



Developments

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Department of Human Services

From Child Dependency To Mental Health, Fruits Of Organization Begin To Emerge

Some 18 months after its blueprint for redesign was made public, marked changes in the way the Allegheny County Department of Human Services does business are being seen.

Perhaps most apparent are changes in the way child dependency cases are handled. Juvenile Court reform, a designated adoption unit, a partnership with a private law firm to handle adoption cases, instituting permanency case reviews, and a doubling of funds for in-home services for parents all appear to be contributing to encouraging trends that show fewer children going into out-of-home placement, and significantly more adoptions being finalized for those whose parents fail to convince the court they are fit to regain custody.

Shifts in strategies and approaches to service delivery are also evident, with more emphasis being placed on service integration, prevention, a focus on family strengths rather than deficits, and building partnerships and collaborations.

More contracts with community-based agencies are being negotiated and money for prevention-minded family support centers has been doubled, enabling more families to receive services in their neighborhoods. For

the first time, the Department is reaching beyond restricted, categorical public funding to attract private-sector money to finance new initiatives and technical assistance on matters such as fiscal integration.

Progress over the last 18 months has been “slow, but steady,” said Marc Cherna, director of the \$508 million-a-year county department. Most of the work to date, he said, has focused on planning and many reforms have yet to be implemented or fully realized.

“We have a long way to go. What we’ve tried to do is be very careful in how we proceed on this. We didn’t want to put things in place, then discover we have to undo them. And we’re making an effort to engage people so that this is a collaborative process. That takes time, but I think it will be a stronger system because of it.”

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United Way Project Supports Human Service Collaboration

The United Way of Allegheny County is promoting the wider use of collaboratives in human services through a new project to support new and existing collaborations and to educate government, agencies, foundations, and others about the process.

The Collaboration Project follows the success of efforts such as the Community Collaboratives, a United Way-supported collaboration begun seven years ago to

wrest addicted mothers from the influence of drugs and alcohol.

The potential of collaborations to more effectively and efficiently address multiple issues confronting families has made it a pop topic of late in human services. Public and private funding sources, in particular, are expressing increasing interest in the process.

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Internal reorganization, a key element of the Department's redesign, includes relocating staff, changing fiscal management, and updating and improving the way human service data is gathered and managed.

"The question is how do you change the organization that has some of these categorical funding constraints and these old ways of doing business," said Dan Fogel, Ph.D., Professor of Business Administration, Joseph M. Katz Graduate School of Business, University of Pittsburgh. "That's what they are trying to do, change the old way of doing business, get the department to act in accordance with the strategies and principles. That takes a lot of management know-how and a lot of change."

Dr. Fogel, a consultant to the Department of Human Services, specializes in human resource, management, and organizational change issues and has done work with some of the nation's largest corporations, including General Electric, Pfizer Inc., and Holiday Inn.

"My experience has been in the for-profit world," he said. "First, I'm amazed that how many of the things that I do translate and are helpful to (the Department of Human Services). But also, I've been learning that this is really difficult. I haven't seen many organizational-change projects that have this level of complexity."

'Mega Department'

In July 1996, the Allegheny County Commissioners created the Department of Human Services. The "mega department" integrated the former county departments of Aging, Children and Youth Services, Health, Mental Health/Mental Retardation/Drug and Alcohol, Homeless and Hunger, and Federal Programs.

Cherna was appointed director in January 1997 and asked to turn the fragmented human service system into a seamless, efficient operation providing comprehensive support for those in need.

The blueprint for redesign, issued in January 1998, staked out several principles that would guide the new Department, including an emphasis on quality, readily-accessible delivery, strengths-based approaches, respect for individuals, and individually-tailored and empowering services focused on fostering independence, rather than dependency. A multi-layered strategy called on the Department to:

- Take a holistic approach to service delivery to serve the needs of families.
- Integrate common functions across programs.
- Build partnerships and collaborations with community-based organizations and providers.
- Engage in proactive planning to better adjust to change in federal, state, and local social and economic policies.
- Enhance communication within the department and with families and stakeholders.

Meanwhile, the human service landscape was shifting in profound ways, driven by reform legislation in Washington and Harrisburg. Changes in welfare law brought "welfare-to-work" rules, challenging human services to promote self-sufficiency, find jobs for dependent families, and prepare them to succeed in the workplace. And new state legislation mandated a shift to manage care for those who received behavioral health services covered by Medicaid.

The welfare of children at risk of abuse and neglect is another major responsibility of the Department affected by changes in the law. The federal Adoption and Safe Families Act of 1997 called on states to vigorously attempt to find permanent homes for children in foster care and other out-of-home placement, and to place them quickly.

