

STRENGTHS OF FAMILIES OF AT-RISK YOUTH:
A DELPHI STUDY THROUGH FAMILY ASSESSMENT AND PLANNING TEAMS

by

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in

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APPROVED:



David Parks, Chairman



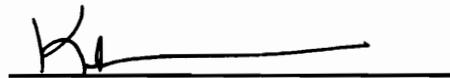
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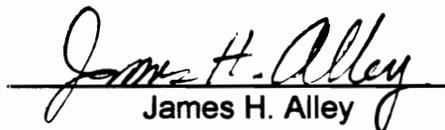
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REPORT

STRENGTHS OF

FAMILIES OF

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**David Parks, Chairman
College of Education
Educational Administration**

(ABSTRACT)

In 1992 the Virginia General Assembly enacted the Comprehensive Services Act with the words, "It is the intention of this law to create a collaborative system of services ...that is...family-focused...when addressing the strengths and needs of troubled and at-risk youth and their families in the Commonwealth" (A report to the Governor and General Assembly, 1992, Appendix A, p.1).

The directives of the Comprehensive Services Act are carried out in each community through a Family Assessment and Planning Team (FAPT). The members on each FAPT represent family service agencies based in the community and a parent who collaboratively develop an intervention plan for each at-risk youth and family referred to the team. This study was conducted to determine if the family strengths used by FAPTs were more or less useful depending upon FAPT communities or FAPT representatives.

The method chosen for gathering information for the study was a modified Delphi technique. The 70 FAPT representatives who participated in the study came from 17 respondent groups, (nine FAPT Communities and eight FAPT Representative areas). One aspect of the study was to find which family strengths were unique to the upper quartile of only one respondent group. A second aspect of the study was to find which common family strengths were in the upper quartiles of each of the 17 respondent groups, the nine FAPT Communities, and the eight FAPT Representatives. The third aspect of the study was to look at upper quartile family strengths as they were grouped by categories.

This report helped identify some of the differences in perspectives among family service providers from different communities and areas of representation. Even though there were some differences among the 17 respondent groups regarding the usefulness of family strengths, there were also some commonalities. This report helped to identify some of these common perspectives among family service providers.

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Foreword

The format of this dissertation consists of one document with a report included. The primary document is the dissertation consisting of every page from the cover page to the last page of the vita. The report is within the dissertation and consists of the cover page, the pages identified as the "Report", and the tables contained in Appendix E.

The dissertation was created to satisfy the requirements placed on the researcher for the completion of the Doctor of Education Degree at Virginia Tech. The report is the component of the dissertation that will be distributed to the state agency that authorized the study. It is expected that at a minimum the state agency will distribute the report to the persons who participated in the study.

The specific population targeted for this study consisted of persons serving on selected Family Assessment and Planning Teams in the Commonwealth of Virginia. The study was done to identify the family strengths that are used in a strengths-based intervention plan for at-risk youth and their families. The intent of the researcher was to produce a document that is of value to persons working with at-risk youth and their families. The researcher hopes that readers of the report will find the information beneficial for developing successful intervention plans for at-risk youth and their families.

**Strengths of Families of At-Risk Youth:
A Delphi Study Through Family Assessment and Planning Teams**

REPORT

Every person running for office, from liberals to conservatives, at least outwardly supports the idea that a strong family unit is essential to life as we know it and that a number of our most serious problems -- drugs, crime, teenage pregnancy -- could be solved if we could somehow strengthen the family. (Kaetz, 1995, p.2)

On July 11, 1994, the President of the United States issued a directive that required federal agencies to modify work place policies for the sake of promoting more stable families of federal employees. The vice president issued a follow-up comment stating that the intention of the directive was for the federal government to establish a precedent for employers to implement policies that support and help keep families together (U. S. Department of Education, 1994). Federal and state legislation supporting families had already preceded this presidential directive. Studies in the area of family strengths had driven legislation calling for family service providers to recognize and involve families as important resources in the development of family intervention plans (Barthel, 1992; Riley, 1994; U.S. Department of Education, 1994).

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In 1986 the United States Congress enacted the Infant and Toddler Program, Part H of the Amendments to the Education for All Handicapped Children Act, Public Law 99-457 (Gallagher, 1992). A component of this legislation required family service providers to identify the crucial role of families beyond the immediate needs of the handicapped infant or toddler. This law instituted a shift from family service providers acting as the exclusive source for developing intervention plans to now including the child's family as a viable source for helping to develop intervention plans (Place & Gallagher, 1992).

Robert Silverstein, Staff Director and Chief Counsel of the Senate Subcommittee on Disability Policies, addressed the essential role of families in the Part H legislation:

The word "family" must appear ten or fifteen times throughout the legislation; this was intentional. Congress was trying to say, "Do not have professionals come into a family situation and assume that the mom and dad don't know anything. Respect the family." The language in the legislation, which talks about strengths as well as needs is an attempt to recognize and provide respect for the family....There is nothing more central to this legislation than respect for the family. (National Center for Clinical Infant Programs, 1989, p.12)

In 1992 the Virginia General Assembly enacted the Comprehensive Services Act with the words, "It is the

This law [Public Law 99-457] instituted a shift to now include the child's family as a viable source for helping to develop intervention plans.

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intention of this law to create a collaborative system of services ...that is ...family-focused...when addressing the strengths and needs of troubled and at-risk youth and their families in the Commonwealth" (A report to the Governor and General Assembly, 1992, Appendix A, p.1). For background information relating to the need for developing the Comprehensive Services Act, see Comprehensive Services Act in Appendix A.

Purpose of the Study

The directives of the Comprehensive Services Act are carried out in each community to the at-risk youth and family through a Family Assessment and Planning Team (FAPT). The membership of each FAPT consists of representatives from family service agencies based in the community, and a parent. FAPT members meet collaboratively to develop an intervention plan for each at-risk youth and family referred to the team. Referrals are made to the team by FAPT members and their agencies.

The FAPT is a unique organization in that it focuses on a common population (at-risk youth and their families), yet its membership consists of a diversified population of family service providers representing various agencies and private practitioners, as well as a parent representative. FAPT members are asked to develop a strengths-based intervention plan that focuses on the strengths of the at-risk

It is the intention of this law [Comprehensive Services Act] to create a collaborative system of services that is family-focused.

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youth and family. The process of identifying and addressing the strengths of individual families must be a process that recognizes the unique culture of each family ("An introduction to wraparound services", 1994).

Family studies have addressed the importance of recognizing the strengths of families (Lewis, Beavers, Gossett, & Phillips, 1976; Curran, 1983; Stinnett & DeFrain, 1985; Morgan, 1986; Krysan, Moore, & Zill, 1990). FAPT intervention plans place an emphasis on family interventions through the strengths of the family (A report to the Governor and General Assembly, 1992).

A review of the literature (see Literature Review in Appendix B) has revealed that family studies have been conducted over the last three decades. Family studies have focused on culture-specific families as well as the general population. The family studies reviewed for this report examined family strengths among native Americans; military families; step-families; the perspectives of 4-H program leaders; mobile families; families living in Syracuse, New York; and families with disabled children. These studies have identified some commonalties among family strengths as well as some family strengths unique to a particular study.

A pilot study by the researcher, conducted prior to this study, asked members of one FAPT to individually

Each intervention plan is specifically designed for the unique characteristics of the at-risk youth and family.

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develop lists of family strengths. The conclusion of the pilot study was that FAPT members can produce lists of family strengths that parallel the review of the literature (see Pilot Study in Appendix C). The question then was to discover which family strengths were more useful than others when FAPTs develop family intervention plans for at-risk youth and their families. This study was conducted to determine if the family strengths used by FAPTs were more or less useful depending upon FAPT communities or FAPT representatives.

A strength for one family may not necessarily be a strength for another family.

Background of the Study

The method chosen for gathering information for the study was a modified Delphi technique. Through the use of two survey rounds the Delphi method provided the opportunity for anonymous responses from FAPT members while also providing a method for FAPT members to see the responses of their peers. For more information regarding the study technique see Delphi Technique in Appendix D.

FAPT Communities

The researcher contacted the person at the state level responsible for evaluations of the Comprehensive Services Act (CSA) and was given a list of the FAPT chairs for nine CSA community sites. The nine communities were

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selected by the CSA evaluation committee as intensive evaluation sites. The nine sites were chosen from a pool of sites that volunteered for evaluation of CSA implementation. The sites were selected because the demographics of their communities provided a fair representation of the approximately 135 CSA sites in the Commonwealth of Virginia based upon their socioeconomic levels, racial composition, single vs multiple jurisdictions, and rural vs urban vs suburban settings.

As the researcher spoke with the various FAPT chairs at each of the intensive evaluation sites, he learned that the number of FAPTs in each community ranged from one to five; the number of FAPT representatives on each team ranged from six to eight. To provide anonymity for FAPT members each community was assigned a letter for identification (see Table 1).

The question was to discover which family strengths were more useful than others.

Table 1. *Participating FAPT Community Demographics*

Community	Population*	Location	FAPTs
A - County	171,000	DC area	3
B - County	209,000	central	3
C - Town	6,000	central	1
D - Town	2,200	SW mountains	1
E - City	7,000	central mountains	1
F - City	170,000	coastal	2
G - City	103,000	coastal	5
H - City	16,000	SW mountains	3
I - City	22,000	NW mountains	1

* 1990 VA Office of Population Growth and Demographics

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FAPT Representatives

The Comprehensive Services Act designates that each FAPT shall include representatives from the following five state agencies: Juvenile Court Services, Department of Health, Department of Social Services, Community Services, and public schools. The FAPT shall also include a parent representative who is not working in any public or private capacity with children and families. The Act also designates that the FAPT may include private family service providers and representatives from other public agencies (A report to the Governor and General Assembly, 1992). The numbers of representatives on each FAPT are listed by community in Table 2.

This study was conducted to determine if the rated usefulness of family strengths was dependent upon FAPT community or FAPT representative area.

Table 2. *FAPT Representation by Community*

	Community:									Total
	A	B	C	D	E	F	G	H	I	
Juvenile Court	3	3	1	1	1	2	5	3	1	20
Dept. of Health	3	3	1	1	1	2	5	3	1	20
Social Services	6	3	1	1	0	2	5	3	1	22
Community Servcs.	3	3	1	1	1	2	5	3	1	20
Parent Rep.	1	3	1	1	1	2	5	3	0	17
Public Schools	5	3	2	1	3	2	5	3	1	25
Private Provider	7	0	1	0	1	4	9	0	1	23
Other Agencies	0	2	1	1	0	2	0	0	0	6
Total:	28	20	9	7	8	18	39	18	6	153

Responses to the Study

The state agency person responsible for CSA evaluations mailed a letter to the FAPT chairs at the nine

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sites introducing the researcher and the study. The researcher then contacted each chair to introduce himself and the study, to answer any questions, and to arrange for the distribution of Round 1 of the study.

The FAPT chairs agreed to distribute the Round 1 surveys to as many FAPT members as possible. To ensure that enough Round 1 surveys were available the researcher mailed approximately 180 Round 1 packets to the nine FAPT chairs. Twenty Round 1 surveys were returned to the researcher (see Table 3). One of the FAPT members responding to the survey chose to provide only the information on the "Panel Member Information Form" and not to respond to the Round 1 question.

The FAPT sites were selected because their demographics provided a fair representation of the Commonwealth.

Table 3. *Round 1 Returns*

Representative	Community:									Total
	A	B	C	D	E	F	G	H	I	
Juvenile Court			1					1		2
Dept. of Health						1	1			2
Social Services			1				1			2
Community Servcs.	1			1			1			3
Parent Rep.		1								1
Public Schools	3			1	1			1		6
Private Provider										0
Other Agencies	1	2	1							4
Total:	1	6	4	1	2	1	3	2	0	20

The researcher spoke to the nine FAPT chairs to discuss the low response rate from FAPT sites that were designated as evaluation sites for implementation of the CSA. Someone suggested that the Round 1 question

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requested individual documentation of compliance with the intent of the CSA law and therefore discouraged responses from FAPT members. Another suggestion was that the term family strengths was nebulous for some FAPT members and could not easily be defined. Another explanation for the low response rate to the Round 1 question were the time constraints and work loads of FAPT members.

