FAMILY-CENTERED, CULTURALLY COMPETENT PARTNERSHIPS
in Demonstration Projects for Children, Youth, and Families

Prepared by the Institute for Educational Leadership
with funding from the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice
About IEL
For more than thirty-five years, the Institute for Educational Leadership (IEL)—a non-profit, nonpartisan organization based in Washington, DC—has worked to achieve better results for children and youth. At the heart of our effectiveness is our unique ability to bring people together to identify and resolve issues across policy, program and sector boundaries. As a natural outgrowth of our work, we have created and continue to nurture diverse networks across the country.

Today, IEL is working to help individuals and institutions increase their capacity to work together. We are building and supporting a cadre of diverse leaders, strengthening the capacity of education and related systems, and informing the development and implementation of policies. Our efforts are focused through five programs of work: Developing Leaders; Strengthening School-Family-Community Connections; Governing; Connecting and Improving Systems that Serve Children and Youth; and Improving Preparation for Work.

Acknowledgements
This toolkit was produced by IEL under grant number 99-JS-FX-0004 from the Office of Juvenile Justice and Delinquency Prevention (OJJDP), U.S. Department of Justice. Points of view or opinions expressed in this document are those of the authors and do not necessarily represent the official position or policies of the U.S. Department of Justice.

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Background on SITTAP and the Toolkits

Background on SITTAP
In an era of devolving federal authority, there is growing recognition that federal agencies must do more than merely provide services or administer programs; they must find better ways of working with states and communities to improve the well-being of children, youth and families.

The Systems Improvement Training and Technical Assistance Project (SITTAP) reflects that shift and the on-going commitment of the Office of Juvenile Justice and Delinquency Prevention (OJJDP) to developing community-based collaborative solutions to prevent and control juvenile crime and victimization by reorganizing and reforming service delivery systems. These comprehensive community initiatives are collaborative efforts in which representatives from a broad cross-section of the community identify their most pressing problems, make decisions about how to tackle them, set goals, and hold themselves accountable for achieving results.

Funded by OJJDP, the project is operated by the Institute for Educational Leadership in partnership with the National Civic League. The SITTAP initiative is designed to develop, expand, and enhance the skills and capacities of juvenile justice/child welfare systems and communities to make systemic changes leading to an integrated system of care for youth at-risk, delinquent youth, and their respective families. While the project serves a number of OJJDP grantees, the primary target for services is 11 grantees under two initiatives: Safe Kids/Safe Streets and SafeFutures.

About this Toolkit
This toolkit is designed to provide ideas and linkages to other resources that will increase the capacity of demonstration projects engaged in systemic reform efforts to partner with communities and families in the development of family-centered, culturally competent approaches. It offers case study examples and a variety of tools communities may want to use as they consider plans for implementing, monitoring and institutionalizing family partnership and culturally competent policies and practices.

This toolkit is one of several resources developed to strengthen and sustain the capacity of OJJDP sites served by SITTAP to achieve and sustain their systems reform goals and effectively address the related challenges. Other toolkits will address topics such as: Building
Safe Kids/Safe Streets
The Safe Kids/Safe Streets initiative applies comprehensive, community-wide strategies to the reduction of child abuse and neglect. Building on a multifaceted strategy grounded in research about the causes and correlates of juvenile delinquency as well as effective prevention and intervention techniques, the program explores the linkages between child maltreatment, domestic violence and juvenile delinquency. Safe Kids/Safe Streets challenges communities to improve community response to the abuse and neglect of children and adolescents in order to break the cycle of childhood victimization and later delinquent and criminal behavior. Safe Kids/Safe Streets is being implemented in Chittenden County, Vermont; Kansas City, Missouri; Huntsville/Madison County, Alabama; Toledo, Ohio; and by the Sault Sainte Marie Tribe of Chippewa Indians in Michigan.

SafeFutures
The SafeFutures Program to Reduce Juvenile Delinquency and Youth Violence (SafeFutures) is a 5-year demonstration project that seeks to prevent and control youth crime and victimization through the creation of a system of care in communities. This system of care will enable communities to respond to the needs of youth at critical stages in their development by providing them with appropriate prevention, intervention, and treatment services and imposing graduated sanctions. Grantees were selected to represent urban, rural, and American Indian communities that demonstrated some prior experience with and a continuing commitment to reducing crime and victimization through comprehensive community assessments, strategic planning, and interagency collaboration. SafeFutures is being implemented in six communities: St. Louis, Missouri; Boston, Massachusetts; Contra Costa County, California; Imperial County, California; Seattle, Washington; and Fort Belknap Indian Community, Montana.
Glossary of Key Concepts

**Cultural competence**—“A set of congruent practice skills, attitudes, policies, and structures, which come together in a system, agency, or among professionals and enable that system, agency or those professionals to work effectively in the context of cultural differences” (Cross, Bazron, Dennis, Isaacs, 1989).1

**Cultural responsiveness**—the flexibility to interact effectively with and appreciate the variations in each family’s preferred methods, modes, and environments for building relationships and strengths.

**Family capacity**—the ability of families to be actively, productively engaged in determining, planning for, and making progress toward their own goals.

**Family involvement**—acknowledging and substantially engaging family members as the most vital participants in the services they receive and the lives they lead by listening carefully to them and addressing issues of cultural difference in working together

**Organizational culture**—an agency’s mission and values, view of itself and its role, and ways of relating to other agencies, the community, and the families participating in its services.

**Partnership-building**—a negotiated process by which representatives of the service system and families can understand each other’s roles and establish common ground in working together. In fully realized partnerships, families and professionals contribute in their own ways to planning, delivery, and evaluation of services for children, youth, and families.

**Reform barriers**—financial, transportation, childcare, time, training, and language issues that stand in the way of family involvement in systems change efforts.

**Systems change**—a comprehensive, strategic shift in the way a system (and everyone associated with it) sees itself, implements the work, evaluates its impact, and plans for the future. In the realm of human services, successful systems change occurs when building family capacity, partnership, and cultural competence are at the heart of the work.
Introduction

A System in Need of Revision

The traditional structures of public and private services are falling short of addressing the complex issues, meeting the multi-faceted needs, and recognizing the diverse cultures of the children and families who require their support. In fact, thousands of children and youth across the country are “derailed in their path to healthy adulthood” when they interact with the many systems that too often are unresponsive, culturally irrelevant, or inconsistent with their real needs.