Permanency Planning

Among the reforms put in place to date, those that address permanency planning are perhaps the most developed. It is also an area in which outcomes can be measured, in part, by recent Department statistics. The numbers suggest significant improvements in placing children in permanent homes.

The Department reports that the average length of time for children in placement, whose case goal was to return home, fell from 23 months in February 1998 to an average of 19 months. When reuniting a family is not

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New Therapy Explored In Treating Child Depression

Research has shown that children are not immune to depression, as was once believed. But little is known about ways to treat childhood depression.

Researchers at the University of Pittsburgh Medical Center's Western Psychiatric Institute and Clinic are addressing this issue in a treatment development study funded by the National Institute of Mental Health, directed by Maria Kovacs, Ph.D., Professor of Psychiatry at the University of Pittsburgh.

"There's a misconception that children don't get depressed," said Dr. Kovacs, the study's principle investigator. "On the contrary, depressed children are likely to suffer reoccurring episodes that complicate their lives and threaten their performances in school. It's especially important that their depression be recognized and treated, otherwise it can have a profound impact on their lives."

Contextual Psychotherapy

Although depressed adults and children have similar symptoms, therapies for children need to be tailored to their developmental stage.

The therapy under study is called "Contextual Psychotherapy," which is based on the argument that to treat depression, the context in which depression occurs must be understood. This includes getting a clear picture of the situations in which the child experiences various depressive symptoms, working with the child and parent to reduce the symptoms, and then helping them to learn adaptive ways to cope.

The research study of this treatment involves both child and parent.

Chronic Depression

The research study focuses on treating children, ages 7-12 years, who suffer from dysthymia, or chronic depression. Clinicians expect to treat 15 children a year during the three-year span of the study.

The treatment is first concentrated on reducing or eliminating the depressive symptoms, which may include sadness, irritability, brooding, crying, lack of interest in normal play or other activities, sleep problems, and poor school performance.

After the symptoms are reduced or eliminated, the treatment seeks to improve children's coping skills to help them ward off future depression. Teaching methods include the use of artwork, video clips of coping methods, discussion, and role playing. The methods used depend on the age of the child.

"The therapy is based on the assumption that children become vulnerable to depression in the face of stress because they have difficulty in regulating their emotional responses," said Melina Young, Study Coordinator and treating clinician. "They do not have the coping skills that non-depressed kids have, who automatically act in ways that help them calm down when they are upset.

"We work with the child and mother to help them recognize stressful situations and help them discover things to do if the child encounters events that elicit strong negative feelings."

The research study of this treatment involves 30 sessions over a 10-month period. Children with major medical disorders or with severe conduct or attention deficit disorder are not eligible for the study.

FOR MORE INFORMATION, contact the Childhood Depression Research Program at the Western Psychiatric Institute and Clinic at (412) 624-3987. ■

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“What is really driving it now is the funding,” said Yvonne Van Haitsma, Director of the Collaboration Project. “But the reason it is important is that many of the problems communities deal with are multifaceted.

“Foundations are increasingly asking, ‘Are you working with other people?’ They’re recognizing that you need a multifaceted approach to multifaceted problems. If you and others with the same mission find common goals, you are able to pool resources and multiply the impact you can have.”

Collaborations also tend to empower citizens to be a part of the solution to issues they and their communities face. Once established, an effective collaboration can become a vehicle within a community to identify a range of issues and coordinate responses.

Collaboration Project

The purpose of the United Way project is to establish a resource center that expands knowledge and skills related to collaborations designed to achieve community-defined outcomes. It is reaching out to community residents, community-based organizations, agencies, institutions, government officials, and funders.

Goals of the project include:

- **Educate the community.** Education is directed toward a range of parties important to human service collaboration, including citizens, agencies, grassroots organizations, government, funders, and businesses. Among the resources offered will be a resource library, training on a range of collaboration issues, and case studies and best practices.
- **Support existing collaboratives.** Ways in which the project is expected to help support existing collaboration include providing technical assistance, brokering expertise, and using successful collaborations as models.
- **Incubate new collaborative efforts.** Potential or new collaborations would be identified using an advisory committee and other interested parties. The project plans to host conferences and provide training on elements of collaboration and how to develop a mission, vision, and plan of action. Help identifying funding sources will also be offered.

Local Collaboratives

The benefits of collaboration in human services are already being demonstrated in Western Pennsylvania.

One well-studied example is the Community Collaboratives project begun in 1991. Seeded with \$500,000 from the United Way of Allegheny County and grants from 10 local foundations, the Collaboratives opened in 1992 to serve addicted mothers and their families in the Hill District and Homewood/Brushton neighborhoods of Pittsburgh and in the City of McKeesport. Each offered case management and services aimed at weaning mothers from drugs and alcohol and putting them on the road to stability, independence, and a brighter future for themselves and their children. Each included processes to eliminate duplication, monitor quality, and foster cultural sensitivity and respect for the women they served.