To strive for more accurate representation from FAPT communities and FAPT representatives the researcher decided to send Round 2 rating surveys to all FAPT members rather than just the FAPT members who responded to the Round 1 question. The researcher surveyed the nine FAPT chairs for more accurate information regarding the number of FAPT members in each of the nine communities. The surveys indicated that the potential FAPT membership was 153 (see Table 2). Round 2 surveys were mailed to the nine FAPT chairs for them to distribute to the 153 FAPT members; 70 responses (46%), were received. One FAPT representative attached a note with the Round 2 response protesting the intrusion on her already busy schedule.

Only a single response was received from the 17 parent representatives available for the study. During earlier discussions with the nine FAPT chairs the researcher learned that the parent representative position on some

In Round 1 FAPT members were asked individually to identify family strengths they use when developing intervention plans for at-risk youth and their families.

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FAPTs was a difficult position to keep filled; a few teams were currently operating without a parent representative. The researcher contacted each FAPT chair to receive the names and addresses of the parent representatives to send them a personal request to respond to the Round 2 survey. Ten Round 2 surveys were mailed directly to the parent representatives; five were returned, of which two were partially completed.

FAPT Members were asked in Round 2 to rate the usefulness of each family strength.

Conducting the Study

In Round 1 of the study FAPT members were asked individually to identify family strengths they use when developing intervention plans for at-risk youth and their families. The responses were edited for clarity and duplicate thoughts were merged. FAPT representatives who responded to Round 1 were contacted by the researcher when further clarification was necessary. The edited responses produced a list of 78 family strengths. FAPT members were also advised in Round 2 that they could make any changes on the survey if their intentions were lost in the editing process. No changes were submitted to the researcher.

In Round 2 the edited list of the 78 family strengths was given back to FAPT members to rate the usefulness of each family strength using a scale of 1 to 4: Not Useful, Somewhat Useful, Quite Useful, and Very Useful. For ease

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of reference in the discussion of this study each of the edited 78 family strengths was assigned a number (see Table 11 in Appendix E). Throughout this report the family strength number is given in parentheses after each family strength.

The 78 family strengths received from Round 1 were grouped into categories by the researcher according to common themes in wording. The Round 2 categories were represented by alphabet letter headings and were created to help FAPT members compare the usefulness of similar family strengths. FAPT members were asked to make notations on the Round 2 survey to move their nominated family strengths from one category to another if they thought their family strengths were not in a category that best represented their intentions. No requests were received.

When each Round 2 response was received, it was coded to indicate the respondent's FAPT community and area of representation on the FAPT. All responses received from Round 2 were entered into three different tables for analysis. First, responses were entered as the Composite. Next, responses were entered by FAPT Community. Last, responses were entered by FAPT Representative area. For the remainder of this discussion FAPT responses are referred to as the Composite, FAPT Community responses, and FAPT Representative responses.

This study is an examination of the family strengths that fell within the upper quartiles of the 17 respondent groups, the nine FAPT communities, and the eight FAPT representative areas.

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All individual Round 2 responses were used to calculate mean and standard deviation scores from each family strength. The mean scores for the Composite and each FAPT Community and FAPT Representative area were ranked from highest to lowest with duplicate mean scores ranked from lowest to highest standard deviation. These scores are found in Table 12 in Appendix E.

One aspect of the study was to find which family strengths were unique to the upper quartile of only one respondent group.

Participation in the Study

Tables 4 and 5 compare the number of FAPT members participating in the study with the membership numbers provided by FAPT chairs. In Table 4 the participation percentages among FAPT communities ranged from 22% for Community H to 80% for Community B.

Table 4: *Round 2 Responses by FAPT Community*

FAPT Community	Number Possible	Number Responding	Percentage Participating
A	28	9	32
B	20	16	80
C*	9	5	56
D*	7	5	71
E*	8	3	38
F	18	7	39
G	39	17	44
H	18	4	22
I*	6	4	67
Total	153	70	46

* FAPT chair participated in the study.

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Community B was located in the largest FAPT population site (see Table 1) and had the highest percentage (80%) of FAPT members participating in the study. The researcher credits the FAPT chair for the high percentage of participation. During previous conversations with the FAPT chair for community B the researcher found this person to be confidently succinct in conversation and goal-driven as an administrator.

Community H had the lowest percentage (22%) of FAPT members participating in the study. The only governmental representatives from Community H who participated in the study were one of the three public school representatives and one of the three juvenile court representatives. None of the nine representatives (see Table 2) from Social Services, Department of Health, or Community Services participated in the study. The other Community H participants were two of three parent representatives.

Only four of the nine FAPT chairs participated in the study. The five FAPT chairs who did not participate in the study included the community with the highest percentage participation as well as the community with the lowest percentage participation in the study.

In Table 5 the participation percentages among FAPT Representatives ranged from 30% for Private Providers to 100% for the six FAPT members from Other

There were six family strengths that were unique to the upper quartile of only one respondent group and did not appear in the upper quartiles of any other respondent group.

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Public Agencies. These six persons were not employed by the state agencies that were mandated to participate on local FAPTs. Their areas of employment included private schools, a youth agency, a state service agency, a group home, and parks and recreation. Their job titles ranged from director to secretary.

Table 5: Round 2 Responses by FAPT Representatives

FAPT Representative	Number Possible	Number Responding	Percentage Participating
Juvenile Court	20	9	45
Dept. Health	20	7	35
Social Servcs.	22	14	64
Comm. Servcs.	20	10	50
Parent Rep.	17	6	35
Public Schools	25	11	44
Pvt. Provider	23	7	30
Other Agencies	6	6	100
Total	153	70	46

FAPT Representatives had an average of 13.6 years working in their respective career fields, ranging from zero to 29 years; and an average of 15.4 years working with children and families other than their own, ranging from zero to 38 years.

Results of the Study with Discussion

This study is an examination of the family strengths with means that fell within the upper quartiles of the 17 respondent groups. The 17 respondent groups are the nine

A second aspect of the study was to find which common family strengths were in the upper quartiles of all 17 respondent groups, the nine FAPT Communities, and the eight FAPT Representative areas.

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FAPT Communities and the eight FAPT Representative areas. Of the 78 family strengths the number that comprised the upper quartile for each respondent group (19.5 items) was rounded up to 20 items.

In some of the respondent groups' upper quartiles the mean scores and standard deviations of items beyond the 20th family strength were tied. In these particular cases the upper quartile was extended beyond the 20th item until there was a change in the mean score or standard deviation (see Table 12 in Appendix E).

A word of caution in interpreting the data: It should be noted that the number of FAPT members responding to Round 2 from communities E, H, and I was three or four, (see Table 4). With such a low number of responses a single person's vote could move a family strength into or out of the upper quartile for that community.

The remainder of this part of the report is divided into three sections. In the first section, Unique Upper Quartile Family Strengths, the discussion is focused on the unique family strengths that were found in the upper quartile of only one respondent group. In the second section, Common Upper Quartile Family Strengths, the discussion is focused on the common family strengths that were found in the upper quartiles of all 17 respondent groups, all nine FAPT Communities, and all eight FAPT Representative

Only one family strength was in the upper quartiles of all 17 respondent groups: "Effective parental disciplinary techniques."

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areas. The third section, Upper Quartile Family Strength Categories, focuses on the categories of family strengths that comprised 25% or more of a respondent group's upper quartile.

Unique Upper Quartile Family Strengths

The first aspect of the study was to find which family strengths were unique to the upper quartile of only one respondent group (see Table 13 in Appendix E). There were six family strengths that were unique to the upper quartile of only one respondent group and did not appear in the upper quartiles of any other respondent group (see Table 6).

The six common upper quartile family strengths incorporate three basic components of useful family strengths for at-risk youth and their families.

Table 6: *Upper Quartile Family Strengths Unique to a Respondent Group*

<p style="text-align: center;"><u>Community E</u> "Family loyalty to each other" (20)</p>
<p style="text-align: center;"><u>Community Services</u> "Availability of transportation to family" (70) "Common sense of parents" (71)</p>
<p style="text-align: center;"><u>Parent Representative</u> "Parents' insight into the needs of their family" (44) "Ability of family members to cope with stress as evidenced by overcoming past obstacles" (63)</p>
<p style="text-align: center;"><u>Public Schools</u> "A socially acceptable value system" (1)</p>

Note: Family strength reference numbers are in parentheses.

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Of the nine FAPT Communities surveyed only one, Community E, identified a family strength that was unique in its upper quartile. "Family loyalty to each other" (20) did not appear in the upper quartiles of any of the other 16 respondent groups.

The researcher spoke with the FAPT chair for Community E to gain more insight into the use of this family strength in their FAPT intervention plans. The FAPT chair stated that the community has a deep generation base with families pridefully tracing their heritage in the community back three or four generations. The FAPT chair stated that the community is "very connected; the extended family is strong and supports one another."

Only three of the eight FAPT Representative areas -- Community Services, Parent Representatives, and Public Schools -- identified family strengths that were unique in their upper quartiles.

"Availability of transportation to family" (70) and "Common sense of parents" (71) were unique to persons from Community Services. Community service agencies offer counseling and therapy sessions for families. The availability of transportation helps to ensure that family members are able to make appointments with family service providers in a timely and consistent manner. Common sense of parents not only helps parents recognize the needs of

First, family members possess a desire and willingness to participate in the intervention strategies for the youth.

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their family but also to be able to apply strategies recommended by family service providers.

"Parents' insight into the needs of their family" (44) and "Ability of family members to cope with stress as evidenced by overcoming past obstacles" (63) were unique in the upper quartile of Parent Representatives. Parent Representatives serve on their local FAPTs as volunteers, they do not represent an agency. The role of the Parent Representative on the FAPT is to be a representative for parents during the assessment and planning efforts of the team.

"A socially acceptable value system" (1) was unique in the upper quartile of the Public School representative area. The public school is probably the only agency on the FAPT that has the most divergent clientele. Unlike the other agencies on the FAPT public schools do not receive their clients by referral because of a need for services. Public schools serve all aspects of the general public with or without identified needs; diversity is not uncommon. When families possess a socially acceptable value system, this helps students to better coexist in spite of their differences.

Common Upper Quartile Family Strengths

A second aspect of the study was to find which common family strengths were in the upper quartiles of all 17 respondent groups, the upper quartiles of the nine FAPT

Second, this desire and willingness is translated into active participation for the benefit of the youth.

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Communities, and the upper quartiles of the eight FAPT Representatives (see Table 13 in Appendix E). There was only one common family strength that was in the upper quartiles of all 17 respondent groups; this family strength was "Effective parental disciplinary techniques" (10) (see Table 7).

Table 7: *Upper Quartile Family Strengths Common to Respondent Groups, Communities & Representatives.*

All 17 Respondent Groups

"Effective parental disciplinary techniques" (10)

All nine FAPT Communities

"Family willingness to take an active role in the development of a family intervention plan" (50)

All eight FAPT Representatives

"Constructive communication among family members" (14)

"Parental investment in the child's well being" (35)

"Stable adult role models in the home" (42)

"Desire by the family to improve" (62)

Note: Family strength reference numbers are in parentheses.

Third, family participation in the life of the youth is effective when parents or other adults serve as stable role models in the home.

"Effective parental disciplinary techniques" are words which indicate that the disciplinary techniques belong to the parents and they are ones that are effective. The techniques work for the particular youth in the particular setting at the particular time in the youth's development. The fact that this family strength received upper quartile confirmation from all 17 respondent groups indicates the importance that FAPT members place on parents utilizing effective disciplinary techniques with their children.

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"Family willingness to take an active role in the development of a family intervention plan" (50) was the only common family strength in the upper quartiles of all nine FAPT Communities (see Table 7). The family strength addresses family members' willingness to actively participate in planning and implementing the intervention plan. In this situation family service providers are working with a family for resolution as opposed to working on a family for remediation.

The four common family strengths unanimous to the upper quartiles of all eight FAPT Representative areas were "Constructive communication among family members" (14), "Parental investment in the child's well being" (35), "Stable adult role models in the home" (42), and "Desire by the family to improve" (62) (see Table 7).

In the family strength "Constructive communication among family members" (14) the word communication conveys an exchange of information implying that members listen to each other as well as speak to each other. The word constructive implies that the exchange of information among family members is of value. "Parental investment in the child's well being" (35) is an indication that the desires of the parent are focused on the best interests of the youth. Parental investment could be as simple as an increased presence of the parent in the life of the youth or it could be more of a participatory approach to parenting.