Programs and services habitually attempt to ‘fix’ individuals and problems within rigid categories. Youth are often provided services out of the context of their families; and families are provided services out of the context of their neighborhood and culture. Families are often blamed for needing the services at a time when they are most vulnerable, and sent to navigate one intransigent, problem-focused agency after another. The blame, shame, and frustration build, leaving families less able to cope and requiring more ‘help’—a vicious cycle. What families often receive from the system are:

◆ ‘One size fits all’ services that are provided based upon availability (usually very limited) rather than those individualized to match strengths and needs of the family (including attention to cultural preferences and needs)
◆ Services to family members only as individuals, with separate service records and case workers, since the service system is not geared to consider the family as a whole
◆ Service plans that are defined, delivered and monitored by professionals without regard to the expertise, strengths, culture and resources of the family
◆ Service and treatment plans that do not value extended family, neighborhood, and other community resources as legitimate partners in the process.
THE CALL FOR A FAMILY-DRIVEN APPROACH

The evidence is all too clear that when youth and families are not a part of policy-making, planning, and program design, and when cultural issues are overlooked, available services are ineffective. The results appear in services that are crisis-oriented, overly restrictive, and overly reliant on separating youth from their families and communities. And they are apparent in the overrepresentation of youths of color in both the juvenile justice and child welfare systems.

The need to view all children and youth within the context of family is especially clear when considering how their problems impact parents, siblings, grandparents, and visa versa. Research supports a direct link between emotional disturbances and such family stress factors as household disruption, financial difficulties, strained family relationships, and loss of social contacts that support cultural identity and values. Failing to look at this whole picture can only lead to “band-aids” that won’t stay, wounds that won’t heal, and complications that multiply and become more serious.

Human service professionals in youth-serving agencies have reached consensus that the current level of fragmentation in the system is counterproductive at best and destructive at worst. Children, youth, and families—with all their intricate and complex connections to family, peer group, and community—must be the central focus as more effective means of prevention and intervention are conceptualized and implemented. Reducing youth violence, child abuse, school failure, teen pregnancy, and persistent poverty are among the critical outcomes resting on a revised approach to serving, strengthening, and supporting our nation’s children, youth, and families.

Family Involvement: What Does It Mean? and Why Is It Important?

There are many voices articulating the needs of families today, but no one can express the reality of families as legitimately as the real experts—the families themselves. Successful family involvement reforms the system positively by:
 Acknowledging and promoting family members as the most vital participants in the process

Adapting to racial and ethnic differences in the concept of self-help, as well as the role of the family for children and youth

Listening carefully to the voices and perspectives, and the resources and strengths, of the children, youth, families, and neighborhoods who have lived within the system

Increasing family capacity that in turn leads to increased positive achievements.

When family members are actively engaged in ongoing dialogue and decisions at all levels, including governance, training, program design and implementation, delivery of services, and evaluation, they can improve the system by holding it accountable and keeping the cross-agency focus on children, youth and their families and they improve their abilities to resolve problems and support family members. They provide constancy and consistency in the face of inevitable staff and funding changes, offering a “point of honesty” in the collaborative process.

Cultural Competence: What Does It Mean? and Why Is It Important?

Developing the capacity to provide culturally competent services is also essential to successful system reform. Often, ‘matching’ families with providers of the same ethnic group culture is viewed as the benchmark for cultural responsiveness. However, true cultural competence goes beyond this traditional approach. It provides a framework for assessing and understanding each family’s unique rules, roles, habits, activities, and beliefs, in the context of their cultural and ethnic identity.

The concept of cultural competence involves a range of behaviors that span from cultural destructiveness to cultural competence. Individuals and organizations go back and forth along this continuum as they seek to become more culturally competent. However, three elements appear essential:

- Respect, honor, and ability to reflect awareness of the diversity of populations with which the system is working
- An acknowledgment of variations in acceptable behaviors, beliefs, and values in assessing and treating a person’s mental health or problems
- The knowledge, skills, and attitudes to work within consumers’ and their families’ values and reality conditions.
What Is At Stake for Children, Youth and Families?

In a recent KIDS COUNT Release Briefing, Douglas W. Nelson, President of the Annie E. Casey Foundation,8 spoke to the critical importance of family involvement and cultural competence. He described the following as key risk factors for vulnerable families and their children:

- Isolation from economic opportunity
- Isolation from social networks and supports
- Alienation from or lack of sufficient access to the human service system.

Compounding these factors is the inflexibility of the programs, agencies and systems serving families.

Addressing barriers to building family capacity and partnership depends on understanding and accepting that this is a developmental, negotiated process—and one that must evolve at the service, program and system levels through will as well as mandate. As states and communities engaged in comprehensive systems reform move through developmental stages, a family member is initially viewed only as client or consumer, then as guest, then as participant, then (if success is obtained) as full partner. Full family inclusion and partnership is the key ingredient in moving from a conventional to a comprehensive service system. Some of the characteristics of comprehensive systems reform efforts that are successfully navigating a process of full family inclusion and partnership include the following.

Developing a shared vision and shared goals among families and professionals:

- Promote interdependence and shared responsibility
- Create vision-driven solutions
- Develop and implement strategies of shared power in decision making at all levels

Working with families as full partners in service planning, delivery, and assessment for their child or youth:

- Construct intentional support for capacity building—getting beyond token family participation
- Clearly define roles of families and service providers in the context of collaboration
Promote broader community involvement in collaboration to help ensure diverse community values and norms, and to ‘balance the playing field’ between families and agency professionals.

A long-term commitment to developing and sustaining collaboration.

Strong, committed leadership from the highest levels of government to full family inclusion and partnership.

Model shared decision-making from family and professional leaders.

Active assistance from agency professionals and funders in support of family efforts to develop and sustain family support and advocacy organizations.
There are many barriers to building partnerships between families and professionals that directly impact efforts to reform entrenched bureaucracies in conventional service systems. Within bureaucracies these include: entrenched agency-centered practices, lack of training, and unmanageable case loads. For families these include: transportation, childcare, time, lack of training, and language, to name a few. Language can be particularly problematic for family members who must try to decipher the terminology used by human service professionals. For example, in describing a ‘high risk’ youth, language is a powerful influence on the perspective and approach that professionals take in working with youth.

