduate School, Institute for Education in Transformation.

[57] George, R. L. (1990). *Counseling the chemically dependent: Theory and practice* (pp. 55-56). *Englewood Cliffs, NJ: Prentice-Hall, Inc.*

[58]Anderson, G. L. (1993). *Intervening with parents of students who abuse alcohol or other drugs* (p. 6). Greenfield, WI: Community Recovery Press.

[59]Tushnet, N. C. (1991). *School restructuring: Why don't we heed the lessons of the past?* Los Alamitos, CA: Southwest Regional Laboratory.

[60]Epstein, J. (1995, May). School/family/community partnerships: Caring for the children we share. *Phi Delta Kappan, 5.*

BIBLIOGRAPHY

Ames, C., Khoju, M., & Watkins, T. (1993). *Parent Involvement: The relationship between school-to-home communication and parents' perceptions and beliefs* (Center on Families, Communities, Schools & Children's Learning. Report No. 15). Boston: U.S. Department of Education.

Anderson, G. L. (1993). *Intervening with parents of students who abuse alcohol or other drugs*. Greenfield, WI: Community Recovery Press.

Ascher, C., & Burnett, G. (1993). *Current trends and issues in urban education* (Report No. 19). New York: ERIC Clearinghouse on Urban Education. (ERIC Document Reproduction Service)

Austin, G. (1992). *School failure and alcohol and other drug use.* Madison, WI: Wisconsin Clearinghouse.

Benard, B. (1993). *Fostering resilience in kids: protective factors in family, school, and community.* (Western Center For Drug-free Schools and Communities). Portland, OR: Northwest Regional Educational Laboratory.

Bernick, R., & Rutherford, B. (1993). *Connecting school, family, and community resources*. Boston: U.S. Department of Education, Office of Educational Research and Improvement.

Bruner, C. (1991). *Thinking collaboratively: Ten questions and answers to help policy makers improve children's services.* Washington DC: Education and Human Services Consortium.

Chavkin, N. F., & Lubeck, M. -G. (1987). *A regional directory for training teachers and administrators in parent involvement in education.* Austin, TX: Southwest Educational Development Laboratory.

Clinchy, E. (1994). Building a family school partnership at a Boston school, *Equity and Choice, 10*(2).

Connors, L. J.. (1994). *Small wins: The promises and challenges of family literacy* (Report No. 22). Boston: U.S. Department of Education, Center on Families, Communities, Schools & Children's Learning.

Darder, A. (Ed.). (1993). *The struggle for educational justice.* Claremont, CA: Claremont Graduate School, Institute for Education in Transformation.

Davies, D., Burch, P., & Palanki, A. (1993). *Fitting policy to family needs: Delivering comprehensive services through collaboration and family empowerment* (Report No. 21). Boston: U.S. Department of Education, Center on Families, Communities, Schools & Children's Learning.

Dolan, L., & Haxby, B. (1995). *Removing barriers to learning: Factors that affect participation and dropout in parent interventions* (Report No. 27). Boston: U.S. Department of Education, Center on Families, Communities, Schools & Children's Learning.

Epstein, J. L. & Herrick, S. C. (1991). *Two reports: Implementation and effects of summer home learning packets in the middle grades* (report No. 21). Baltimore: The Johns Hopkins University, Center For Research On Effective Schooling For Disadvantaged Students.

Epstein, J. L. (1991). *School and family partnerships* (Report No. 6). Boston: U.S. Department of Education, Center on Families, Communities, Schools & Children's Learning.

Epstein, J. L., & Becker, H. J. (1982). Teachers' reported practices of parent involvement: Problems and possibilities. *Elementary School Journal, 83* (2), 103-113.

Fruchter, N., Galletta, A., & White, J. L. (1992). *New directions in parent involvement.* Washington, DC: Academy for Educational Development, Inc.

Garlington, J. (1991). *Saying goodbye to Harlem Park.* Columbia, MD: National Committee for Citizens in Education.

George, R. L. (1990). *Counseling the chemically dependent: Theory and practice.* Englewood, NJ: Prentice-Hall, Inc.

Gibbs, Jeanne. (1994). *Tribes: A new way of learning together.* Santa Rosa, CA: Center Source Publications.

Heleen, O., & Thompson, S. (Ed.). (1992). Making the system work for poor children. *Equity and Choice, 8*(2).

Henderson, A., & Berla, N. (Eds.). (1994). *The evidence continues to grow: The family is critical to student achievement.* Columbia, MD: National Committee for Citizens in Education.