Within three years, more than 90 public and private organizations and agencies were providing a range of services that included drug treatment, health care, mental health care, child care, housing, transportation, job training, educational assistance, children’s school performance-related services, counseling, and respite care.

An evaluation released last year reported encouraging outcomes. Far fewer mothers returned to drugs and alcohol than national relapse rates suggest should have resumed a life of addiction after one year of treatment. Unemployment and welfare dependency rates for women who underwent treatment fell. Nearly half of the mothers who had lost custody of their children won them back by demonstrating that, freed from addiction, they were capable parents.

Other benefits have followed. At the Hill District Community Collaborative, for example, other community issues have been identified in the course of working with addicted mothers. One was the need to help women who are victims of sexual assault, incest, or rape. In response, a drop-center was established in the community.

“One of the interesting things that has happened is that now we’re better able to look at a number of different issues that effect the community and pull people together to address them,” said Director Terri Baltimore.

Another example of long-standing collaboration is found in the Mon Valley. In 1988, the Mon Valley Pro-



READING DIFFICULTIES: RISK FACTORS AND EARLY CHILDHOOD PREVENTION

Special Report

University of Pittsburgh Office of Child Development

Serving Children and Families By Promoting

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The Problem

Reading is essential to success in America. In a technological society such as ours, the demands for higher literacy are always increasing, raising the specter of a bleaker future and ever more grievous consequences for the child who falls short.

The good news is most children learn to read fairly well.

However, too many children find their education imperiled by reading difficulties. There are many reasons why. Ineffective instruction is a major factor putting children at risk of reading problems. Some children are at risk simply because they live in homes where reading is considered of little value. For others, reading difficulties are linked to cognitive deficiencies or conditions such as a hearing impairment.

The problem has not gone unnoticed. Reading difficulties are often central in public debate over the effectiveness of schools and curriculum. Perhaps the highest profile and most contentious debate in education in recent years has been over which strategy for teaching reading is best, traditional phonetics or the newer whole-language approach.

Learning to read and write begins long before the grade-school years. Children who begin school with less knowledge in domains such as letter knowledge, awareness of the sounds of language, and the basic purposes and mechanics of reading are more likely to have trouble learning to read – regardless of which teaching strategy is used.

Good reading instruction is still the best way to prevent reading difficulties. And prevention can, and should, begin early -- at home, in day care, preschool, and in kindergarten. To that end, school officials, teachers, caregivers, policymakers, and parents share the responsibility of seeing to it that children enter school already on their way to becoming successful readers.

Although the precise number of U.S. children with reading difficulties remains elusive, estimates suggest a large number are having trouble.

One measure is the number of children receiving special education. The Department of Education reported that among the nation's 57.8 million school children, 2.5 million (4.4%) received special education services during the 1994-95 school year. If estimates that reading disabilities account for about 80% of all learning disabilities are accurate, then 3.5% of all school children that year received services for a reading disability.

Other studies that measured low achievement in reading among specific populations report higher numbers. One estimates that as many as 17.5% of Connecticut children in primary and middle school grades have reading difficulties.¹

Such findings suggest that millions of children face the grave consequences that can befall those who cannot read or read well.

Specifically, children's reading skills at the end of the third grade have been found to predict whether or not they will graduate from high school. Those who are not at least moderately skilled in reading by then are unlikely to earn a high school diploma.

Without a high school diploma, they are more likely to find themselves unemployed. In 1993, 9.8% of those without a high school degree were unemployed, compared to 5.4% of those with a high school degree, and 2.6% of those with a college degree.

Moreover, jobs increasingly require high school graduates be more than merely literate. They must be able to read challenging material, perform sophisticated calculations, and solve problems independently. In fact, the demands of the workplace are greater today than those placed on schooled, literate Americans as recent as a quarter of a century ago.²

Risk Factors

In some cases, the source of reading difficulties is clear, such as biological limitations that make the processing of sound-symbol relations difficult. In other cases, the source is related to certain experiences, such as poor reading instruction.

Child-Based Factors

Some reading and more general learning problems are thought to result from cognitive or sensory limitations. These conditions include:

- **Cognitive deficiencies.** Children with severe cognitive deficiencies usually fail to learn to read well, if at all.
- **Hearing impairment.** Hearing impairment or deafness is associated with reading difficulty. Chronic ear infections can lead to intermittent hearing loss and the effect of this common problem on language development and reading is a concern.
- **Early language impairment.** Although the rate at which children acquire language varies widely during the first four years of life, some lag very far behind. In many cases, delayed language development indicates a broader condition, such as hearing impairment or a general developmental disability. Others are simply not exposed to an adequately responsive language environment. As many as 75% of preschoolers with early language impairment develop reading difficulties later.³
- **Attention deficits.** Although evidence suggests that attention deficit/hyperactivity disorder and reading disability are distinct disorders, they often occur together and do so more frequently as a child matures. Among first graders with attention problems, 31% also have a reading disability; among ninth graders, 50% also have a reading disability.⁴

Poor Instruction

A large number of children who, given proper instruction, should be capable of reading adequately are not doing so. This suggests they are receiving poor instruction.