Given opportunities to develop their confidence and skills in concert with supportive and trained professionals, families can help shape the policies, programs and practices that impact their lives. Families moving beyond the role of consumer may contribute at many levels, as shown in Table II.
<table>
<thead>
<tr>
<th><strong>TABLE II</strong></th>
<th>Family Contributions</th>
</tr>
</thead>
</table>
| **Governance and Policy as…** | Members of task forces  
| | Members of advisory boards and governance councils  
| | Members of committees hiring new staff  
| | Members of boards of trustees  
| | Members of committees developing training and curricula |
| **Training and Technical Assistance as…** | Developers of training materials  
| | Co-trainers  
| | Reviewers of audiovisual and written materials  
| | Participants at conferences |
| **Community Mobilization and Advocacy as…** | Group facilitators  
| | Witnesses at hearings  
| | Fundraising organizers/participants  
| | Neighborhood and community advocates  
| | Neighborhood and community resource brokers and ‘linkers’ |
| **Research and Evaluation as…** | Participants in quality improvement initiatives  
| | Outreach to other families to gather data  
| | Program evaluators |
| **Program and Practice as…** | Paid program staff  
| | Family to family coaches/guides  
| | Advocates  
| | Facilitators |
The Interplay of Family Capacity, Participation and Cultural Competence

Our society continues to diversify with respect to family composition and structure, lifestyle, standards of living, education, income, education, ethnic/racial backgrounds, and spiritual affiliation. However, the reality of the way in which we address and respond to diversity has not kept pace with our rhetoric.10

There is a direct and powerful relationship between family capacity, cultural responsiveness and measures of success in the service seeking and service delivery process. VanDenBerg and Grealish11 describe how partnerships with families can make a difference in systems reform planning and implementation: “As helping professionals, we are frequently asked to assist families. Often, because we do not learn the unique culture of a family, our interventions effectively ignore how this family operates. We then are sometimes puzzled why the family does not respond to services, or why their “buy-in” or cooperation is low. Culture is about differences—legitimate, important differences.... If we are to be family culture competent, we need to find out how a family operates.” Among other areas of focus, VanDenBerg and Grealish look at:

- What parents like most about their children (looking for parent preferences and differences)
- What the parents’ goals are—what life would look like if things were better
- What the parents’ goals for their children are
- What they see as their biggest accomplishments
- What makes them happy
- What their favorite family memories are
- How the parent is a parent—what they see their best qualities as
- What the family’s special rules are
- Who their friends are, who they call when they need help or want to talk, and who they consider to be supportive
- How the family has fun, what they prefer to do
- What traditions or cultural events they participate in, and how they do this
- What special values or beliefs that they learned from their parents or others
◆ What connections they have to the faith community or if and how they worship.

Several research models argue for the importance of family involvement and cultural responsiveness in revamping the system, as differences among cultural and ethnic groups speak to the need for services that are provided in a culturally competent manner (e.g. Lecca, Quervalu, Nunes, & Gonzales).12

◆ O’Sullivan and Handal13 describe how the use of boarding schools (a remnant of early practices to remove the Native children from the influence of their “savage” parents) have significantly undermined tribal customs of parenting and child-rearing, and traditional language.

◆ Harry14 found that when family members do not trust service providers, they are likely to withdraw from participation, and service providers may interpret their behavior as a sign of apathy. Services should build on family strengths and involve families as partners in all aspects of services,15 with the recognition that cultural bias is often most evident in the assessment process.16 Families value partnerships with service providers that honor and respect differences among families and reflect shared power and responsibility.17

◆ Harper and Lantz18 document the importance of family and community supports in traditional Appalachian families. They point out that even when a family leaves the Appalachian region, they often maintain that sense of values and of self that is rooted in traditional Appalachian culture.

◆ Hines and Boyd-Franklin19 point out that kinship networks are a major source of support for African American families.

◆ Root, Ho, and Sue20 report on the traditional importance of family in defining roles and status in the Asian community.

Recognizing Family Involvement and Cultural Competence

While the research generates useful theories, we also need to ask, what does family inclusion and partnership look like in practice?
Characteristics of Family Involvement

- Providers communicate and share complete information with families in a manner that is practical, non-blaming, affirming, and constructive.
- Communication and planning emphasizes the strengths and assets of families, their neighborhoods and communities to promote competency and independence.
- Family members of children receiving services are fully included at the service, program and system levels of all service system activities.
- Services are family-centered, supporting and assisting families in their natural role as the primary caretakers of their children by acknowledging and respecting them as experts regarding their own children’s strengths, needs, and progress.
- Agency and organization governance structures promote inclusion of family members, appreciating their unique value as key informants, full partners in program/system design and improvement, possessing resources and knowledge that benefit programs and systems.

Qualities of Culturally Competent Human Service Professionals

And what does culturally competent practice look like on the ‘front line’? The National Technical Assistance Center for Children’s Mental Health at Georgetown University describes the following attributes of providers and systems that utilize culturally competent practices: (Note: Again, cultural competence is a continuum.)

- They seek to learn as much as possible about an individual’s or family’s culture, also understanding the influence of their own cultural background on their responses and actions.
- They seek out neighborhood and community involvement, including community cultural leaders.
- They work in the sphere of the individual’s family configuration, including grandparents, other relatives, friends.
- They acknowledge, accept, and, when possible, incorporate the role of natural helpers from the individual’s culture.
- They endeavor to understand the diverse expectations individuals may have about the manner in which services are offered (e.g., eating together may be an important element of services provided in the home; a social exchange may be considered...
necessary before each contact; or entrée to a family may be accessed only through an elder).

◆ They understand that tangible services, such as help in obtaining clothing, housing, transportation, or addressing a problem with a child’s school may be needed and expected. They work with community agencies to help ensure that such resources or services are made available.

◆ They work within traditions relating to gender and age that may be important in particular cultures (e.g., in many racial and ethnic groups, elders are deeply respected).

Understanding how various groups customarily demonstrate respect, providers can appropriately interpret the different ways people communicate.