These three components are centered around family ownership in the life of the youth.

The family strength "Stable adult role models in the home" (42) has three significant components: 1) There is a stable adult, 2) who is a role model for the youth, 3) and is in the home of the child. The identification of this family strength indicates the importance that FAPT members place on stable adult role models in the home of the at-risk youth.

The family strength "Desire by the family to improve" (62) indicates the importance that FAPT members place on family members desiring a solution to the identified problem. A family may be in need of services, but one of the most important steps for recovery is for the family to possess a sincere desire to improve.

From the researcher's analysis the six common upper quartile family strengths listed in Table 7 incorporate three basic components regarding useful family strengths for at-risk youth and their families. First, family members possess a desire and willingness to participate in the intervention strategies for the youth. Second, this desire and willingness is translated into active participation for the benefit of the youth, whether the participation involves disciplinary techniques, communication, adult stability, or other forms of parental investment. Third, family participation in the life of the youth is effective when parents or other adults serve as stable role models in the home. These three components are centered around family ownership in the life of the youth.

The third aspect of the study was to look at the categories of family strengths in the upper quartiles of respondent groups.

Upper Quartile Family Strengths Categories

The third aspect of the study was to look at the categories of family strengths in the upper quartile of each respondent group. The categories were created by the researcher from the literature review. These literature-review family strengths and their category headings are listed in Table 10 in Appendix E.

The researcher placed each Round 1 family strength under the literature-review family strength category that best described the Round 1 family strength. For Round 2 the literature-review category headings were not included; only alphabet letter headings were used. FAPT members were told in Round 2 that their family strengths were grouped by common wording. FAPT members were given the opportunity to move any family strength from one category to another if they did not agree with the placement. No requests were received.

From the upper quartile of each respondent group, the researcher pooled the family strengths according to their Round 2 categories. The number of family strengths in each category was totaled and then divided by the number of upper quartile family strengths for that respondent group. This procedure produced the percentage of the upper quartile that was attributed to each category, see Table 14 in Appendix E.

There are thirty-eight family strengths identified in Common Upper Quartile Family Strengths and Category Upper Quartile Family Strengths.

Any category of family strengths that comprised 25% or more of a respondent group's upper quartile was identified for discussion. Only four of the eight categories occupied 25% or more of any respondent group's upper quartile; the categories are C, E, F, and G.

Category C

From the literature-review family strengths, this category was labeled by the researcher as "Family Discipline/Structure." Five category C family strengths equaled 25% of the upper quartile of the Composite and Community G. These family strengths describe the importance of parents possessing the ability to consistently discipline their children effectively and to keep the children close to home. The family strengths also address the importance of mutual respect among family members.

The family strengths that were identified in the Composite and Community G responses were combined to form a summary statement. In the summary statement the wording of each family strength is bracketed and in bold. The item number of each family strength is in parentheses. Selected family strengths from this category addressed:

the importance of [**parents to possess the ability to properly parent their children (11)**] with [**consistency (12)**] using [**effective techniques for disciplining their children (10)**], and [**keeping the children close to home (9)**]. The family strengths

The wording of the Common Upper Quartile Family Strengths and the Category Upper Quartile Family Strengths is specific for at-risk youth and their families.

also addressed the importance of [**mutual respect among family members** (8)].

Category E

From the literature-review family strengths this category was labeled by the researcher as "Support of Individuals." Forty percent of Community A's upper quartile were family strengths from category E; and 30% of Private Providers' upper quartile were family strengths from category E. The family strengths identified by Community A and Private Providers addressed the commitment to the children in the family and the importance of a support system available to the family which included immediate and extended family members and the willingness of family members to use these support systems. The family strengths also included a recognition of the value of emotional bonding and a loving relationship among family members with a regard for one another.

The family strengths that were identified by Community A and Private Provider responses were combined to form a summary statement. In the summary statement the wording of each family strength is bracketed and in bold. The item number of each family strength is in parentheses. Family strengths in this category addressed:

the [**loving relationship among family members** (23)] utilizing a [**family commitment to the welfare of their children** (22)] including [**emotional bonding within the family** (24)] and a [**regard for**

*When the
Common and
Category family
strengths are
distilled into like
topics, four
themes emerge.*

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one another (21)]. These family strengths recognized the importance of a [**support system for the family which included immediate and extended family members (25) (26) (29) (30)],** and the [**willingness of family members to use these support systems (27) (28)].**

Category F

From the literature-review family strengths this category was labeled by the researcher as "Stability of Family Unit." Five category F family strengths comprised 25% of the upper quartiles for the Composite and Social Service Representatives. These family strengths centered around the importance of a proper relationship between parent and child which incorporated parental investment in the child's well being, including a positive attachment between parent and child. The family strengths also recognized the importance of emotionally stable parents that were good role models in the home. The upper quartile of Community G contained one additional family strength which identified parents' "ability to provide care for the family."

The family strengths that were identified in the Composite, Community G, and Social Service Representative responses were combined to form a summary statement. In the summary statement the wording of each family strength is bracketed and in bold. The item number of each family strength is in parentheses. Family

The first family strength theme identified the importance of providing proper adult leadership in the home.

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strengths in this category addressed the:

importance of a [proper relationship between parent and child (36)] which incorporated [parental investment in the child's well being (35)] including a [positive attachment between parent and child (37)]. The family strengths also identified the necessity for children to have [stable adult role models in the home (42)] and [emotionally stable parents (31)] who possessed the [ability to provide care for the family (41)].

Category G

From the literature-review family strengths this category was labeled by the researcher as "Problem Solving Skills." From category G five family strengths comprised 25% of the upper quartile responses for the Composite. These family strengths addressed a desire by the family and the identified youth to improve and be open to recommended changes while exercising a willingness to take an active role in the development of the intervention plan. Family strengths also identified the importance of family members being willing to comply with the intervention strategies.

For five of the nine communities (C, D, E, F, and H), 27% to 48% of their upper quartile responses came from category G. Family strengths found in these upper quartile responses, that were not in the Composite upper quartile responses, addressed the importance of family

The second family strength theme identified the importance of maintaining a loving and supportive family unit.

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members possessing the ability and capacity for change, including a positive attitude of family members and a willingness to comply with the intervention. Family members also utilize resources available to the family. These family strengths also addressed parents' ability to control the aberrant behavior of their children as well as being able to see their problems as solvable and communicate the needs of the family to service providers.

All but two of the eight FAPT Representative areas, Social Services and Private Provider, had 25% or more of their upper quartile family strengths from category G. The family strengths that were identified were the same as those for the communities identified above with one exception. Parent Representatives were the only ones to identify the importance of "parents' insight into the needs of their family."

The family strengths that were identified in the Composite and by FAPT Communities C, D, E, F, and H, and FAPT Representatives from the Juvenile Court, Department of Mental Health, Community Services, Parent Representatives, Public Schools, and Other Public Agencies were combined to form a summary statement. In the summary statement the wording of each family strength is bracketed and in bold. The item number of each family

The third family strength theme identified the importance of focusing on the welfare of the youth.

strength is in parentheses. Family strengths in this category addressed:

the need for a **[positive attitude of family members (54)]** and a **[desire by family and youth to improve (61) (62)]**. The family is also willing to **[take an active role in the development of the intervention plan (50)]**, and is **[willing to comply with the intervention plan (51) and participate in counseling (53)]**. Family members possess the **[ability and capacity for change (57) (58) (59)]** and are capable of **[utilizing resources available to the family (47) (48), including family, neighbors, or friends (49)]**. **[Parents possess the ability to manage the aberrant behavior of their children (55)]** and are able to **[communicate the needs of the family to service providers (56)]**. **[Parent's have an insight into the needs of their family (44)]** and the **[family sees their problems as solvable (60)]**.

The fourth family strength theme identified the importance of utilizing resources and assistance.

Concluding Remarks

At the beginning of the study the researcher used the family strengths identified in the literature review to create family strength category headings (see Table 10 in Appendix E). This was done in anticipation of finding family strength category themes from the Round 2 responses.

The researcher discovered that the wording of the family strengths identified in Common Upper Quartile Family Strengths and Category Upper Quartile Family Strengths (hereafter referred to as Common and Category family strengths) did not necessarily fit under the category

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headings created from the literature-review family strengths.

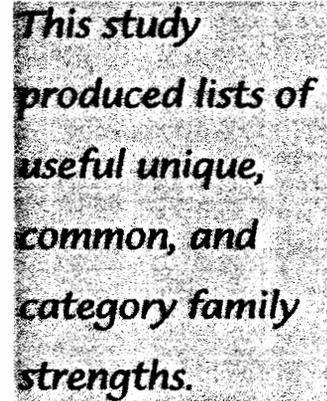
The researcher concluded that even though the original list of the 78 Round 1 family strengths could be distributed across the literature-review family strength categories, the wording of the Common and Category family strengths produced from this study is more specific for strengths-based intervention plans for at-risk youth and their families.

When the Common and Category family strengths are distilled into like topics, four themes emerge (see Table 15 in Appendix E for a list of the family strengths under each theme). The four themes identify the importance of:

- ✓ providing proper adult leadership in the home.
- ✓ maintaining a loving and supportive family unit.
- ✓ focusing on the welfare of the youth.
- ✓ utilizing resources and assistance.

Recommendations for Practice

In addition to the upper quartile family strengths identified for each respondent group (see Table 12 in Appendix E), this study also produced family strengths that were unique to a respondent group (see Table 6) as well as family strengths that were common among respondent groups (see Table 7). The study also produced Common and Category family strengths and their four themes (see Table 15 in Appendix E).



This study produced lists of useful unique, common, and category family strengths.

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The recommendations are that FAPT members evaluate these various lists of family strengths and discuss their applications in intervention plans for the families serviced by the FAPT. FAPT members can discuss the similarities and differences between their family strengths and the family strengths of other respondent groups. Similarities and differences could be discussed regarding the objectives of their FAPT and the characteristics of the youth and families they serve. FAPT discussions could also focus on the family strengths in their upper quartile to determine how these family strengths are being utilized in their intervention plans.

FAPT members may find it beneficial to evaluate the potential of family strengths in the upper quartiles of other respondent groups to determine how useful they would be in their own intervention plans. This type of discussion could take into consideration the composition of the various respondent groups and their objectives.

The identification of useful family strengths by respondent groups helps FAPT members see how family strengths are perceived by different respondent groups. A different perspective on the use of a family strength can help family service providers see the potential of a family strength that might otherwise go unnoticed.

The identification of useful family strengths by respondent groups helps FAPT members see how family strengths are perceived by different respondent groups.

Strengthening Families For A Stronger Society

Community interpretations and applications of family strengths are what give greater credence to the concept of the Comprehensive Services Act. Using properly identified family strengths in intervention plans helps perpetuate positive values and behavior which contribute to a safe and prosperous society. By helping at-risk youth and their families through individualized strengths-based interventions we can hope to break the destructive cycle that has gripped too many homes.

Recommendations for Further Research

There were 27 of the 78 family strengths nominated in Round 1 that were not found in the upper quartile of any respondent group (see Table 16 in Appendix E). A question would be to examine why these family strengths were important enough to be nominated by individual FAPT members in Round 1 yet were not deemed to be the most useful by any respondent group. Are the differences based upon FAPT member perceptions or is there a difference in the application of the family strengths?

The absence of a family strength as well as the listing of a family strength provides insight into the dynamics of the community and perspective of FAPT members. Questions that address the reasons for the differences among respondent group responses could be a topic for further examination.

The absence of a family strength as well as the listing of a family strength provides insight into the dynamics of the community and perspectives of FAPT members.

Confirmation of the family strength categories (from Table 10 in Appendix E) would also be an interesting topic to pursue. The researcher discovered during the review of the literature that studies have produced a plethora of identified family strengths. Can these family strengths be categorized for family service providers working with at-risk youth and their families? If not, why?

Finally, a recommendation for further research would be to examine the application of family strengths through intervention plans and the families involved. Conducting research face-to-face with families and involving families in the study could help provide insight into the application of family strengths and how the family strengths component of the intervention plan works.

Summary

Each family is unique with its own set of circumstances and needs. This report helped identify some of the differences in perspectives among family service providers from different communities and areas of representation. Even though there were some differences among the 17 respondent groups regarding the usefulness of family strengths, there were also some commonalities. This report helped to identify some of these common perspectives among family service providers.