If poor instruction is confined to an individual

teacher, a child's progress may be slowed for the year spent in that classroom, but will likely recover if exposed to more skilled teachers and better instruction in the following years. There appears to be one exception, however. Children who receive poor instruction in first grade are more seriously harmed by that experience and tend to do poorly throughout their school years.⁵

In some schools, low achievement is schoolwide and persistent. Although poor instruction can sometimes be traced to the lack of appropriate curriculum, it is more often the result of several coexisting conditions. These may include low expectations for success on the part of teachers and administration; slow-paced, undemanding curriculum; teachers poorly trained in effective methods for teaching beginning readers; a poor supply of books; and noisy, overcrowded classrooms.

Unfortunately, instructional factors are rarely given serious consideration when a child is referred for evaluation for a suspected reading difficulty.

School Factors

Schools determine the effectiveness of directly teaching reading, as well as the opportunities for children to learn and polish skills and attitudes important to reading.

Studies shed light on schoolwide and classroom characteristics that contribute to poor student outcomes. In less effective schools, students spend less time on specific learning tasks, and teachers are less likely to present new material, express high academic expectations, or use positive reinforcement. Classrooms are seen to be less friendly than those of effective schools, and there are more classroom interruptions and more reported discipline problems.

Family-Based Factors

Parents and home environment also influence a child's reading development.

Children whose parents and siblings have reading difficulties are more likely to have trouble reading themselves. And young children less exposed to books and given fewer opportunities to acquire reading-related knowledge and skills are more likely to have trouble reading than those who find a rich literacy environment at home.

Five broad areas of family functioning that may influence reading development include:⁶

Prevention During Early Childhood

- **Value placed on literacy.** By reading themselves and encouraging reading, parents demonstrate they value literacy.
- **Press for achievement.** By expressing their age-appropriate expectations for achievement, providing reading instruction, and responding to the children's reading interest, parents can help a child aspire to achieve.
- **Availability and use of reading materials.** Literacy experiences are more likely to occur in homes that contain children's books and other reading and writing materials.
- **Reading with children.** Reading to and with preschoolers contributes to their development as readers.
- **Opportunities for verbal interaction.** Fewer opportunities for verbal interaction at home is a factor related to lower child vocabulary scores, which in turn is related to poorer reading outcomes.⁷

Evidence suggests that home literacy environment plays different roles at different ages. During preschool years, it may contribute primarily to a child's attitudes toward reading, knowledge of the purpose and mechanics of reading, and skills that aid learning later in school. Once the child begins school and starts to read, help with homework, listening to the child reading aloud, and the availability of resources such as a dictionary or encyclopedia are factors important to high achievement in school.

Socioeconomic Status

Low socioeconomic status carries with it conditions that may limit the development of children, including reading difficulties, raised in less educated families, receiving less adequate health care, and attending substandard schools.

Although socioeconomic status is a factor related to school achievement, it is more telling of the status of a school or community than of the abilities of children. Low-income children are much less at risk for poor achievement if they attend moderate or upper-status schools, rather than schools where most, if not all, students are low-income.

Efforts to prevent reading difficulties among children is rife with challenges. Differences among children, settings, the measures used by different research teams, and even in the definitions used to characterize reading problems, complicate the task of comparing studies.

Despite the limitations, findings culled from the literature on reading interventions suggest promising efforts are being made to prepare infants, toddlers, and preschoolers for reading instruction and to prevent reading difficulties in the early grades.

Preschool

The evidence of the potential of preschool to improve children's early language and literacy development is heartening.

Studies suggest, for example, that phonological awareness training given in preschool has helped children develop an important understanding of how words can be broken into sounds. Children with developed phonological awareness are aware of, and better able to recognize, the sounds of language.

In one study, all but one of the 21 preschool children given phonological awareness training were later able to make rhymes, while only nine of the 21 children who did not receive the training could later rhyme.⁸

Comprehensive preschool programs, in particular, appear to make an impact on later reading ability. In the Abecedarian Project, infants received enriched day care that stressed language and cognitive development through age 5. At follow-up, the children showed significantly higher reading achievement from grade 3 through grade 8.⁹

However, not all preschools offer adequate language environments. One study found that public preschools in North Carolina rated lower on language and reasoning measures than on other aspects of the Early Childhood Environment Rating. The findings suggest the language development needs of the children were not being fully met and that mechanisms for improvement were not available. A study of 32 Head Start classrooms also found the lowest scores on the test to be for language and reasoning.¹⁰

In North Carolina and elsewhere, studies of preschool literacy conclude that overall program quality is an important factor in determining the effects preschool will have on the language and preliteracy skills of children.