**The Impact of Belief Systems**

Any attempt to increase responsiveness to and enhance partnerships with families requires an analysis of fundamental assumptions and attitudes about parenting. The following list can serve as a constructive discussion tool to explore the working belief system of policy-makers, program and provider staff, and be used as a benchmark for a more responsive approach: 22

◆ Parenting is a learned skill, not an instinctive one.
◆ All parents have the ability to be good parents.
◆ All families have strengths.
◆ All families need and deserve support, although these needs can and do vary.
◆ No family exists in isolation and healthy families maintain a dynamic interdependence with their extended family and broader community.
◆ Every child is different and every family is different. What works for one does not necessarily work for another.
◆ There are no “quick fixes” as healthy parenting is developed over time.
◆ Families must participate in shaping their own education and support.
◆ The best programs for parents are those that nurture partnerships with parents and develop collaborations with other support agencies.
◆ The diversity of individuals, families and communities is a resource for strengthening families.
Often, when an organization or group reaches consensus and a state of readiness to actualize family partnership through programs and practice, they stumble because they have not fully examined the ‘practicalities of partnership’. The following tips can help prepare for, and even avoid, some common pitfalls.23

Step 1
*Don’t* wait to bring family members into the process until after the professionals have addressed key issues. *Do* involve family members *from the beginning* to build “One Team of One Accord.”

Step 2
*Don’t* assume that bringing family members into decision-making groups or positions is sufficient. *Do* involve agency staff and families in thinking through how to adequately prepare all parties and in how to meet existing and anticipated challenges to implementing family partnerships. Put concerns on the table honestly—asking all parties:

- How will active family participation look?
- How will it impact the group or organization?
- Is your agency/group ready for the change?
- How will program and practice look, how will money flow?

Step 3
*Don’t* rely solely on an inclusive vision and good intentions to ensure success in building family partnerships. *Do* make sure that expectations are crystal clear:

- Anticipate and be proactive about day-to-day obstacles.
- Think through next steps if/when things don’t work as planned.
- Don’t wait until last minute to address concerns!

A family-driven, culturally responsive and comprehensive service system offers a viable, holistic, and distinctly humanistic opportunity to support families in raising healthy, competent, law-abiding youth. Such a system also stands as a practical and predictable model to effectively promote success, safety, and permanence in home, school and community for youth and families with complex needs. As Krovetz asserts, “if members of one’s family, community, and school care deeply about an individual, have high expectations, offer purposeful support, and value a person’s participation in the group, that person will maintain a faith in the future and can overcome almost any adversity. When a community works together to foster resiliency, a large number of our youth can overcome great adversity and achieve bright futures.”24
Measuring Success in Family Involvement and Partnerships

A Self-Assessment Tool for Measuring Consumer/Family Participation

1. Do families have a definitive role in the development of their child’s care plan and service needs?
   - Yes
   - Comments: ____________________________________________
   - _______________________________________________________
   - _______________________________________________________
   - No
   - Comments: ____________________________________________
   - _______________________________________________________
   - _______________________________________________________

2. Are decisions made without meaningful/equal status family participation?
   - Yes
   - Comments: ____________________________________________
   - _______________________________________________________
   - _______________________________________________________
   - No
   - Comments: ____________________________________________
   - _______________________________________________________
   - _______________________________________________________

3. Do providers in the service system have preparation (training, guidelines, support, and clear expectations) to allow families to participate at whatever level they feel comfortable?
   - Yes
   - Comments: ____________________________________________
   - _______________________________________________________
   - _______________________________________________________
   - No
   - Comments: ____________________________________________
   - _______________________________________________________
   - _______________________________________________________

4. Are non-traditional services and supports designed and delivered by the service system?
   - Yes
   - Comments: ____________________________________________
   - _______________________________________________________
   - _______________________________________________________
   - No
   - Comments: ____________________________________________
   - _______________________________________________________
   - _______________________________________________________
5. Are principles of unconditional care applied, i.e., if a care plan isn't working, the plan is changed until it does work?

☐ Yes  Comments: ____________________________________________
___________________________________________________________
___________________________________________________________

☐ No  Comments: ____________________________________________
___________________________________________________________
___________________________________________________________

6. Is there a comprehensive and easy-to-use appeals process for families?

☐ Yes  Comments: ____________________________________________
___________________________________________________________
___________________________________________________________

☐ No  Comments: ____________________________________________
___________________________________________________________
___________________________________________________________

7. Are client-satisfaction surveys developed with full family input? Are surveys conducted on a regularly scheduled basis?

☐ Yes  Comments: ____________________________________________
___________________________________________________________

☐ No  Comments: ____________________________________________
___________________________________________________________

8. Are families full partners with case managers/service coordinators in the design, delivery, and evaluation of services?

☐ Yes  Comments: ____________________________________________
___________________________________________________________

☐ No  Comments: ____________________________________________
___________________________________________________________

9. Do families receive information and training they need to be empowered to advocate for themselves?

☐ Yes  Comments: ____________________________________________
___________________________________________________________

☐ No  Comments: ____________________________________________
___________________________________________________________
10. Do agency/organization program managers view families as having valuable information and resources? Is family inclusion in program decisions valued, efforts to ensure participation a priority?

☐ Yes  Comments: ____________________________________________

________________________________________________________________

☐ No  Comments: ____________________________________________

________________________________________________________________

11. Are families involved at the earliest stages of service and system reform - in planning groups and on advisory boards?

☐ Yes  Comments: ____________________________________________

________________________________________________________________

☐ No  Comments: ____________________________________________

________________________________________________________________

12. Are family members an integral part of ongoing decision-making teams responsible for service and system development? Do service system administrators and policy-makers actively seek full family inclusion and share power in governance, resource, and policy decisions?

☐ Yes  Comments: ____________________________________________

________________________________________________________________

☐ No  Comments: ____________________________________________

________________________________________________________________

13. Are funds set aside by the service system to support and train family organizations as client-based entities that have a key role in monitoring the system, and be involved in complaint review and policy development?

☐ Yes  Comments: ____________________________________________

________________________________________________________________

☐ No  Comments: ____________________________________________

________________________________________________________________

14. Do policies and procedures ensure family inclusion in system, program, and practice levels? Are they being implemented?

☐ Yes  Comments: ____________________________________________

________________________________________________________________

☐ No  Comments: ____________________________________________

________________________________________________________________
Measuring Success in Cultural Competency

A Self-Assessment Tool for Measuring Individual Cultural Competence.