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The concept of using family strengths to help families improve is not new. The difficulty comes in properly identifying useful family strengths and then incorporating them into a successful intervention plan. The intent of the Comprehensive Services Act is to place the responsibility for assessing family needs in the hands of professionals within the local community who involve the family in the development of an intervention plan.

Proper identification of family strengths helps family service providers develop intervention plans to move families to a more self-reliant condition. The researcher hopes that this report helps accomplish this objective.

A quote from the introduction of a very extensive crime prevention study currently in progress is most appropriate for these concluding remarks:

Suggesting that family plays a preeminent role in shaping an individual's development is hardly revolutionary. "As the twig is bent, so grows the tree," says an old chestnut. (Earls & Reiss, 1994, p. 15)

By helping at-risk youth and their families through strengths-based interventions we can hope to break the destructive cycle that has gripped too many homes.

APPENDIX

Appendix A

Comprehensive Services Act: Background and Provisions

Background

Following a recommendation by the Governor of Virginia, the General Assembly placed a requirement in the 1989 Appropriation Act which required the Department of Planning and Budget (DPB) to study the allocation of state funds through various state agencies who work with children and families. The purpose of the study was to "provide an opportunity to improve service delivery to children with emotional and behavioral problems and their families in the 1990's" (Virginia Department of Planning and Budget, 1990, p.i).

The DPB study was completed and sent to the General Assembly in 1990. The study of children's residential services was focused primarily on the following four state departments and their local counterparts:

- ❖ The Department of Mental Health, Mental Retardation and Substance Abuse Services and its 40 community service boards
- ❖ The Department of Social Services and its 124 local social service agencies
- ❖ The Department of Corrections and its 35 court service units
- ❖ The Department of Education and its 135 local education authorities

The DPB study also received assistance from the Secretaries of Health and Human Resources, Transportation and Public Safety, and Education because of their similar concerns in assessing community services needed to adequately serve at-risk youth.

The study determined that there were almost 5,000 children who were in residential care in excess of 30 days during the fiscal year of 1988. To arrive at this

number the DPB had to eliminate duplicate entries from approximately 14,000 names serviced by these state agencies. The study did not include children who were served by state agencies in residential care less than 30 days nor did it include children who were served without being placed in residential care.

The cost for providing care for the almost 5,000 children during the 1988 fiscal year was \$93.6 million of federal, state, local and other funds. It was projected from the study that a significant increase in expenditures for residential care for this population should be expected for upcoming state budgets.

Recommendations were delivered at the conclusion of the study to curtail rising costs and to reduce duplication of services by state agencies. The recommendations for collaboration of budgets and services were prefaced with the statement that "the current service delivery system for children with emotional and behavioral problems and their families requires significant change" (Virginia Department of Planning and Budget, 1990, p. vii). There were three goals delineated in the recommendations:

- ❖ Family preservation
- ❖ Individualized services in the least restrictive setting
- ❖ Community ownership of children

The result of the DPB study was the creation of the Comprehensive Services Act (CSA) to create community teams to merge duplicate services of certain state agencies when they serve at-risk youth and their families. The teams would work collaboratively with a budget blended from their departments to help reduce costs and improve efficiency in delivering services. The CSA was enacted by the Virginia General Assembly on April 15, 1992, and is administered at the state level through a two-tiered structure comprised of the State Executive Council and the State Management Team.

Provisions

The CSA is implemented in each community of the Commonwealth through two local teams. The Community Policy and Management Team (CPMT) is primarily responsible for policies, procedures, and budget. The Family Assessment and Planning Team (FAPT) is responsible for meeting face-to-face with children and families to develop intervention plans. The FAPT is referred to as "the point of client contact for the CSA" (A report to the Governor and General Assembly, 1992, p.8). Youth and families in need of services are referred to the FAPT by team members or their respective organizations.

CPMT membership is appointed by local governing bodies and must include the local agency heads or their designees from the juvenile court services unit, the health department, the department of social services, the community services board, and the local school division; a parent representative; and a private provider representative if such providers exist within the locality. The CPMT receives funds from the state pool of funds and the state trust fund. The CPMT also oversees the local FAPT and is responsible for managing the collaborative community CSA efforts.

FAPT members represent the six youth and family service areas as mandated by the Comprehensive Services Act. These six areas are the juvenile court services unit, the departments of health and social services, the community services board, the school division, and parent representatives. The Act also encourages each FAPT to include a representative of private child or family service providers and a representative of any other public agency.

The agency responsible for state-wide evaluation of the CSA is the Department of Mental Health, Mental Retardation and Substance Abuse Services. This department has selected nine specific CSA sites across the Commonwealth for intensive evaluation. The nine intensive sites were selected because their composition most accurately represents the

approximately 135 CSA communities throughout the Commonwealth based upon their socioeconomic levels, racial composition, single vs multiple jurisdictions, and rural vs urban vs suburban settings across Virginia. These nine sites were the nine communities chosen for this study.

Appendix B
Literature Review on
Family Strengths

The history of family-focused research can be traced to an initial study done by Herbert Otto in 1959 at the University of Georgia. Because of Otto's early research, he has been referred to as "the first pioneer in family strengths research" (Morgan, 1986, p. 1). The concepts of family strengths, family empowerment, and healthy families have been examined extensively over the last three and one-half decades (McCubbin, Thompson, Pirner, & McCubbin, 1988; Grotevant & Carlson, 1989; Riley, 1995). Almost every family segment of American society has been examined using some type of family focused research agenda. Studies can be found addressing family strengths among almost 8,000 adult 4-H program leaders (Orr, 1981) as well as identifying traits of healthy families among native Americans (Potts, 1992).

Family Strengths

Over twenty family strengths studies were examined for this review. Table 8 contains four of the significant family strengths summaries. The table begins with Morgan's (1986) compilation of Herbert Otto's family strengths studies from his original 1959 research and his modifications up through 1975 and concludes with Krysan, Moore and Zill's (1990) meta-analysis. The table also includes Curran's (1983) extensive survey of professionals who work with families and Stinnett & DeFrain's (1985) extensive survey of families across the nation. The family strengths found in these four studies are

Table 8: Four Family Strength Studies

Herbert Otto's Family strengths identified in Morgan's meta-analysis	Family strengths identified by professionals	Family strengths identified by families	Family strengths identified by researchers
<p>Provision for needs: spiritual, emotional, and physical</p> <p>Communicates effectively</p> <p>Provision for support, security, and encouragement</p> <p>Growth from crisis and bad experiences</p> <p>Mutual respect for individuality</p> <p>Family unity, loyalty, and interfamily cooperation</p> <p>Constructive community relationships</p> <p>Self-help and receiving help</p> <p>Sensitive to family members' needs</p> <p>Growth producing relationships</p> <p>Grow with and through children</p> <p>Performs family roles flexibly</p> <p>Flexibility in child rearing and discipline</p>	<p>Shares religious core</p> <p>Communicates and listens</p> <p>Affirms and supports one another</p> <p>Fosters table time and conversation</p> <p>Shares leisure time</p> <p>Balance of interactions among family members</p> <p>Teaches respect for others</p> <p>Values service to others</p> <p>Admits to and seeks help with problems</p> <p>Respects one another's privacy</p> <p>Develops a sense of trust</p> <p>Has a sense of play and humor</p> <p>Exhibits a sense of shared responsibility</p> <p>Teaches a sense of right and wrong</p> <p>Strong sense of family in which rituals and traditions abound</p>	<p>Spiritual wellness</p> <p>Good communication</p> <p>Commitment to each other</p> <p>Coping ability and growth</p> <p>Quality and quantity family time</p> <p>Appreciation for each other</p>	<p>Religious orientation</p> <p>Effective communication</p> <p>Commitment to family</p> <p>Ability to adapt</p> <p>Spend time together</p> <p>Clear definition of roles</p> <p>Expressions of appreciation</p> <p>Social connectedness</p> <p>Encouragement of individuals</p>
<p>Morgan, E. (1986). <u>Pioneer research on strong, healthy families.</u> Washington, DC: Family Research Council.</p>	<p>Curran, D. (1983). <u>Traits of a healthy family.</u> New York: Harper & Row.</p>	<p>Stinnett, N., & DeFrain, J. (1985) <u>Secrets of strong families.</u> Boston: Little, Brown.</p>	<p>Krysan, M., Moore, K., & Zill, N. (1990). <u>Identifying successful families: An overview of constructs and selected measures.</u> Washington, DC: Child Trends.</p>

representative of the family strengths identified over a thirty year period from 1960 to 1990.

Otto's research regarding family strengths began in 1959 driven by his interest in human potential. Otto's work continued for twenty years seeking to clearly identify family strengths that helped promote the utilization of individual potential (Morgan, 1986). Otto's list of family strengths given in Table 8 is a compilation from Morgan's 1986 meta-analysis.

Curran (1983) conducted a survey to identify family strengths that were present in healthy families. Her research focused on the perspectives of over 500 professionals working with families through "five institutional areas of our culture" (p. 19): (1) education, (2) church, (3) health, (4) family counseling, and (5) voluntary organizations. From the responses received she compiled fifteen traits that were selected most often by the professionals.

Stinnett and DeFrain (1985) also sought to discover common traits among strong families. Their Family Strengths Inventory was developed through the contributions of "more than three thousand families" (p.13). The result of their extensive research was a list of six qualities that were common to the majority of the families they surveyed.

The fourth summary listed in Table 8 was found in a paper by Krysan, Moore and Zill (1990). They pulled the basic list from an unpublished review of the literature by Swihart who identified "those characteristics of strong families that are most frequently mentioned by researchers" (p. 4). They then developed the list into what they referred to as constructs that exist in strong, healthy families. These nine constructs represent similarities found in 14 family strengths studies and form "a consensus about the basic dimensions of a strong, health family" (p. 3).

A rather extensive list of family strengths can be developed by synthesizing these four studies with the multitude of other family studies found in the literature. The differences in identified family strengths as found in these studies can be attributed to such variables as family culture, researcher objectives, changes in families over time, and changes in social norms.

The review of the literature covered family strength studies and reports regarding various family cultures. Some of these studies and reports include such topics as Orr's (1981) study of 8,000 4-H program leaders; Pott's (1992) compilation of two studies regarding native Americans; Hill's (1971) and Clark's (1983) studies of black families; Deane's (1993) and Cohen's (1994) reports on mobile families; Cochran's & Henderson's (1985) report on 160 families in 10 Syracuse, New York, neighborhoods; and Fannin's (1987) paper giving his ecological model of family wellness.

Family strengths studies have been done with almost every significant culture in our society. The variety in family cultures contributes to the diversity of lists of identified family strengths. A family strengths topical review of the literature revealed studies from such perspectives as family strengths in families in the military, families in the United States with Hispanic children, 70 Australian couples from stepfamilies, families who seek assistance from resource programs, families that receive health care assistance provided in public schools, families who have members with developmental disabilities, and families who have children with special needs.

The objectives of researchers conducting family strengths studies also contributes to the variability in identified family strengths. Researcher objectives discovered in the literature review included perspectives such as Curran's (1983) study of professional care givers, Stinnett & DeFrain's (1985) study of families across the nation, and the Lewis, Beavers, Gossett & Phillips (1976) list of family strengths developed by observing family

interactions with prescribed tasks. Other lists of family strengths have been developed from meta-analyses compiled by researchers such as Morgan (1986) and Krysan, Moore, and Zill (1990). Their studies were only four years apart, yet they came up with different lists of family strengths.

Family strengths research has grown in magnitude and depth driven by interests of researchers almost as varied as the families they have studied. Grotevant & Carlson (1989) illustrated the divergent views of family research with a metaphor:

Attempting to review the domain of family assessment brings to mind the metaphor of the hydra from Greek mythology. The hydra was a nine-headed monster that Hercules was challenged to slay. But whenever anyone managed to cut off one of the hydra's heads, two new heads grew in its place. The state of affairs in the family assessment field evokes this metaphor because, like hydra's heads, measures and specialized theories in family studies have proliferated rapidly and in an uncoordinated fashion. (p. 5)

Researchers in the field of family strengths, studying multiple segments of society over three and one-half decades, have contributed to a plethora of information regarding family strengths. Some family strengths are confirmed across studies while some are unique to the particular families under study.