Studies also suggest that preschool teachers are an important – and underutilized – resource in promoting literacy. Central to a preschool's role in the prevention of reading difficulties is each teacher's knowledge and experience, and the support its teachers are given.

Parents As Teachers

A child's attitude about learning to read is likely to be influenced by the attitudes, values, and expectations of his or her parents with regard to reading.

Children of parents who view reading as a source of entertainment have a more positive view of reading than do children whose parents emphasize the skills aspect of reading development.¹¹ Children who view learning in school as irrelevant to life outside school are less motivated to invest time and effort in learning to read.¹²

Parents and family can also contribute by promoting awareness, concepts and functions of reading, knowledge of narrative structure, and vocabulary and discourse patterns.

Parent-oriented early intervention services aimed at improving literacy and language outcomes are typically built around regular home visits by a parent educator who offers information and guidance on child development and how to prepare children for school.

Studies suggest some of these services strengthen important aspects of reading development. An example is Parents As Teachers, a voluntary parent program that begins in the third trimester of pregnancy and continues until the children are 3 years old. Children in the program performed significantly better than comparison children on tests of cognition and language at age 3 years. At follow up, program children scored much higher on standardized tests for reading ability in first grade, and parents were more involved in their children's education than were parents of children in the comparison group.¹³

Family Literacy

Wide variations exist among programs that seek to enhance literacy within families as a way to improve the reading skills of children and avoid having them struggle with literacy and language in school.

Successful family literacy programs, however, have several features in common, including: taking steps to ensure participation, such as arranging transportation; tailoring the program to the specific needs of families; using instruction that is meaningful and useful; assem-

bling a staff that is stable and who bring diverse expertise to the project; and securing funds necessary to sustain the project over time.

The Even Start Literacy Program, an attempt to unify early childhood education and adult education for parents, is one family literacy program that has been evaluated by a large-scale national survey and a long-term study. It was found to have its greatest impact in improving the availability of reading materials in the home, parents' expectations of their children's success in school, and the school readiness of children.

Policy Implications

In 1998, The National Research Council published the findings of an exhaustive, two-year study of reading difficulties among young children. The 17-member study committee, for example, concluded that:

- Most of the reading problems faced by today's adolescents and adults could have been avoided or resolved in the early years of childhood.
- Children need to enter first grade with a strong basis in language and cognitive skills and be motivated to learn to read to benefit from classroom instruction.
- Preschool children need high-quality language and literary environments in their homes and in out-of-home settings.
- Many preschool programs fail to focus on language and literacy experiences.
- Preschool teachers represent an important and largely underutilized resource in promoting literacy.
- Reading problems are disproportionately high among minorities, non-English speaking children, and children raised in poor or urban neighborhoods.

The report also recommended ways to help prevent reading difficulties early in childhood. The recommendations included the following:

- Affordable, language-rich preschool programs should be available to all children.
- Government and education officials should provide

research-based guidelines for parents, pediatricians, and preschool teachers that will help them identify children with hearing impairments and other conditions or delays that may jeopardize a child's chances of becoming a successful reader.

- Prevention programs that target at-risk children should focus on social, language, and cognitive development, not just literacy.
- Programs that educate early childhood professionals should require mastery of information about the knowledge and skills children can learn in preschool that will help them with reading in later grades. Such topics range from the development of fine motor skills to understanding young children's sensitivity to sounds.
- Government and organizations concerned with early education should target parents, caregivers, and the general public in campaigns to promote public understanding of the way young children learn to read. Such programs should include ways to use books and how to create opportunities for building language skills and promote literacy growth through everyday activities.

The report makes clear that effective reading is achieved by children who are given the opportunities to learn and develop literacy skills early in life.

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EDITOR'S NOTE: This report, written by Jeffery Fraser, is based on the above-referenced publication. It is not intended to be an original work but a summary for the convenience of our readers. References noted in the text of the report follow.

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OCD Offers Training In Program Evaluation

The Office of Child Development Policy and Evaluation Project is offering training to human service agencies to develop and enhance evaluation skills and information management techniques to improve service delivery.

The training, conducted in small group sessions, will provide hands-on learning so that participants can apply the concepts learned to their own agency. In addition, participants will be asked to complete specific assignments between sessions that will be discussed in the small groups at the next session.