Becoming culturally competent is a process that must begin with an honest assessment of each individual’s beliefs and actions as it relates to diversity. Individuals often believe that they are ‘already doing it’, without thoroughly examining their own values and behavior. The set of questions below, developed by the Colorado Department of Human Services, was developed to assist in such an appraisal.

1. “How much personal/social time do I spend with people who are culturally similar to or different from me?

2. When I am with culturally different people, do I reflect my own cultural preferences or do I spend the time openly learning about the unique aspects of another person’s culture?

3. How comfortable am I in immersion experiences, especially when I am in a numerical minority? What feelings and behaviors do I experience or exhibit in this situation?

4. How much time do I spend engaged in cross-cultural professional exchanges? Is this time spent in superficial, cordial activity, or do I undertake the risk of engaging in serious discourse that may divulge my fears and lack of knowledge?

5. How much work have I actually done to increase my knowledge and understanding of culturally and ethnically distinct groups? Does this work include only an occasional workshop in which I am required to participate? What are my deficiencies and gaps in knowledge about important cultural issues?

6. What is my commitment to becoming culturally competent? What personal and professional sacrifices am I willing to make in the short term for the long-term benefit of all children and families?

7. To what extent have I non-defensively extended myself in approaching professional colleagues with the goal of bridging cultural differences?
8. Am I willing to discontinue representing myself as knowledgeable and as having expertise in areas of cultural diversity that I have not actually achieved?

9. If I am unwilling to commit to a path leading to cultural competence, will I take the moral and ethical high ground and discontinue providing services to people I am unwilling to learn about?”
Building and Sustaining Family Partnerships and Cultural Competence

Planning Tools for Communities To Identify Relevant Tasks and Resources To Build and Sustain Family Participation and Cultural Competence

In order to ‘institutionalize’ family partnership and culturally competent policies and practices, agencies and organizations need to recognize the role that organizational culture plays in any attempts to change policy and practice.

Changing Organizational Culture

Organizational culture is comprised of an agency’s mission and values, a shared view about its role in addressing policy goals and service delivery, and how the agency relates to other agencies, the community, and levels of government. Impacting the culture of an organization requires thoughtful, systematic planning and implementation. The Welfare Information Network notes the following components as keys to success in building the will and capacity for change.27

Internal Vision Alignment

✦ Develop a clear, inspiring, and compelling statement of the need and vision for family partnership and culturally responsive care within the agency or organization.

✦ Build broad endorsement for the vision—base it in lessons learned and best practices to align varying ideas around a focused vision and implementation plan.

External Vision Alignment

✦ Building and implementing a vision for family partnership and culturally responsive care requires the participation and support of a variety of other agency, organization, family, and community stakeholders.
Leadership from top levels of government and cross-agency/community coalitions can help mobilize the vision and conquer turf issues.

**Communicating the Vision**

- Effective communication of the vision is crucial to kick off and sustain organizational culture change.
- Cross-agency/community work groups can identify and utilize their internal communication systems to broadcast and promote the message.
- Technical assistance can be obtained through local and national organizations related to public engagement plans.
- Key issues to address to impact the culture of local and state government agencies:
  - Current challenges and goals of the agency/organization
  - How desired changes are expected to impact the challenges and goals, as well as the service system
  - The consequences of not adopting the new vision—on an individual/consumer level, practice, program and system level
  - Timeframes, process and related expectations regarding implementation and performance under the new vision.

**Establishing a Feedback Loop** (with practitioners, managers, supervisors, families and non-governmental partners)

- Helps policy-makers and administrators assess the degree of ownership regarding the new vision among the various stakeholders
- Provides a frequent re-examination of what features of the vision and its application are working best and what needs to be changed
- Can also be a valuable tool to provide a more evidence-based means of determining how well the vision is working
- Can act as a catalyst for additional improvements and changes necessary to align policy and practice.

**Translating Policy to Practice**

- Efforts to align vision, build cross-agency/community, and family collaboration must result in changes in the day-to-day operations of agencies in order for a real shift in culture to develop and sustain.
Some indications of significant change might include:

➤ An increase in family participation in decision-making
➤ A greater awareness of cultural diversity as a factor that should impact hiring decisions
➤ Movement toward cross-agency/community team work instead of individual practitioner ‘silos’
➤ A willingness to explore and implement cross-training, blended funding, and other comprehensive strategies.

**Formalizing Systems Change**

In order to build comprehensive and lasting improvements in family capacity, partnership, and cultural competence, specific plans for each of these efforts should be developed and integrated within the organizations participating in systems reform initiatives. Agency and community partners are advised to set manageable but concrete timelines for achievement. An incremental, strategic approach should be used to manage and benchmark change over time.28

1) Top and middle management administrators, front-line staff, consumers and/or their families, and community stakeholders should participate in the development and integration of the plans:

◆ A process for system participants to integrate the plans into all aspects of organizational strategic planning and in any future planning process for should be established

◆ Individuals within respective agency management need to take responsibility for and have authority to monitor implementation of their plans

◆ Each individual manager should be held accountable for the success of the plans in his/her level within the organization

◆ Ongoing efforts are needed to build family capacity, partnership, and cultural competence at each level of care within the system (e.g., assessment, planning, service delivery, monitoring, evaluation, policy development, training and technical assistance).

2) Community resources (e.g., community councils, governing bodies, family members, clans, native societies, spiritual leaders, churches, civic clubs, and community organizations) and cross-system alliances (e.g., corrections, juvenile justice, education, social services, substance abuse, developmental disability, primary care plans, public health, and
tribal health agencies) should be identified and involved, to integrate family/consumer support and service delivery:

- A process for assessing unique needs and ecological factors among families, their neighborhoods and communities should be developed, using current databases, surveys, community forums, and key informants
- Service approaches and models should be identified as appropriate and acceptable to the families and communities served
- Natural supports (e.g., family members, religious and spiritual resources, traditional healers, churches, civic clubs, community organizations) should be identified for purposes of supporting and/or reintegrating individuals within their natural environment.

3) Specification of culturally diverse staffing and minimal skill levels (including gender, ethnicity, language along with licensing, certification, credentialing, and privileging) for all staff, clerical through executive management:

- Development of clear expectations and incentives (salary, promotion, bonuses) for family responsive and cultural competence performance. Family responsiveness and cultural competence practice should become an integral part of staff and system performance evaluations systems
- Development of a plan to integrate ongoing training and staff development into the overall plans.