Family strengths are varied because people are varied. Just as society and communities change with time so do families. Lewis, Beavers, Gossett, and Phillips (1976) stated that the family "as an organism undergoes a series of developmental sequences" (p. 5). The needs of a family change with time as the family progresses from the childless first years of marriage up to the retirement years filled with grandchildren. The family is a fluid unit in our society. Not only does it change over time as its composition changes, the family unit is also impacted by such changes in society as technological advances, economic and employment changes, and shifts in cultural values.

Examining Family Strengths within the Family System

When combining the evolving and changing needs of families with the diversity found in their cultural backgrounds, it becomes obvious why research has not produced a "one-size-fits-all" list of family strengths that meets the needs of every family. An emerging concept that has developed from family research has become that of examining the family unit as a system.

A family system consists of family members and their interactions with each other. Family characteristics such as size, membership, gender distribution, intellectual composition, socio-economic status, and special needs are what makes a family unique. The interactions of these characteristics among family members are what makes the family function as a system (Lewis, Beavers, Gossett, & Phillips, 1976).

The review of the literature was expanded to include a review of the methods and measures used to assess family systems and the interactions within the family system. Grotevant and Carlson (1989) confirmed the earlier findings in this review of the literature that the field of family study has produced varied and divergent views about family systems and their components.

Family service providers working with a strengths-based approach to family interventions need to recognize the importance of the elements that contribute to the family system (Kantor & Lehr, 1975). Individual family strengths cannot be successfully identified and viewed apart from the interactions within the family system (Turnbull & Turnbull, 1990).

Family assessments need to move beyond identifying family strengths and recognize the relationships within the family system (Lewis, Beavers, Gossett, & Phillips, 1976). Ronnau and Poertner (1993) aptly described the need for family service providers to focus on the interactions of family strengths when intervention services are provided:

"The importance of recognizing clients' strengths is receiving more attention in the literature, but the absence of practical means for implementing the strengths approach remains problematic" (p. 23).

Change Through Family Strengths

Trends in society and life stages of the family produce changes in family structures and parenting styles. An intervention that focuses on the strengths of the family can help influence meaningful positive changes in the family (Kavanagh, 1994).

Using a strengths-based approach to influence change in the whole family and not just with individual family members helps to empower the family for future self-reliance. When family intervention services move away from a focus on the weaknesses of the family and towards a focus on the strengths of the family they help empower the family for positive growth (Melaville & Blank, 1993).

An example of a successful intervention program through a focus on family strengths is the Family Development Program (FDP) in Albuquerque, New Mexico. The philosophy behind the FDP is that "deficit-based services send this message to participants: 'You are dysfunctional. Let's concentrate on your problems.' " (Menning, 1993, p.19).

The importance of producing positive change in families through an emphasis on family strengths is also promoted by an agency of the federal government. The Office of Juvenile Justice and Delinquency Prevention produced a policymaker's guide addressing the influence of family life on delinquency (Wright & Wright, 1994). The guide addresses the importance of recognizing the strengths of the family as very important factors for keeping children from becoming delinquents.

Summary

This review of the literature confirmed that diversity in families contributes to diversity in family strengths. The literature review did bring to surface some commonalities in the characteristics of some family strength studies and reports. These commonalities centered around such topics as a spiritual or religious basis in the family, a form of positive communication, the ability to cope with problems and adjust accordingly, and time spent together. These common family strengths were not clearly specified in every study but did consistently surface throughout this review of the literature.

The review of the literature also helped identify the importance of the family system. A family intervention plan must not only address the strengths of a family, it must also recognize the application of the family strengths within the dynamics of the family system. Positive change in a family is influenced by intervention plans that build upon the strengths of a family.

The pilot study conducted after this literature review confirmed that family service providers are capable of replicating components of family strengths as found in the literature review. The literature review, combined with the pilot study, contributed to the development of a study question to determine which family strengths were being used by family service providers to produce positive change in the families of at-risk youth. The answers were then used to create a second question to discover if some of these family strengths were more or less useful depending upon the communities of the families or upon the perspectives of the family service providers.

Appendix C

Pilot Study

In the pilot study the Delphi technique was used to survey members from one local Family Assessment and Planning Team (FAPT). FAPT members were asked to individually submit a list of what they considered to be indicators of family strengths. The nine members participating in the pilot study produced a combined list of 59 family strengths. FAPT members were also asked to submit their definition of family strengths. The responses to the second question were dropped for Round 2 because the definitions were redundant to the first question and were too nebulous in interpretation.

The next step in the Pilot Study was to relate the list of family strengths from Round 1 back to the literature review to find a parallel with one or more of the previous studies. As can be expected, all 59 family strengths received from the pilot study paralleled one or more of the family strengths found in the literature review. What was at first thought to be an interesting pilot study question soon produced a "so what" answer.

From the literature review of family systems, the Turnbull & Turnbull (1990) model was chosen to provide the conceptual framework for the Round 2 format. All 59 family strengths received from Round 1 were placed under at least one of the three primary Turnbull categories. For more details on this procedure, see the Pilot Study Round 2 page titled "Family Strength Indicators: Category Explanations".

FAPT members were asked in Round 2 to examine each of the family strengths, then rate each family strength based on the panel member's opinion of its priority. Panel members were given five priority ratings from which to choose; 5=Highest Priority, 4=High Priority, 3=Priority, 2=Low Priority, and 1=Lowest priority. Definitions for each of the priorities were placed at the top of the survey. One panel member created half-step

response options because of an equal agreement with neighboring priorities but not a total agreement with one only.

Mean scores and standard deviations were calculated for each family strength in Round 2. The result was a ranking of family strengths from highest to lowest priority within each of the three Turnbull categories (see Table 9). Family strengths that received identical mean scores were then ranked from lowest to highest standard deviations. Of the 59 family strengths submitted by the FAPT members there were no perfect 5.00 scores for any of the family strengths; there were 21 items that received a mean score equal to or greater than the 4.00 of "High Priority". Seven family strengths received a mean score below that of "Priority"; and no family strength received a mean score of 1.00 of "Lowest Priority."

It was then wondered if the differences among FAPT members regarding the priority of individual family strengths was related to their career area represented on the FAPT. For example, would FAPT members from public schools view some family strengths more important than would FAPT members from the juvenile court? Another question was to determine if there were differences among FAPT communities. These questions of different perceptions among FAPT members by community and representative area were the questions for the final study.

The final study would attempt first to determine which family strengths were actually being used by FAPT's when they developed intervention plans for at-risk youths and their families. Then the question would be to discover if some of these family strengths were more useful than others depending upon different FAPT communities or FAPT representative areas.

It was determined that for the final study individual FAPT members would be asked to nominate family strengths they were actually using in the process of developing

family intervention plans. Second, FAPT members would then be asked to rate the degree of usefulness of each of these family strengths as it is used in intervention plans for at-risk youth and their families. All data would be coded and collected according to individual FAPT member community and representative area. The data would be compiled as a composite score for each family strength then disaggregated by FAPT communities and by FAPT representative areas.

Pilot Study
Round 1

M - E - M - O

TO: Bedford County FAPT members
FROM: Randy Spear
DATE: November 30, 1994
RE: CSA study

* * * * *

Attached to this memo you will find a pilot of the study I hope to be conducting with the intensive CSA sites across the Commonwealth.

I am requesting your help in fine tuning this study for its use. It involves three rounds of communication between myself and each FAPT member. The first communication round is attached. If time permits, and you agree to participate, I am requesting that you answer the two questions and submit your responses in a sealed envelope to xxxxxxxxxx today. I hope to have the responses back to you, in the form of the second communication round, in time for your next FAPT meeting.

I believe that you will find the information compiled from this pilot study useful for the Bedford team.

Please feel free to make notes on each page regarding any questions you have about the study. I welcome any suggestions you would like to make.

Thank you very much for your time. I realize that it is a PRECIOUS resource. Your help is much appreciated.



Department of Educational Leadership and Policy Studies

College of Education
East Eggleston Hall
Blacksburg, Virginia 24061-0302
(540) 231-5642 Fax: (540) 231-7845

November 30, 1994

Dear FAPT Member,

One component of the Comprehensive Services Act addresses "the strengths and needs of troubled and at-risk youths and their families in the Commonwealth." As a doctoral student at Virginia Tech University I am conducting a study regarding family strengths indicators as identified by FAPT members. The purpose of this study will be to develop a collaborative list of family strength indicators for FAPT members to use when they assess at-risk youths and their families.

When the listing of indicators is completed it will be shared with the CSA evaluation work group for their dissemination.

From your personal experiences please list what you believe are indicators of family strengths. Also, from your experiences please give your definition of the term family strengths.

Please do not confer with other FAPT members prior to answering these two questions. All responses will be compiled and submitted back to each FAPT member for individual evaluation and comment.

Your time and effort are much appreciated in this worthwhile endeavor to help children and their families in the Commonwealth.

Sincerely yours,

Randl J. Spear

The following information will be used to track the development of this project by career fields and FAPT locality.

Your personal comments will be kept anonymous.

NAME: _____

TITLE: _____

ADDRESS: _____

PHONE: (_____) _____ FAX: (_____) _____

I am presently working in the following career field:

Number of years working in this career field: _____

Number of years working with children and families: _____

Name of FAPT community/locality: _____

From my personal experience the term *Family Strengths* means:

From my personal experiences what I consider to be indicators of *Family Strengths* are:

Pilot Study
Round 2

January 4, 1995

{First Name} {Middle Initial} {Last Name}, {Title}
{Agency} {Suite}
{Street}
{City}, VA {Zip}

Dear {Sal} {Last Name},

I hope you had a pleasant Christmas holiday and that you have a prosperous New Year! Thank you for your contribution and participation in this family strengths survey. With this letter you will find round 2 of the three round survey.

For this second round please read each of the family strength indicators, as nominated by your panel, and circle your priority opinion next to each strength. Please evaluate each strength as it is written. If a particular strength indicator is unclear as written you may give it a low priority rating.

You will notice that I have placed the indicators under one of three headings. If one of your nominated indicators is under a heading that you feel is inappropriate please feel free to indicate on the sheet where you would like it placed. I have also included an explanation sheet if you would like background information regarding the headings and the methodology used for placing the indicators under the headings.

To continue to track the responses by career field I have placed your unique identifying code ({Survey code}) on your sheet. Please be sure that your responses are placed on the sheet provided with this letter.

I will also be testing a faxing procedure in preparation for the state-wide survey. If possible and convenient for you, please fax your responses to me as indicated below. If faxing your response is not convenient for you please feel free to submit your responses (in a sealed envelope if you prefer) to XXXXXXXX at the next FAPT meeting or you may mail it to me at work.

Once again, thank you very much for your time in this project. I will provide your team with the final ranking of the family strengths as soon as I receive all of the responses. Your help and time are much appreciated!

Sincerely yours,

Randl J. Spear

Fax number (804) 821-4723

Monday - Friday 7:00 a.m. - 5:00 p.m.

Family Strength Indicators Category Explanations

The family strength indicators that were nominated by panel members were placed under one of three categories adopted from the family systems model developed by Turnbull, Summers, and Brotherson in 1984. Their model consists of four major components: Family Structure, Family Interactions, Family Functions, and Family Life Cycle. The life cycle component of this model depicts the developmental stages and changes that are experienced by families over time. This is the component that caregivers hope to modify with intervention strategies. The other three components are what drive the family life cycle from one generation to the next.

The three driving components of the Turnbull model, structure, interaction, and function are interrelated and dependent upon each other. Even though a specific family characteristic can be individually attributed to one primary component, it could also be manifested through the other components. This concept is better understood when the individual family strength indicators are examined within their respective component headings. The reader will notice that specific indicators under one component could be observed as a manifestation through other components.

The three components can be summarized with the following descriptive phrases:

Family Structure - What the family is.

Family Interactions - What the family thinks/feels.

Family Functions - What the family does.

The foundation behind each component can be briefly described as follows:

Family Structure - What the family is:

Membership, size, and type; Style, cultural and ideological

Family Interactions - What the family thinks/feels:

Communication; Cohesion; Adaptability; Subsystems

Family Functions - What the family does:

Collective actions; Meeting membership needs; Change agents

The placement of family strength indicators was made by examining key words in the indicators nominated. The following is an example of how placements were made.