This mini-course, **Evaluation Design and Outcome Measurement**, will introduce staff in human service agencies to program evaluation, focusing on skills relevant to community programs. Participants will develop an evaluation plan of one of their agency's programs as a product of the course. The topics to be covered in seven sessions include:

- *Understanding evaluation* and its benefits,
- *Defining your program* and how it works,
- *Choosing appropriate outcomes and indicators*,
- *Documenting implementation* of your program,
- *Collecting data*, and
- *Reporting results* and *using information* for program improvement.

Time and Session Dates

Training sessions will be held from 1:00-4:00 p.m., Thursdays. A schedule of the seven sessions follows:

Session 1	9/9/99
Session 2	9/23/99
Session 3	10/7/99
Session 4	10/21/99
Session 5	11/4/99
Session 6	11/18/99
Session 7	12/2/99

Who Should Attend

This training series is for agency directors, program staff, and board members of human service agencies serving children and families in Allegheny County. The content is suitable for individuals new to evaluation and those who desire an introductory overview of evaluation issues and techniques.

The fee is \$250.

Social Work Continuing Education Credit: 21 hours

Training Location

The training will take place at the Office of Child Development Training Center located in East Liberty at the corner of Penn and Negley.

To request a brochure describing the course and registration form, contact Cathy Kelley: phone 412-624-5527; fax 412-624-4810. ■

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possible, adoption is a key option. In 1998, 505 adoptions were finalized – nearly twice the number finalized in 1996.

“Probably more significantly, fewer kids are entering care,” Cherna said. “We’re keeping kids in their homes by providing support services and tapping into some of the other services that are in human services that we never really utilized much.”

The Department’s efforts to address permanency planning for children include:

- Expanded in-home services for family reunification and preservation. CYF money for in-home services has increased from \$7 million a year to about \$16 million.
- The Swan Legal Project, a public-private partnership with the law firm Reed Smith Shaw and McClay. The firm’s attorneys handled 143 of 505 adoptions finalized last year.
- Expanded use of the “family-to-family” concept of placing children with foster parents in their community, who work with the birth parents to reunite the family.
- The Sisters’ Project, operated by Healthy Start, Inc., which provides comprehensive services to chemically dependent women who are mothers or are pregnant.

Hearing Officers

One of the most noteworthy changes in child dependency and Juvenile Court is the use of hearing officers to preside over dependency reviews. Four hearing officers were hired late last year under the Hearing Officers Project, which also increased the number of solicitors, child advocates, and parent advocates.

The project brought the Department of Human Services and Juvenile Court together to address court overcrowding and high judicial caseloads, which often resulted in children’s cases being given cursory review and little follow-up. Private foundations are paying more than \$3 million to finance the program’s first three years.

Child dependency cases are now routinely reviewed every three months, as opposed to every six months, and are held in the CYF regional offices. Most are scheduled for specific times and allotted 20 minutes, a departure from the days when children could wait hours

for their cases to be heard, then be dispatched following a hearing lasting less than 10 minutes. The project has tripled the court’s judicial resources available for dependency cases.

Managed Care

Changes in state law involving mental health services meant the Department had to develop a system to accommodate the mandated shift to managed care of 140,000 county Medicaid recipients who are eligible for mental health and substance abuse services.

Recommendations on how such a system should be designed were sought from families, advocacy organizations, providers, and foundations. The system to merge subcontracts oversight, monitoring, and technical assistance duties was a newly-formed independent agency, Allegheny HealthChoices, Inc. Management of direct services was subcontracted to another nonprofit, Community Care Behavioral Health Organization, a partnership of the University of Pittsburgh Western Psychiatric Institute and Clinic, St. Francis Medical Center, and provider agencies.

Quality assurance and quality management of the program were rated “outstanding” by the state. The county’s nonprofit model, which allows any savings realized through managed care to be reinvested in the local behavioral care system, is considered an alternative to the more common for-profit management of Medicaid services.

Job Assistance

Unemployment and poverty have traditionally been issues with many of the families served by the Department of Human Services. With the advent of welfare reform rules requiring recipients to find work or risk losing benefits, workplace-related services have taken on a new sense of urgency.

Efforts to address job-related issues by the Department include a Welfare-to-Work Program that targets adults with poor work histories, those who don’t have a high school diploma or GED, and those with substance abuse problems. Services are coordinated with existing job programs in the region.

As part of the strategy, the Department’s Office of Community Services, formerly the Department of Federal Programs, is approaching providers, community organizations, and businesses, asking them to create or make available work experience and entry-level jobs for program participants.

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New Approaches

Approaches to service delivery are also redefined in the plans to reorganize the Department of Human Services. In general, a holistic approach to serving families is taken, and more emphasis is being placed on prevention than in the past.