4) Development and ongoing plan monitoring to assure equal access, comparability of benefits, and desired outcomes across each level of the system of services and for all services provided:

- The development and application of culturally competent and family responsive indicators;
- Indicators are adapted for specific cultural values and beliefs to develop, implement, and monitor the plans.
Monitoring Progress in Building Family Capacity, Partnership and Cultural Competence

A Checklist for Communities to Monitor Implementation Progress of a Family Partnership and Cultural Competence Plan

1. Have plans for Family Partnership and Cultural Competence been developed?

2. Are established links with community resources identified to help build, implement and monitor application of the plans?

3. Are there defined steps and timeframes for the integration of the plans into each level of organizational planning?

4. Do the plans specify necessary policy and procedure changes?

5. Are the Family Partnership and Cultural Competence Plans used as tools in the development of policies and procedures?

6. Is there a training and technical assistance process spelled out to help staff, families, policy-makers, and other stakeholders become familiar with the plans? Build relevant skills related to the plans?

7. How many or what percentage of individuals targeted for training and technical assistance have received initial training? Ongoing training?

8. Are the knowledge and skills regarding family and group values, traditions, expression of illness, reflected in practice?

9. Do program staff, families, policy-makers, and other stakeholders, demonstrate awareness and acceptance of the Family Partnership and Cultural Competence Plans?
Communities Building Family Capacity, Partnership and Cultural Competence

Family capacity, partnership, and cultural competence pose unique challenges for each state and community. However, there is value in learning from strategies that some sites have employed to improve policies and services through inclusion. Two examples are provided. In the first, the K’e Project describes an integration of traditional healing and wellness approaches with current intervention strategies. In the second, The Beacon Centers and National Beacons Adaptation Project, continue to provide models for culturally responsive family-school-community collaboration.

Incorporating Traditions of the Navajo Nation: The K’e Project

The Children and Families’ Advocacy Corporation K’e Project, a non-profit organization established to provide comprehensive community-based services to Navajo children with serious emotional disturbance and their families, is founded on the principles of Sa’anaa’ghee Bik’ehozho, an ancient model of cultural wellness that provides guidance for today’s Navajo families. The project is based on the belief that every family has the strength and wisdom to “walk in beauty.” Members of the often large extended family routinely play an important role in their children’s healthy development, and are a significant resource to the healing process.

The Project integrates conventional intervention strategies with Navajo-specific interventions designed to promote the principles and practices of K’e. For example, home-based service approaches that incorporate traditional values in therapy, education, and case management have turned out to be an effective and natural means of support to families, since most live far from office-based services, and transportation is limited. Community outreach provides services in the home including intensive therapeutic interventions, traditional Navajo inter-
ventions, education, and case management. Previously, the “no-show” rate for services was high. Now, youth and their families receive significantly more services through an outreach approach that incorporates traditional values and practices. The project has experienced success in building broad-based service teams to support families by respecting the traditional definition of family, which extends beyond parents and siblings to other persons related by clan affiliation. The K’e Project builds on successful interventions that Navajo people have used for hundreds of years to address modern-day challenges for youth and their families. (Located in New Mexico, the K’e Project may be contacted at 505-326-7900.)

**Building on Family Strength: The Beacon Centers and National Beacons Adaptation Project**

**The Beacon Centers**

A Mayoral Commission created the initial Beacons concept to develop community centers in selected New York City schools. The commission’s aim was to provide young people with constructive alternatives to life on the streets, to help reduce drug use, and to provide a means for problem solving in disadvantaged communities. The founders of the Beacons felt that such programs could provide a way to draw upon and focus the strengths of families and communities to address local needs. The architects of the concept stressed that the range of services provided must be tailored to meet the particular needs of each community and must be designed and controlled by local residents. The Beacons’ effort is not a traditional “project” with specified components; it is a “strategy” designed to help troubled communities meet their specific needs.32

The Beacon Centers31 promote healthy development in youth and families by promoting connections and support among urban families, neighborhoods, schools, and communities. Working closely with grassroots community-based organizations with strong ties to ethnic and cultural groups, the issue of maintaining and promoting cultural competence remains a high priority for Beacon Centers and Adaptation sites. Public-private partnerships involving county government, schools, non-profits, and local organizations keep the centers open all year, evenings and weekends, before and after school. Participating youths can engage in challenging opportunities to learn and practice new skills, and contribute to their community. Cross-cultural opportunities are emphasized, to promote understanding and practice in developing affirming and diverse relationships. Activities are available to families at no charge, and include:
Educational support (e.g., tutoring, computer skill instruction, and homework clubs)

Leadership development, peer counseling, career skills development, community service activities, arts, recreation and health programs (e.g., support groups, drug prevention)

Family and parent support activities (e.g., parenting classes, English as Second Language instruction, mental health and health, citizenship skill building)

Childcare, cultural events, and other community gatherings.

In New York and San Francisco, where nearly fifty Beacon Centers operate, and in Denver, Minneapolis, Oakland, and Savannah, where fifteen adaptations are in place, youth development in school settings is becoming institutionalized with an approach that intentionally bridges the gaps—cultural and otherwise—between families and schools. In Beacon settings, youth and families are empowered by the presence of safe spaces, meaningful opportunities, and professionals who promote respectful relationships and practice building on strengths.

National Beacons Adaptation Project
Beacons are intended to engage the energy, commitment, and sense of personal responsibility of community residents. New York City’s Department of Youth Services funded the first 10 Beacons in 1991 with design assistance provided by the Fund for the City of New York’s Youth Development Institute. A primary mission of the over 40 beacons now in New York is to give residents, particularly youth, tools to help them avoid crime and violence and to solve community problems. Among the array of services and programs provided are mentoring, tutoring, employment training and counseling, and cultural recreational activities. Many of these services are aimed at addressing the risk factors associated with crime and violence by strengthening protective factors (such as bonding with role models and developing healthy peer groups). Targeted efforts included anti-violence programs and campaigns, conflict resolution training, public education about drugs, substance abuse treatment, community beautification projects, and athletic activities involving youths and local police officers. Characteristics of Beacons that make them particularly promising strategies include local control by residents, a comprehensive program for all ages, an emphasis on personal responsibility, and a safe, secure environment where problems can be discussed and solved.33
Monitoring and evaluation