Family Structure

"Able to....succeed in school" (an ideological and/or cultural style based on family perceptions and definitions)

Family Interactions

"Ability to ask for help" (a philosophical decision based on family cohesiveness and adaptability)

Family Functions

"Child has successful school life" (a present action that could be a family collective action or a change agent)

ROUND 2

Family Strength Indicators ¹

- 5 - Highest Priority:** Direct bearing; most relevant point
- 4 - High Priority:** Relevant; related to other issues
- 3 - Priority:** May be a determining, relevant factor
- 2 - Low Priority:** Not a determining factor
- 1 - Lowest Priority:** No significant relevance

	<i>Highest Priority</i>	<i>High Priority</i>	<i>Priority</i>	<i>Low Priority</i>	<i>Lowest Priority</i>
<i>(Please circle your response to the following indicators:)</i>					
<u>Family Structure</u>					
Able to maintain employment (parents) or to succeed in school (children).....	5	4	3	2	1
Parental involvement in children's success (school, play...) ...	5	4	3	2	1
Secure income/employment; willingness to work.....	5	4	3	2	1
Parent's willingness to work with family service agencies	5	4	3	2	1
Desire to improve	5	4	3	2	1
Extended Family	5	4	3	2	1
"Backbone"	5	4	3	2	1
Intelligence	5	4	3	2	1
Education	5	4	3	2	1
Special skills/talents	5	4	3	2	1
Honesty	5	4	3	2	1
Clear boundaries among family members.....	5	4	3	2	1
Flexibility (rules and regulations)	5	4	3	2	1
Grandparents who actively participate in a child's development	5	4	3	2	1
Children developing a sense of history of their family	5	4	3	2	1
Ability to see humor together in tough situations.....	5	4	3	2	1
Questioning any intrusion for the good of the family	5	4	3	2	1
Positive versus negative approach (attitude).....	5	4	3	2	1
Able to balance work and leisure and to have successful relationships in both areas.....	5	4	3	2	1

¹ Family Strengths items are written exactly as submitted by respondents.

	Highest Priority	High Priority	Priority	Low Priority	Lowest Priority
Involvement in some form of regular religious practice (a foundation of faith).....	5	4	3	2	1
No current problems with substance abuse.....	5	4	3	2	1
<u>Family Interactions</u>					
Ability to ask for help	5	4	3	2	1
Healthy marriage/relationship between parents/caregivers	5	4	3	2	1
Caring	5	4	3	2	1
Ability to service problems and go forward	5	4	3	2	1
Ability to utilize resources.....	5	4	3	2	1
Outside interests	5	4	3	2	1
Energy.....	5	4	3	2	1
Ability/Willingness to change	5	4	3	2	1
Adaptability.....	5	4	3	2	1
Commitment.....	5	4	3	2	1
Patience.....	5	4	3	2	1
Emotionally stable parents	5	4	3	2	1
Parents availability to children.....	5	4	3	2	1
Names parents give to children	5	4	3	2	1
Parent's display of desire to advocate for self and/or family ..	5	4	3	2	1
Willingness to appear at a meeting of strangers such as a FAPT meeting.....	5	4	3	2	1
Family's sacrificing for each other to realize a family goal.....	5	4	3	2	1
Trust in one another's support, immediate or extended family.....	5	4	3	2	1
Shared goals for family success, whether recreational outing or meeting financial responsibilities	5	4	3	2	1
Shielding another from identified harm.....	5	4	3	2	1
Working towards togetherness by cooperation with deemed services and agencies	5	4	3	2	1
Functional communication patterns (positive) i.e. ability to problem solve; to compromise.....	5	4	3	2	1
<u>Family Functions</u>					
Child has successful school life.....	5	4	3	2	1
Basic needs provided to children in the home	5	4	3	2	1

	<i>Highest Priority</i>	<i>High Priority</i>	<i>Priority</i>	<i>Low Priority</i>	<i>Lowest Priority</i>
Use of community resources	5	4	3	2	1
Stability (even in small doses)	5	4	3	2	1
Love for other family members	5	4	3	2	1
Display of family photos in the home.....	5	4	3	2	1
Parent participation in a child's activities	5	4	3	2	1
Appropriate discipline to ensure a child's proper behavior in and outside the home	5	4	3	2	1
Calm, reassuring love in a family where individuals know they have a refuge from the difficulties of life.....	5	4	3	2	1
Looking for appropriate advocacy to balance family's emotional and realistic goals	5	4	3	2	1
Utilization of community services that may be available.....	5	4	3	2	1
Making the best of some tough situations by not allowing family weaknesses to overwhelm.....	5	4	3	2	1
Good sense of self-identity (individual & group)	5	4	3	2	1
Healthy sense of self-esteem	5	4	3	2	1
Able to set and meet goals and priorities	5	4	3	2	1
Ability to understand from past mistakes regarding present and future decisions to avoid impeding progress.....	5	4	3	2	1

**Dropped From
Pilot Study
Round 2**

ROUND 2

Family Strength Definition ²

Please read the following paragraph definitions and circle your response to what is written.

**AMENDED
BELOW:**

**AGREE
AS WRITTEN**

**DISAGREE
AS WRITTEN**

Assets or benefits that the family has to provide a stable environment for children; extended family supports, regular employment/income; availability to get public services, (ie. transportation, etc...), Other assets include basic home/shelter/clothes/food needs provided in the home. Strengths are any assets/benefits that enable the family to stay intact the children to remain in the homes.

**AMENDED
BELOW:**

**AGREE
AS WRITTEN**

**DISAGREE
AS WRITTEN**

Positive aspects of a family's life, structure, et cetera, that can be used to improve the family's life, structure, et cetera.

**AMENDED
BELOW:**

**AGREE
AS WRITTEN**

**DISAGREE
AS WRITTEN**

² Definitions are written exactly as submitted by respondents.

The ability of a family, regardless of definition, to deal with problems that arise and to do so in a responsible, positive manner using and drawing upon all members in the decision making process.

**AMENDED
BELOW:**

**AGREE
AS WRITTEN**

**DISAGREE
AS WRITTEN**

Those characteristics of family members that enable a family to solve problems, face crises, nurture children and plan for the future to the extent they can function as a unit with minimal outside intervention.

**AMENDED
BELOW:**

**AGREE
AS WRITTEN**

**DISAGREE
AS WRITTEN**

Whatever resources a family has within its internal unit that allows the family to maintain healthy relationships and gives them the ability to solve problems.

**AMENDED
BELOW:**

**AGREE
AS WRITTEN**

**DISAGREE
AS WRITTEN**

Any characteristic, great or small, that demonstrates a family's ability to fill the needs of its individual members as a family unit.

**AMENDED
BELOW:**

**AGREE
AS WRITTEN**

**DISAGREE
AS WRITTEN**

A functional family with an environment that promotes success and instills responsibility. Family members exhibit a strong sense of loyalty to each other. Everyone knows that they have a commitment to each other through happy and sad moments. Instills the discipline to do everyday mundane tasks while serving a functional purpose to our community. Strongest family trait and benefit is honesty, telling members when they are wrong while also supporting them through their mistakes.

**AMENDED
BELOW:**

**AGREE
AS WRITTEN**

**DISAGREE
AS WRITTEN**

Positive coping skills, behavior patterns, and thinking patterns (including faith) that individuals and families as groups bring to a situation that enables them to successfully meet and work through problems as well as function in a healthy manner on a day-to-day basis.

**Rankings
Pilot Study**

Table 9: Means and Standard Deviations of Item Scores Resulting from Round 2 of the Pilot Study (N=9)		
	Mean	Standard
	Scores	Deviation
Family Structure		
Parental involvement in children's success (school, play...)	4.44	0.68
No current problems with substance abuse	4.00	0.82
Positive versus negative approach (attitude)	4.00	0.47
Desire to improve	4.00	0.67
Honesty	4.00	0.94
Parents' willingness to work with family service agencies	3.89	0.87
Able to maintain employment (parents) or to succeed in school (children)	3.89	1.29
Flexibility (rules and regulations)	3.78	0.63
Secure income/employment; willingness to work	3.67	0.94
Clear boundaries among family members	3.56	0.83
Ability to see humor together in tough situations	3.11	0.57
Able to balance work & leisure and to have successful relationships in both	3.11	0.87
Extended Family	3.11	0.57
Education	3.11	0.57
Intelligence	3.00	0.67
Backbone	3.00	0.94
Grandparents who actively participate in a child's development	2.89	0.57
Involvement in some form of regular religious practice	2.78	0.63
Children developing a sense of history of their family	2.67	0.82
Questioning any intrusion for the good of the family	2.56	0.96
Special skills/talents	2.33	0.47
Family Interactions		
Commitment	4.56	0.50
Caring	4.33	0.67
Ability/willingness to change	4.33	0.47
Adaptability	4.22	0.63
Functional, positive communication patterns: solve problems, compromise	4.17	0.58
Parents' availability to children	4.11	0.87
Ability to service problems and go forward	4.06	0.68
Emotionally stable parents	4.00	0.82
Healthy marriage/relationship between parents/caregivers	3.89	0.87
Family's sacrificing for each other to realize a family goal	3.89	0.31
Trust in one another's support, immediate or extended family	3.89	0.74
Patience	3.78	0.92
Ability to utilize resources	3.67	0.82
Ability to ask for help	3.56	0.68
Working towards togetherness by cooperating with services & agencies	3.56	0.96
Shared goals for family success, whether recreational or financial	3.56	0.83
Shielding another from identified harm	3.50	1.20
Parents' display of desire to advocate for self or family	3.44	0.68
Willingness to appear at a meeting of strangers	3.44	0.96
Energy	3.44	0.50
Outside interests	3.00	0.67
Names parents give to children	2.33	0.82

Table 9: Means and Standard Deviations of Item Scores Resulting from Round 2 of the Pilot Study (N=9) Continued		
	Mean Scores	Standard Deviation
Family Functions		
Calm, reassuring love in a family where individuals know they have a refuge	4.56	0.68
Stability (even in small doses)	4.44	0.50
Appropriate discipline to ensure a child's proper behavior	4.33	0.67
Parent participation in a child's activities	4.33	0.67
Healthy sense of self-esteem	4.28	0.53
Love for other family members	4.28	0.71
Good sense of self-identity (individual & group)	4.11	0.74
Able to set and meet goals and priorities	4.00	0.67
Basic needs provided to children in the home	3.89	0.99
Child has successful school life	3.89	0.99
Ability to understand from past mistakes regarding present & future decisions	3.83	0.88
Making the best of tough situations by not allowing weaknesses to overwhelm	3.67	0.67
Use of community resources	3.33	0.47
Utilization of community services that may be available	3.33	0.47
Looking for appropriate advocacy to balance family's emotional & realistic goals	3.00	0.94
Display of family photos in the home	2.56	1.07

Rating scales were: 5 = Highest Priority, 4 = High Priority, 3 = Priority, 2 = Low Priority, 1 = Lowest Priority.

Appendix D

Delphi Technique

The Delphi method of inquiry was originally developed by the RAND Corporation in the late 1940s "as a systematic method for eliciting expert opinion on a variety of topics, including technological forecasting" (Sackman, 1974, p.iii). The RAND Corporation selected the name Delphi from the Greek oracle at Apollo's shrine at Delphi and developed the Delphi technique "to facilitate military forecasting related to long-range decisions" (Brockhaus, 1975, p.128).

Within three decades after its creation, the Delphi method had found its way into many forms of research. In 1975 William L. Brockhaus compiled what he termed to be "the largest international research study to date concerning the Delphi method... [containing] ...over 1,500 entries of published materials relating to methodological aspects of the Delphi method as well as studies that applied the Delphi to substantive issues" (p.128). A paper by Hill and Fowles (1975) addressed the methodological worth of the Delphi with a reference to a 1973 unpublished monograph by one of the developers of the original Delphi study, O. Helmer, who stated that "the technique has been used thousands of times" (p.179).

The references above provided a reflective look at the growth and acceptance of the Delphi method within three decades after its inception. The Delphi technique has found its way into many research fields beyond the military and beyond the use as a forecasting tool. An expert in the Delphi technique, Murray Turoff, pointed out (in Centron & Ralph, 1971) that even though the Delphi was originally developed as a forecasting tool, his analysis of Delphi studies determined that the technique had become more valuable as a method for maximizing communications among individuals.