Several approaches were not commonly practiced until recently, such as building on a family's strengths rather than deficits, and empowering families to be independent.

"It's important that we don't lose sight of who we are here to serve," Cherna said. "Put yourself in the position of receiving services. How would you like to be treated? I'd want to be treated respectfully. I'd want somebody to look at my strengths. I'd want to have the power to choose what I wanted, to have services that met my needs, not someone taking a cookie-cutter approach. I'd want to be treated like a person. Too often, we lose sight of that. We look at a deficit model, what's wrong with people.

"It's a change in the attitude of staff and agencies. It's a climate of how people are treated. In the Children and Youth area, we have a pre-placement conference now. Before workers can put a kid in care, they need to conference with supervisors, specialists, managers and look at what needs to be done to keep the kid at home. Is there a way to keep the kid in the home safely? Are there services that need to be put in place. What are the strengths of the family?"

Family conferencing is also planned for the county. "You bring in the family and all of the significant people and say, 'This is the problem. What do you think we should do about it?' That lets the family decide what they can do to take care of the kid or to help mom. It has had good results in the places where it has been used. We are looking to do it here, especially in adolescent cases and parent-child conflicts."

Partnerships/Collaboration

An increase in service contracts with community-based organizations is evidence the Department recognizes that government can more effectively serve families in need by tapping community resources, rather than trying to shoulder the job alone.

The county department has also been able to attract volunteer support, particularly among private foundations.

"One thing that has really changed is the culture," Cherna said. "In government, you tended to feel we worked in a vacuum, especially in Children and Youth. That it was us against the world. A lot of that has changed. All of the problems we deal with are community problems. The more ownership you get from various parts of the community, the stronger you are."

Efforts to build partnerships and collaborations is contributing in other ways. Private sector money is financing some innovative initiatives and helping with technical support. Foundation money got the Hearing Officers Project in Juvenile Court off the ground. And foundations have contributed nearly \$1 million toward a Human Service Integration Fund, which the Department can use to pay for technical assistance and support.

Challenges

The top-to-bottom overhaul of a large human service organization poses challenges that are different from and, in some ways, more difficult than those involved in reorganizing for-profit corporations, said Dr. Fogel.

"What keeps people up at night a lot of the times is the categorical funding," he said. "It makes it so that you don't have the flexibility that you normally would. Typically, in corporations, you can reallocate funds according to your strategy. But here, because of the mandates that exist, you have less flexibility. It makes the job a little harder."

Other complicating factors include the diversity of the organization, its services and personnel, and the complexity of the contracting.

Prior to reorganization, the Department was wanting in several areas, Fogel said. "Everything was separated. What I saw was no clear strategy, no clear statement of principles, very little prioritization of what the organization was working on. It was more reactive. What they are trying to do now is to be more proactive."

As the reorganization moves forward, measuring how it influences the outcomes of children and families grows in importance. To better measure outcomes, the county is taking several steps, including retooling its human service information system to produce better and more integrated data.

Outcomes, Fogel said, will be an important measure of the reorganization of the county Department of Human Services. "That's like the stock price. That's the ultimate value that has to be looked at. If the organization is not producing better outcomes, then you ought to change the organization." ■

Announcements . . .

NIH Supporting Studies On Neonatal Hearing Problems

The National Institute on Deafness and Other Communication Disorders is inviting applications addressing intervention strategies following identification of neonatal hearing impairment in areas ranging from hardware, such as hearing aids, to efficacy studies.

Topics may include selection and fitting of hearing aids and cochlear implants for infants and young children; comparative benefits of other, less frequently used hardware, such as assistive learning devices and vibrotactile devices, used alone or in conjunction with other hardware; consideration of practical issues relating to hearing aid and cochlear implant use, such as ergonomics and changes in auditory structures occurring with maturation; and studies of the efficacy of intervention strategies, including child- and family-focused outcomes.

For-profit and nonprofit organizations are eligible, including higher education institutions, hospitals, laboratories, and state and local government.

Deadline for optional letters of intent is September 15. The deadline for applications is Oct. 18.

FOR MORE INFORMATION, contact Amy Donahue, Human Communication Division, National Institute on Deafness and Other Communication Disorders: phone (301) 402-3458; fax (301) 402-6251; e-mail, Amy_Donahue@nih.gov; Internet, <http://www.nih.gov/grants/guide/index.html>. Refer to PAS-99-011. ■

Grants Focus On Research To Aid The Disabled

The National Science Foundation's Engineering Directorate is offering support for research on the characterization, restoration, or substitution of normal function in humans. Applications are being sought under the Biomedical Engineering and the Research to Aid Persons with Disabilities programs.