The Fund for the City of New York, through the Youth Development Institute collects data from the Beacons on a monthly basis, including: days of operation per month; number of individuals participating by programs, number of hours of programming provided, and the age distribution and race or ethnicity of new participants. All Beacons have after school programs with an average daily attendance of 120 to 150 elementary and/or intermediate school students. All offer youth educational enrichment and homework help, recreation, and cultural arts activities. As of 1996, twenty-one Beacons have youth leadership programs that enroll from 50 to 200 teenagers. Twenty-seven Beacons offer adult education programs, including GED preparation, English as a second language, and/or adult basic education/literacy. Other adult programs include computer literacy, conversational English, Spanish as a second language, and entrepreneurship courses. A number of Beacons host A.A., Al Anon/Alateen and N.A. group meetings.\textsuperscript{34}

Red Hook: One Beacon In Action

The Red Hook section of Brooklyn has often been characterized as a neighborhood where poverty, crime, drugs, a lack of services, and a lack of hope prevail. Red Hook is an isolated 680-acre peninsula that extends from the western portion of Brooklyn. The community’s physical isolation is underscored by the fact that only one road connects the peninsula to Brooklyn proper. The community’s social isolation is also striking. Because of its many problems, Beacon administrators noted that it is stigmatizing for children to say they come from Red Hook. The director said the children learn at an early age to feel bad about the neighborhood. Program personnel noted that, “Red Hook lacks stores, movie theaters, meeting places, and other facilities that contribute to a sense of community.” The youth of Red Hook are primarily African American (51 percent) and Hispanic (44 percent). Sixty-nine percent of the area’s out-of-school youths between the ages of 16 and 19 are unemployed. Only 22 percent of the children live in two-parent families. The program’s philosophy is manifested in the community center’s family like atmosphere. People arriving at the center are warmly greeted and asked to sign in. There are no metal detectors; visitors are not frisked or treated like criminals. Instead, they are expected to respect one another and the role of the Beacon in the community. The Red Hook Community Center’s efforts have been successful in creating a positive environment. Since conflict is immediately addressed and mediated, there has been no violence at the center in its 3-1/2 years of operation. Because of this positive atmosphere, participants have increasingly
brought problems such as interpersonal conflicts to program staff, and the staff has been able to intervene in numerous disputes before they escalated to the streets. The Red Hook Community Center provides a variety of activities and services to participants of all ages 6 days a week throughout the year.35

**Chicago YouthNet Project**

Chicago is creating a series of community centers modeled on the Beacons but with some modifications. The community centers are being developed in response to a recommendation by Chicago’s Youth Development Task Force. Members included local governmental officials, representatives of nonprofit organizations, community members, and academics. The secretariat for the task force is the MacArthur Foundation. The task force conducted investigations for 1 year and held intensive community meetings organized by youths in four neighborhoods. The resulting plan released in mid-1994 provided a detailed blueprint to address the problem of reducing risk factors confronting local youths. In December 1994 plans for the first 6 centers were announced with the expectation that the project would expand by opening similar centers in all 25 Chicago police districts. These Chicago YouthNet Centers, will provide a similar array of services to those provided by the New York Beacons, but will differ from the Beacons in significant respects. First centers will be located in other community facilities, such as recreation centers (e.g., YMCA’s) as well as in school buildings. Second, limited funding is being provided for the effort that will work to develop partnerships across existing resources in the selected neighborhoods. Third, some of the YouthNet Centers will have smaller affiliated satellite facilities in the neighborhood to coordinate service delivery with the center. The program in Chicago’s West Town community will use 10 different neighborhood facilities to deliver services. Satellite facilities used by some of the YouthNet programs include churches, town halls, local health centers, settlement houses, and child care centers.36

For more information, contact: Sharon DuPree, Fund for the City of New York, Youth Development Institute, 121 Avenue of the Americas, New York, New York 10013. PH: 212/925-6675. Fax: 212/925-5675. Email: sdupree@fcny.org. Or contact: Mindy Linetzky, Director of Public Affairs, Community Network for Youth Development. 657 Mission Street, Suite 410. San Francisco, CA 94105. PH: 415/495-0622. Fax: 415/495-0666. Email: sfbeacon@cnyd.org.
Family Capacity-Building

American Academy of Pediatrics
The American Academy of Pediatrics is an organization of 55,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults. [http://www.aap.org/](http://www.aap.org/)

Advocates 4 Special Kids
A4SK® is a non-profit association offering services and support to parents, professionals, and adults of children with special needs and learning disabilities. A4SK is designed to train parents of children with special needs to advocate for their child’s rights and responsibilities for a free and appropriate education under the law. [http://www.a4sk.org/](http://www.a4sk.org/)

Advocates Across America
Advocates Across America is dedicated to teaching parents and other interested people how to effectively advocate for the educational rights of children with special needs. Resources include training tapes and manuals, legal advocacy, and newsletters. [http://www.axa.org/](http://www.axa.org/)

Children With Disabilities
The Children With Disabilities Web site offers families, service providers, and other interested individuals information about advocacy, education, employment, health, housing, recreation, technical assistance, and transportation covering a broad array of developmental, physical, and emotional disabilities. [http://www.childrenwithdisabilities.ncjrs.org/](http://www.childrenwithdisabilities.ncjrs.org/)

Exceptional Parent
Exceptional Parent Magazine’s online resource. Continuing 30 award-winning years of providing information, support, ideas, encouragement and outreach for parents and families of children with disabilities and the professionals who work with them. [http://www.eparent.com/](http://www.eparent.com/)
Family Support America
Family Support America is an alliance of people and organizations convinced that in order to do the best we can by our nation’s children, we need to support and strengthen America’s families. http://www.familysupportamerica.org

Federation of Families for Children’s Mental Health
The Federation of Families for Children’s Mental Health is a nonprofit organization located in Alexandria, VA. FFCMH is dedicated to advocacy and policy on behalf of children and youth with serious emotional and behavioral disorders, and their families. The Federation provides resources and technical assistance to communities engaged in system reform efforts to help promote full inclusion and partnership with family members. http://www.ffcmh.org/

National Alliance for the Mentally Ill
The National Alliance for the Mentally Ill (NAMI) is a nonprofit, grassroots, self-help, support and advocacy organization of consumers, families, and friends of people with severe mental illnesses, such as schizophrenia, major depression, bipolar disorder, obsessive-compulsive disorder, and anxiety disorders. Working on the national, state, and local levels, NAMI provides education about severe brain disorders, supports increased funding for research, and advocates for adequate health insurance, housing, rehabilitation, and jobs for people with serious psychiatric illnesses. http://www.nami.org/