Criticism of The Delphi

With the expansion of the Delphi technique, from its original use by the United States military as a forecasting tool to its adoption by other sectors of scientific inquiry, it would be expected that criticism of the technique would follow. One of the most notable critiques is a 1974 RAND-funded paper by H. Sackman. Over a decade after this critique was written, it was still referred to as the "historic attack on the Delphi technique" (Rieger, 1986, p.195).

The critique itself was also the subject of much criticism. One of the critics referred to Sackman's critique by stating, "If you'd like to read how Alexander Graham Bell's laboratory would have fared in an OSHA (Occupational Health and Safety Act) inspection, you'll love this Delphi assessment" (Scheele, 1975, p.215).

Sackman (1974) examined the "unwarranted assumptions in method and approach" (p. 31) of the Delphi method. In his paper he proposed ten specific questions to examine the reliability, validity, and integrity of the final results produced from a Delphi study. Sackman answered his own ten questions by referencing accepted research standards and procedures within the psychometric and social science fields and comparing them with his analysis of published Delphi studies.

Eight researchers addressed Sackman's Delphi critique in one issue of the journal "Technological Forecasting and Social Change", volume 7, 1975. Peter Goldschmidt (1975) addressed Sackman's ten questions with an introductory comment that Sackman is in error when he equates "applications of the Delphi technique with the Delphi technique itself" (p.195). Goldschmidt's conclusion was that according to Sackman's ten questions the reliability, validity, and integrity of the Delphi technique itself should not be questioned, but instead the use of the Delphi should be questioned or at least more closely moderated. Goldschmidt agreed with other researchers, including a reference to

Sackman's agreement, that probably the most effective use of the Delphi is not necessarily as a forecasting tool but as a method for stimulating "meaningful interchange between different groups interested in a common problem" (p.211).

Constructs of The Delphi

The original intent of the Delphi design was for it to be used as a forecasting instrument to pool the intelligence of persons, working with a similar topic, to arrive at a more accurate answer to a specific question. Persons selected to answer the question are referred to as the panel members. By using the anonymous method for collecting information, panel members would contribute their opinions equally and would not be hampered by overbearing personalities or other similar hindrances normally associated with group discussions.

Contrary to the anonymity of panel member responses afforded through a Delphi, the open forum process sometimes prevents all persons from contributing equally; true responses are stifled when overbearing personalities inhibit contributions from other persons (Woudenberg, 1991). The philosophy behind the Delphi is that through multiple anonymous reiterations to a question the responses would move toward a more accurate mean as persons who are unsure of their answers shift their responses towards the group mean while persons who are sure of their answers will not change their responses thereby creating the mean.

Rowe, Wright, and Bolger (1991) evaluated the Delphi technique in light of other study techniques and determined that the Delphi researcher is actually inhibiting more accurate responses by removing the opportunity for exchange of reasons behind panel member responses. Their conclusions were that the Delphi technique does not create

more accurate responses, it actually inhibits them by removing the dialogue of reasoning behind each response.

The Delphi method used for this study was not a forecasting tool, it did not seek to build a consensus of speculative truth about an unknown variable; therefore, reasoning behind each panel member's response was not as relevant as the accuracy of the individual response. In this study it was not important that panel members be offered an opportunity to change their responses to reach a consensus about the usefulness of particular family strengths; it was important that panel members pull from their personal experiences and state their own opinions as to the usefulness of particular family strengths.

A very extensive Delphi sponsored by York University in Ontario, Canada, conducted what the author termed as "a 'process-oriented' Delphi" (Bardecki, 1984, p.55). The Delphi was used to examine how opinions and attitudes changed during the reiteration processes of Delphi surveys. The York study did not seek to arrive at a consensus of opinion, but was used instead to gather information. This use of the Delphi legitimized the technique for use as a tool to gather information apart from its original design of forecasting; this was the intent of the Delphi used for this study.

To conduct a Delphi without attempting to create a consensus is an acceptable use of the Delphi technique. One such use of this type of Delphi is the policy Delphi. A "policy Delphi does not seek to establish consensus relative to a specific reality" (Cookson, 1986, p.5). Irene Jillson designed and conducted her National Drug Abuse Policy Delphi with an impressive list of advisers, including one of the cofounders of the original Delphi. She stated, "We are not interested in consensus per se, but rather, in exploring alternatives" (Jillson in Linstone & Turoff, 1975, p.127).

The selection of panel members for a Delphi study is guided by the objectives of the study. Thomas Weblar and colleagues stated, "The Delphi process is...best suited for

those [types of problems] that involve a mixture of scientific evidence and social values" (Webler, Levine, Rakel, & Renn, 1991, p.256). The mixture of social values with scientific evidence follows the philosophical basis of the Kantian inquiry system which holds that an accurate appraisal of a system will compile knowledge from theoretical and empirical components of the system. That is, the study not only examines what the system is supposed to be doing but what the system actually is doing.

The more varied the perspectives that are sought for a problem the greater the opportunity for a more accurate response to the question (Royce, 1919; Linstone & Turoff, 1975). Panel members used for this study were from a varied pool of practitioners (family service providers on a community team working with at-risk youth and their families) in communities that were selected to provide a fair representation of similar teams across the state based on socioeconomic levels, racial composition, single vs multiple team jurisdictions, and rural vs urban vs suburban communities.

Modifications of the Delphi

The Delphi technique has evolved from a process for exclusively creating consensus (through multiple survey rounds offering panel members opportunities to change their responses after seeing the responses of their peers) to also become a process for synthesizing responses. The theoretical application of the Delphi is a synthesis of responses through anonymous reiterations. The definition of synthesis is "the combining of separate elements to form a coherent whole" (The American Heritage Dictionary of the English Language, 1976). The intent of this Delphi was not to offer panel members an opportunity to change their responses after seeing the responses of their peers; it was a synthesis of panel members' opinions based upon their personal experiences.

Through modifications of the Delphi the mechanics of the technique have remained the same. Experts are asked to respond individually to a question or a series of questions; this is usually referred to as Round 1. These responses are compiled in a format designed by the researcher and then sent to the experts as Round 2. This second round normally requests that the experts consider the composite group responses of their peers and then react to these responses through a predetermined format such as a rating scale. The rating scale scores for each question are averaged to determine a mean score for each question; this becomes the synthesized response to the question under study (Dailey, 1988; Burns, Batavia, Smith & DeJong, 1990).

The modification of the Delphi technique used for this study is graphically depicted in Figure 1, the Spear process model. The process is used to poll panel members to collect their responses to a specific question or series of questions. The process begins with the assumption that each panel member participating in the study possesses individual personal knowledge regarding the study question; this is referred to as knowledge in segments. When panel member responses progress through the Delphi rounds, the final answer is the synthesis of their knowledge; this is referred to as knowledge in synthesis.

Through Round 1, panel members are surveyed for their individual responses to a specific question. The researcher compiles the responses into a uniform format. This procedure may necessitate editing, clarification, and merging of duplicate responses. The researcher then develops some type of scale to be applied to the Round 1 responses for Round 2.

Round 2 provides panel members an opportunity to see the combined Round 1 responses for the first time. All responses are placed on an equal basis in a format where panel members are asked to respond according to the conditions established by the researcher, such as to rate the usefulness of individual family strengths.

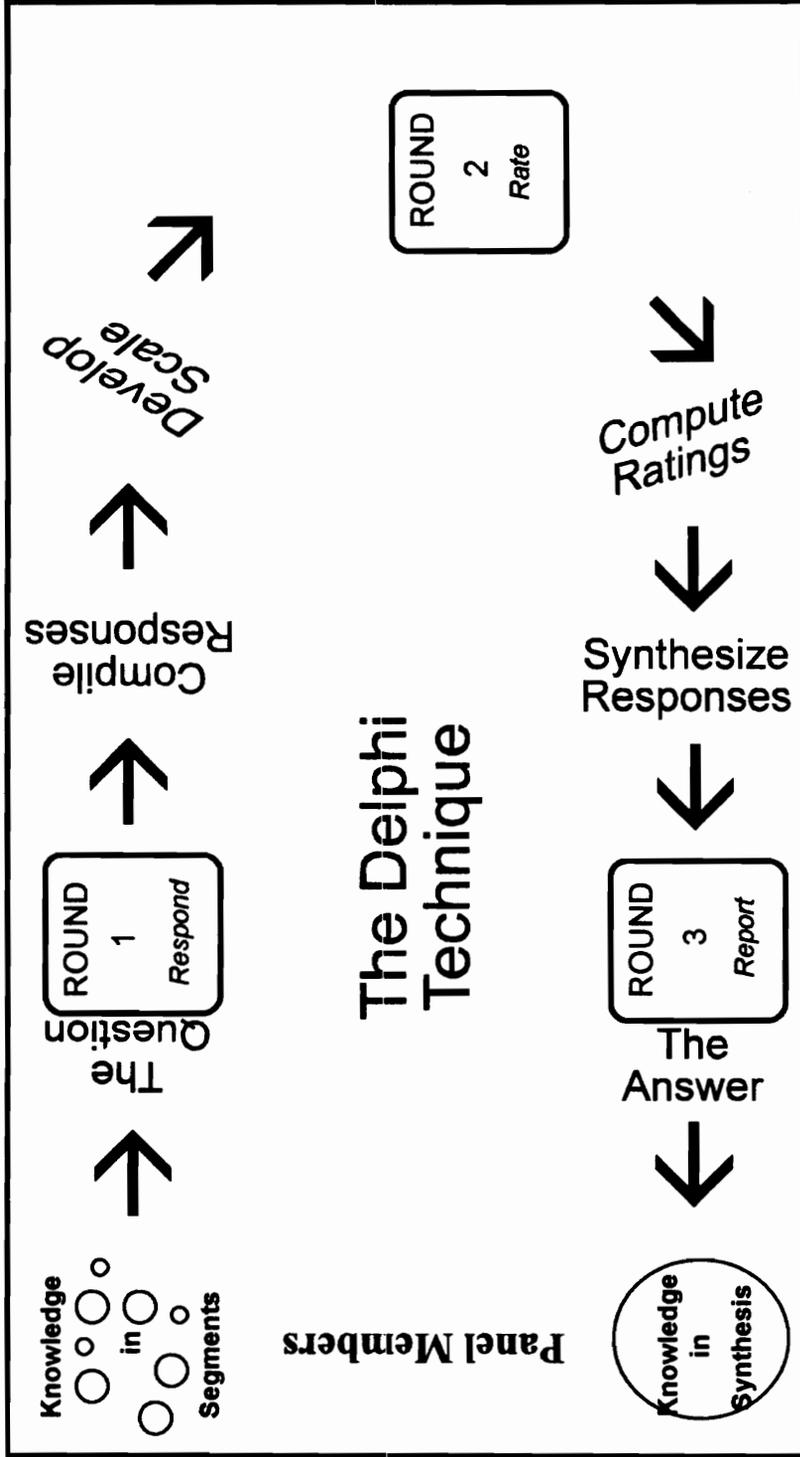


Figure 1 *Spear Process Model of the Delphi Technique*

NOTE: Through the process of the Delphi rounds, segments of knowledge from individual panel members is collectively pooled to form a synthesis of knowledge regarding a particular question. Depending upon the objectives of the researcher, the panel may be formed to answer a predetermined question or the question may be formed for a predetermined panel.

When the Round 2 responses are received, the researcher uses the appropriate methods for analyzing the data received. Usually this is some type of computational analysis of the ratings such as determining mean scores and standard deviations of responses. The researcher then synthesizes the data for the survey question and prepares a narrative for properly reporting an answer to the question. Round 3 is the answer to the question and is referred to as the report and is the final communication between the researcher and panel members.

The researcher using the Delphi technique may choose to repeat Round 2 with the newly computed data and ask panel members to respond again to arrive at a more refined unified response before Round 3 is finalized. This gives panel members an additional opportunity to edit, clarify, or modify their responses in light of the responses of their peers. The need to repeat Round 2 would be dependent upon the researcher's desire to tighten the responses. This desire could be influenced by such factors as a wide variance in Round 1 or Round 2 responses indicating that the question was framed improperly or because the question itself was of such significance that margins of error need to be minimized as much as possible, such as the national defense issue that precipitated the creation of the first Delphi.