Projects should lead to the development of new technologies or to novel applications of existing technology. Possible topics include technology to aid the sensory impaired, including prosthesis design and methods for measuring improved performance; advanced imaging techniques involving conventional or non-conventional modalities or virtual and augmented reality; and new technology or methods to reduce health care costs and methods to assess the impact of the technology.

Awards are typically less than \$25,000 a year for up to five years. Nonprofit and for-profit organizations, including institutions of higher education, state and local governments, and individuals are eligible.

There are no deadlines for unsolicited applications. Review panels typically meet in January and June.

FOR MORE INFORMATION, contact H. Frederick Bowman, Gilbert Devey, or William Weigand, Bioengineering and Environmental Systems Division, Engineering Directorate, National Science Foundation, (703) 306-1320; fax, (703) 306-0312; e-mail, fbowman@nsf.gov, gdevey@nsf.gov, and wweigand@nsf.gov. Program description is available on the Internet at <http://www.eng.nsf.gov/bes/bes.htm>. ■

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viders Council was established to promote cooperation among service providers in a region hit hard by the decline of heavy industry, plant closings, and unemployment.

Today, nearly 70 providers covering 37 Mon Valley communities are members of the Council, which focuses its efforts on six areas: employment and training, government relations, health, housing, single parent families, and youth.

The Council, through the work of its members, offers residents a range of services, including job readiness training, help with buying homes, credit and budgeting classes, and instructions on managed care. At recent Council-sponsored Career Expo, more than 17% of those who attended were able to find jobs, more than double

the national rate of 7.3% for similar events.

Collaboration, said Director Dave Coplan, has been the key. "Most of our organizations, by themselves, wouldn't be able to respond to all of the gaps in services."

Not all attempts to collaborate are successful, however.

Part of the job of the United Way's Collaboration Project is to help fledgling collaboratives navigate several obstacles. One of the most difficult is finding ways for all parties to work together. "Getting people to realize that one plus one can equal three with collaboration can be difficult," Van Haitzma said. "But as you share some of that turf, share some of those resources, as you share more risk, you can also increase the reward." ■

Announcements . . .

Pilot Research Sought On Alcohol Abuse

The National Institute on Alcohol Abuse and Alcoholism is inviting applications for small-scale, exploratory pilot research projects related to the Institute's behavioral science mission that will receive expedited review and funding to get research going.

Awards may not exceed \$50,000 a year in direct costs for up to two years.

The program is intended for newly independent investigators. Deadlines are Oct. 1 and Feb. 1.

FOR MORE INFORMATION, contact Darryl Bertolucci (epidemiology), (301) 443-4898 or e-mail, dbertolu@willco.niaaa.nih.gov; Ellen Witt (basic), (301) 443-6545 or e-mail, ewitt@willco.niaaa.nih.gov; Joanne Fertig (clinical), (301) 443-0635 or e-mail, jfertig@willco.niaaa.nih.gov. ■

Task Force Holds Seminars On Permanency Planning

A conference series on permanency planning sponsored by the Permanency Planning Task Force continues in September.

The Task Force, a coalition of individuals and agencies who bring together expertise in a number of child welfare fields, will hold the next session in the series, *Permanency Planning and Its Effect on Child Development*, on Sept. 14, 1999.

Future topics include: *Planning Outside the Box*:

Creative Options for Concurrent Planning on Feb. 1, 2000; and *Working Together: Collaboration and Permanency Planning* on May 2, 2000.

All members of the Task Force have played leadership roles in various aspects of permanency planning, know firsthand both the limitations of working in isolation and the power of working in collaboration, and bring together their knowledge and determination to deal with issues that delay permanence of children in the system.

FOR MORE INFORMATION, call Three Rivers Adoption Council at (412) 471-8722. ■

Small Grants Offered For Deafness Studies

The National Institute on Deafness and Other Communication Disorders is inviting applications for small grants to support pilot research likely to lead to a regular research project grant application in an NIDCD mission area, such as hearing, balance, smell, taste, voices, speech, or language.

NIDCD funds small grants at \$35,000 a year in direct costs for up to three years. Public and private for-profit and nonprofit organizations are eligible, including colleges, universities, research institutions, and hospitals. Deadline for applications is Aug. 24.

FOR MORE INFORMATION, contact Chyren Hunter (*hearing*): (301) 402-3461 or e-mail, chyren_hunter@nih.gov; Daniel Sklare (*balance/vestibular*), (301) 496-1804 or e-mail, daniel_sklare@nih.gov; Beth Ansel (*voice/speech*), (301) 402-3461 or e-mail, beth_ansel@nih.gov; and Judith Cooper (*language*), (301) 496-5061 or e-mail, judith_cooper@nih.gov; Internet, <http://www.nih.gov/grants/guide/index.html>. Refer to PAR-99-018. ■

Developments

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