Henderson, A. T., Marburger, C. L., & Ooms, T. (1986). *Beyond the bake sale: An educator's guide to working with parents.* Columbia, MD: National Committee for Citizens in Education.

Hodges, J. (Ed.). (1994). *New city: The magazine for a drug free Los Angeles, 1*(3).

Holt, D. (Ed.). (1994). Family literacy: Building a partnership among families, communities, and educators. *BEOutreach: A News Magazine from the Bilingual Education Office, 5*(2).

Johnson, V. R. (1992). *Parent/Family centers: Dimensions of functioning in 28 schools in 14 states* (Report No. 20). Boston: U.S. Department of Education, Center on Families, Communities, Schools & Children's Learning.

Kagan, S. L., Costley, J., Landesman, L., Marx, F., Neville, P., Parker, S., & Rustici, J. (1992). *Family education and training: Obstacles, opportunities, and outcomes for low-income mothers* (Report No. 4). Boston: U.S. Department of Education, Center on Families, Communities, Schools & Children's Learning.

Kumpfer, K. L. (1993). *Strengthening America's families: Promising parenting strategies for delinquency prevention* (OJJDP Publication No. NCJ140781). Washington, DC: U.S. Department of Justice.

Kumpfer, K. L. (1989). *Prevention of alcohol and drug abuse: A critical review of risk and prevention strategies. Prevention of mental disorders, alcohol and other drug use in children and adolescents* (pp. 309-392). OSAP Prevention Monograph - 2. Rockville, MD: U.S. Department of Health and Human Services.

League, V. C. (1991). *Prevention planning manual: A guide for successful alcohol and other drug prevention programs.* Oakland, CA: Vincenté & Associates.

Lofquist, W. A. (1983). *Discovering the Meaning of Prevention: A Practical Approach to Positive Change.* Tuscon, AZ: Associates for Youth Development, Inc.

Louis, K. S., & Miles, M. B. (1990). *Improving the urban high school: What works and why.* New York: Teachers College Press.

McCart, L. (1993). *Changing systems for children and families* (No. ISBN 1-55877-224-3). Washington, DC: National Governors' Association.

McIntyre, K., White, D., & Yoast, R. (1990). *Resilience among high risk youth.* Madison, WI: Wisconsin Clearinghouse.

Nadel, M. V. (1994). *Health care: School-based health centers can expand access for children* (GAO Publication No. HEHS-95-35). Gaithersburg, MD: U.S. General Accounting Office.

National Commission on Children (U.S.) (1991). *Beyond rhetoric: A new American agenda for children and families.* Final report of the National Commission on Children. Washington, DC: U.S. Government Printing Office.

Olsen, L. (1994). *The unfinished journey: Restructuring schools in a diverse society.* San Francisco: California Tomorrow.

Outtz, J. H. (1993). *The demographics of American families* (No. ISBN 0-937-846-54-6). Washington, DC: Institute for Educational Leadership, Inc.

Palanki, A., Burch, P., & Davies, D. (1992). *Mapping the policy landscape: What federal and state governments are doing to promote family-school-community partnerships* (Report No. 7). Boston: U.S. Department of Education, Center on Families, Communities, Schools & Children's Learning.

Peterson, J. G., Horowitz, J. E., & English, J. (1993). *Growing up well: Parent education and involvement needs assessment report.* Los Alamitos, CA: Southwest Regional Laboratory.

Riley, R. W. (1994). *Strong families, strong schools: Building community partnerships for learning.* Washington, DC: U.S. Department of Education.

Rioux, J. W., & Berla, N. (1993). *Innovations in parent & family involvement.* Princeton Junction, NJ: Eye On Education.

Rutherford, B., Billig, S. H., & Kettering, J. F. (Not Available). *Creating family/school partnerships: A review of the research and practice literature on parent and community involvement and literature related to the middle grades.* Washington, DC: U.S. Department of Education, Office of Educational Research and Improvement.

Schorr, L. B. (1989). *Within our reach: Breaking the cycle of disadvantage.* New York: Doubleday Anchor Books.

Shaffer, D., Philips, I., & Enzer, N. B. (Eds.). (1989). *Prevention of mental disorders, alcohol and other drug use in children and adolescents.* Rockville, MD: U.S. Department of Health and Human Services, Office for Substance Abuse Prevention.

Swap, S. M. (1993). *Developing home-school partnerships.* New York: Teacher's College Press.

Tushnet, N. C. (1991). *School restructuring: Why don't we heed the lessons of the past?* Los Alamitos, CA: Southwest Regional Laboratory.

Western Regional Center for Drug-Free Schools and Communities. (1990). *Sharing your success* (Volume 1). Portland, OR: Author.