National Network for Youth
The National Network for Youth serves as a powerful advocate in Washington, D.C., protecting key legislation and spending affecting youth. The National Network for Youth is dedicated to ensuring that young people can be safe and lead healthy and productive lives. With more than 700 direct members and 1,500 constituents involved in its regional and state networks, the National Network informs public policy, educates the public and strengthens the field of youth work. National Network members operate out of agencies, community centers, classrooms, storefronts, houses, vans and on the streets. They provide safety, shelter, counseling and social, health, educational and job-related services. http://www.nn4youth.org
Parents Anonymous
Parents Anonymous of Texas, Inc. is an organization committed to strengthening families and stopping child abuse through the development of volunteer-based services at the state and community level. Acknowledging the family as a unit, Parents Anonymous serves both adults and children. Parents Anonymous volunteers and staff intervene to stop abuse and strengthen families by providing a supportive, nonjudgmental support system where parents can learn and practice skills to manage stress, control anger, build self-esteem and assume accountability for the well-being of their children. http://www.parentsanonymous-natl.org/

Cultural Competence

Alliance for Redesigning Government
The Alliance for Redesigning Government is the center of a national network and clearinghouse for state, local, and federal innovators; nonprofit and corporate leaders; and scholars who advocate performance-based, results-driven governance. The Alliance web site contains online learning resources including case studies, concept papers, resource listings, and discussion forums about the critical issues of performance-based, results-driven governance. (202) 347-3190, or see http://www.alliance.napawash.org/alliance/index.html

Center for Effective Collaboration and Practice
The Center for Effective Collaboration and Practice works to support and promote a reoriented national preparedness to foster the development and the adjustment of children with or at risk of developing serious emotional disturbance. To achieve their mission, the Center is dedicated to a policy of collaboration at Federal, state, and local levels that contributes to and facilitates the production, exchange, and use of knowledge about effective practices. http://www.air.org/cecp/cultural/default.htm

Center for the Study of Social Policy
The Center for the Study of Social Policy provides public policy analysis and technical assistance to help states and localities implement creative and effective strategies that strengthen families and ensure that children grow up healthy, safe, successful in school, and ready for productive adulthood. The Center's work is concentrated in the areas of family and children's services, income supports, neighborhood-based services, education reform, family support, disability and health care policy, and long term care for the elderly. (202) 371-1565 http://www.cssp.org/
**Child Welfare League of America**
The Child Welfare League of America is an association of more than 1,100 public and not-for-profit agencies devoted to improving life for more than 3.5 million at-risk children and youths and their families. Member agencies are involved with prevention and treatment of child abuse and neglect, and they provide various services in addition to child protection—kinship care, family foster care, adoption, positive youth development programs, residential group care, child care, family-centered practice, and programs for pregnant and parenting teenagers. For all these areas, CWLA has program experts who consult, train and otherwise assist agencies to advance their practice. CWLA is the largest publisher of child welfare materials in the world, is involved extensively in consulting with both governmental and voluntary child welfare organizations on improving services to at-risk children and families, and convenes numerous conferences, seminars and training sessions throughout the year. Since 1984, CWLA has been based in Washington, DC.

http://www.cwla.org

**Maternal and Child Health Bureau**
The Maternal and Child Health Bureau (MCHB) provides its leadership, partnership, and resources to advance the health of all our Nation’s mothers, infants, children and adolescents—including families with low income levels, those with diverse racial and ethnic heritages and those living in rural or isolated areas without access to care.

http://www.mchb.hrsa.gov/index.html

**National Center for Cultural Competence**
The National Center for Cultural Competence (NCCC) is a component of the Georgetown University Child Development Center, Center for Child Health and Mental Health Policy, and is housed within the Department of Pediatrics of the Georgetown University Medical Center. The mission of the NCCC is to increase the capacity of health care programs to design, implement and evaluate culturally competent service delivery systems.

http://gucdc.georgetown.edu/cultural.html

**Research and Training Center on Family Support and Children’s Mental Health**
The Research and Training Center on Family Support and Children’s Mental Health is dedicated to promoting effective community-based, culturally competent, family-centered services for families and their children who are, or may be affected by mental, emotional or behavioral disorders. This goal is accomplished through collaborative research partnerships with family members, service providers, policy makers, and other concerned persons.

http://www.rtc.pdx.edu/
Urban Institute
The Urban Institute is a nonprofit policy research organization established in Washington, D.C.. The Institute’s goals are to sharpen thinking about society’s problems and efforts to solve them, improve government decisions and their implementation, and increase citizens’ awareness about important public choices. Much of the Institute’s research spans several disciplines and blends quantitative and qualitative approaches to problem-solving. They are involved in research projects with partners in more than 45 states and 20 countries. (202) 833-7200, or see http://www.urban.org

Welfare Information Network
The Welfare Information Network (WIN) provides information on policy choices, promising practices, program and financial data, funding sources, federal and state legislation and plans, program and management tools, and technical assistance. WIN’s web site provides one stop access to over 9,000 links on more than 400 web sites. WIN is a foundation funded project to help organizations and individuals obtain the information, policy analysis, and technical assistance they need to develop and implement welfare reforms that will reduce dependency and promote the well-being of children and families. Jessica Yates, (202) 628-5790, or see http://www.welfareinfo.org

Western Interstate Commission for Higher Education
Boulder, CO 2000
The mission of the WICHE Mental Health Program is to assist states in the improvement of systems of care for consumers and their families; and to advance the preparation of a qualified workforce in the West. The program helps states respond to changing environments through collaborative approaches in research, policy analysis, networking, technical assistance and information sharing. http://www.wiche.edu
ENDNOTES


12 Lecca, Quervalu, Nunes, & Gonzales, 1998


21 Cultural Competence in Serving Children and Adolescents With Mental Health Problems Fact Sheet. Center for Mental Health


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25 Adapted in part from the Federation of Families for Children’s Mental Health principles for family involvement in the development and operation of managed health and mental health care systems for children and youth. http://www.ffcmh.org/Eng_one.htm


29 Ibid.


34 Ibid.

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