Appendix E

Final Study

Synopsis of Study

The researcher surveyed the Family Assessment and Planning Team (FAPT) chairs from nine communities in the Commonwealth of Virginia for specific information regarding FAPT memberships. The responses received from the survey indicated that the potential FAPT membership was 153. Round 1 and Round 2 surveys were mailed to the nine FAPT chairs for their distribution to FAPT members; 70 Round 2 responses (46%), were received by the researcher.

The study was conducted over a four month period. Round 1 was sent to the FAPT chairs in May, 1995; the last, Round 2, response was received in August, 1995. Information regarding the Final Study is explained in greater detail in the body of this report.

Round 1

Randl J. Spear

P.O. Box 10,002; Lynchburg, VA; 24506; (703) 586-7731

May 6, 1995

{Sal} {First Name} {Last Name}, {Title}
{Agency}
{Address}
{City}, VA {Zip}

Dear {Sal} {Last Name}:

Thank you for agreeing to distribute the enclosed survey questionnaires to the FAPT members in your area. I will be conducting all further correspondence directly with each FAPT member individually.

Please thank the FAPT in advance for their participation in this study. Their time commitment should be minimal, approximately 10 minutes for each of the three questionnaire rounds. Prompt replies will be very much appreciated!

If anyone has a question at any time I can be contacted by telephone at work or at home. My work number is (703) 586-7731, my home number is (XXX) XXX-XXXX.

Thank you again for your much needed assistance in the preliminary stage of this study.

Sincerely yours,

Randl J. Spear

Dear FAPT member:

One component of the Comprehensive Services Act addresses "the strengths and needs of troubled at-risk youth and their families in the Commonwealth." As a doctoral student at Virginia Tech, I am conducting a study to determine which family strengths are being used by FAPTs when they develop family intervention plans. This study will be completed in three survey rounds requiring approximately ten minutes of your time for each of the rounds.

The purpose of this study will be to compile a list of family strengths rated by FAPTs according to their usefulness in the process of developing family intervention plans. The list will be compiled in three formats: (1) a collective list from the FAPTs participating in the study, (2) a list by FAPT member career fields, and (3) a list by FAPT member communities.

Confidentiality will be maintained throughout the survey. Names will not appear on any of the response sheets or compiled lists. You will be assigned a personal response code and all of your responses will be directed to me. If at any time throughout the survey you no longer wish to participate, you may elect not to respond to a survey round.

Your time and effort are much appreciated in this worthwhile endeavor to help at-risk youth and their families in the Commonwealth. If convenient for you, please fax your responses to (804) 821-4723 between the weekday hours of 7:00 a.m. to 6:00 p.m. up through Friday, May 5, 1995. If faxing is not convenient, you may mail your responses to me at the address below. To protect your confidentiality I will mail all materials to you. Thank you.

Sincerely yours,

Randl J. Spear

David J. Parks
Professor

Randl J. Spear
P.O. Box 10,002
Lynchburg, VA 24506-0002
voice: (703) 586-7731

Panel Member Information Form

The following information will be used to track the development of this project by career field and FAPT locality only. Your personal comments will be kept confidential. This information will NOT appear in the study.

NAME: _____

TITLE: _____

AGENCY: _____

ADDRESS: _____

_____ **ZIP:** _____

PHONE: (_____) _____ **EXT:** _____

FAX: (_____) _____

I am presently working in the following career field:

- | | |
|--|---|
| <input type="checkbox"/> Juvenile Court Services | <input type="checkbox"/> Department of Health |
| <input type="checkbox"/> Department of Social Services | <input type="checkbox"/> Community Services |
| <input type="checkbox"/> Parent Representative | <input type="checkbox"/> Public Schools |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Private Provider |

Number of years working in this career field: _____

Number of years working with children and families: _____

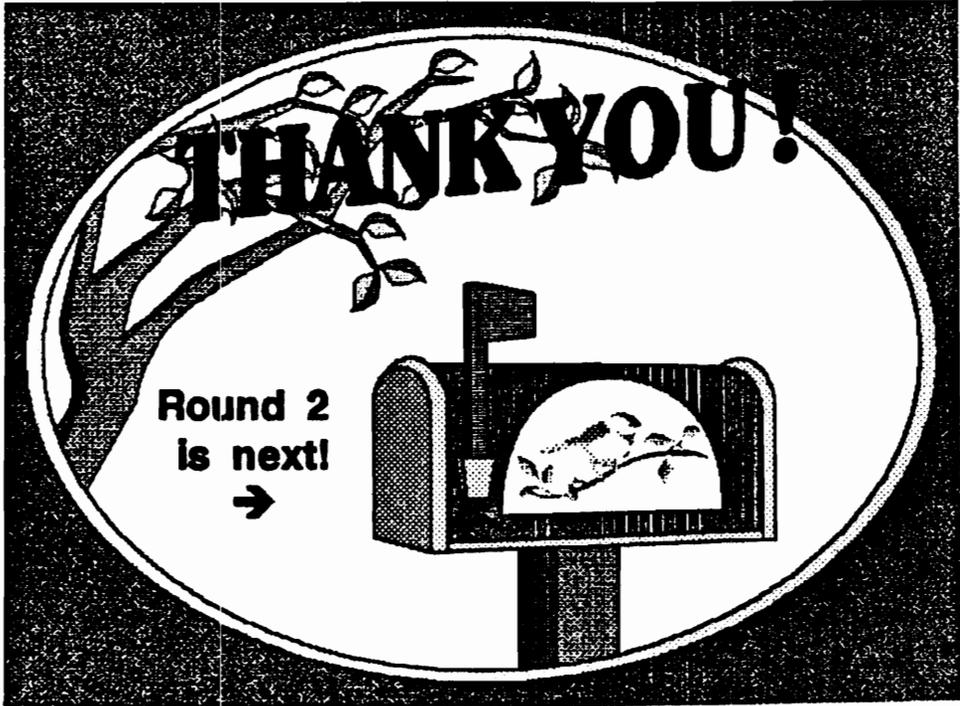
Name of FAPT community/locality: _____

ROUND 1

FAMILY STUDIES HAVE PRODUCED MULTIPLE LISTS OF FAMILY STRENGTHS. SOME OF THESE STRENGTHS MAY, OR MAY NOT, APPLY TO YOUR FAMILIES. PLEASE LIST BELOW THE FAMILY STRENGTHS THAT YOU USE WHEN DEVELOPING INTERVENTION PLANS FOR AT-RISK YOUTH AND THEIR FAMILIES:

Please make all of your responses from your personal experiences of working with at-risk youth and their families. Please do not confer with any other FAPT member, text, or reference book.

Confidentiality will be maintained throughout the survey. Names will not appear on any of the response sheets or compiled lists. All of your responses will be directed to me. If at any time throughout the survey you no longer wish to participate, you may elect not to respond to a survey round.



**Thank you for your
Round 1 response.
I hope to send out
Round 2 within the
next few weeks.**

**Thanks again for your
time and participation;
it is appreciated.
- Randy Spear.**

**fax (804) 821-4723
voice (703) 586-7731**

**{Sal} {First Name} {Last Name}, {Title}
{Agency}
{Address}
{City}, VA {Zip}**

Round 2



Department of Educational Leadership and Policy Studies
College of Education
East Eggleston Hall
Blacksburg, Virginia 24061-0302
(540) 231-5642 Fax: (540) 231-7845

June 12, 1995

{Sal} {First Name} {Last Name}, {Title}
{Agency}
{Address}
{City}, VA {Zip}

Dear {Sal} {Last Name}:

The following pages are the second round of the study to determine the most useful family strengths for developing intervention plans for at-risk youth and their families.

The pages contain the family strengths being used by persons working with youth and their families. I have grouped the family strengths by common themes as I perceived them. I also edited and combined family strengths when there appeared to be duplications. If you feel that a family strength that you nominated has been lost in the editing process, please write it in with the group that best fits your intentions. You may also write in a missing family strength that you feel needs to be included. The last group contains miscellaneous family strengths without a common theme.

Before rating each family strength, please skim through the entire list. Then, carefully read each family strength and rate its usefulness in developing intervention plans for at-risk youth and their families.

You may fax your responses to me at (804) 821-4723 between the hours of 7:00 a.m. and 5:00 p.m., Monday through Friday. Or you may mail them to me at: Randl J. Spear; P.O. Box 10,002; Lynchburg, VA 24506.

To help expedite this process, please respond within two business days from your receipt of this letter.

Your unique identifier code, ({position}{community}), has been placed on your survey. This information will not appear in the final report.

Thank you very much for your assistance. Your time and effort in this project are truly appreciated.

Sincerely yours,

Randl J. Spear
Doctoral Candidate

ROUND 2

PLEASE RATE EACH OF THE FOLLOWING FAMILY STRENGTHS ACCORDING TO YOUR OPINION OF ITS USEFULNESS IN DEVELOPING INTERVENTION PLANS FOR AT-RISK YOUTH AND THEIR FAMILIES. CIRCLE THE NUMBER THAT BEST REPRESENTS YOUR OPINION FOR EACH FAMILY STRENGTH.

Very Useful
Quite Useful
Somewhat Useful
Not Useful

A

A socially acceptable value system	4	3	2	1
Parents' commitment to keeping the family together	4	3	2	1
Competitive temperament of family members	4	3	2	1
Strong will; determination of family members	4	3	2	1

B

Strong spiritual faith within the family	4	3	2	1
Religious orientation; reliance on faith or church	4	3	2	1
Any Christian ties that may be utilized	4	3	2	1

C

Mutual respect among family members	4	3	2	1
Willingness to keep child at home or close to home	4	3	2	1
Effective parental disciplinary techniques	4	3	2	1
Ability of adults in the family to properly parent the child(ren)	4	3	2	1
Consistency of parenting techniques	4	3	2	1
Level of parental formal education	4	3	2	1

D

Constructive communication among family members	4	3	2	1
Open communication among family members	4	3	2	1
Positive relationships among family members	4	3	2	1
Positive interactions among family members	4	3	2	1

	<i>Very Useful</i>	<i>Quite Useful</i>	<i>Somewhat Useful</i>	<i>Not Useful</i>
<u>E</u>				
Sense of shared responsibility among family members	4	3	2	1
Sense of family unity among family members	4	3	2	1
Family loyalty to each other	4	3	2	1
Family regard for one another	4	3	2	1
Family commitment to the welfare of the child(ren)	4	3	2	1
Loving relationships among family members	4	3	2	1
Emotional bonds within the family	4	3	2	1
Availability of immediate family members for support	4	3	2	1
Availability of extended family members for support	4	3	2	1
Willingness to use immediate family members for support	4	3	2	1
Willingness to use extended family members as support	4	3	2	1
Supportive involvement of extended family	4	3	2	1
Evidence of a support system available to the family	4	3	2	1
<u>F</u>				
Emotional stability of parents	4	3	2	1
Financial stability of the family	4	3	2	1
Financial management skills of the family	4	3	2	1
Parental awareness of the limits of what the family can do for the client	4	3	2	1
Parental investment in the child's well-being	4	3	2	1
Evidence of a proper parent-child relationship	4	3	2	1
Positive attachment between parent(s) and child	4	3	2	1
Self-confidence of family members	4	3	2	1

	<i>Very Useful</i>	<i>Quite Useful</i>	<i>Somewhat Useful</i>	<i>Not Useful</i>
Ego strength of family members	4	3	2	1
Parental ability to provide care for themselves	4	3	2	1
Parental ability to provide care for the family	4	3	2	1
Stable adult role models in the home	4	3	2	1
<u>G</u>				
Family members' understanding of the causes of the client's problem(s)	4	3	2	1
Parents' insight into the needs of their family	4	3	2	1
Parental ability to verbalize family needs at FAPT meeting	4	3	2	1
Parental initiative to seek services for help	4	3	2	1
Family access to needed resources for assistance	4	3	2	1
Family utilization of needed resources for assistance	4	3	2	1
Ability to pull resources from family, neighbors, or friends	4	3	2	1
Family willingness to take an active role in the development of a family intervention plan	4	3	2	1
Willingness to comply with interventions	4	3	2	1
Existing relationships with private counselors	4	3	2	1
Parental willingness to participate in counseling	4	3	2	1
Positive attitude of family members	4	3	2	1
Ability to manage aberrant behavior of child(ren)	4	3	2	1
Ability to communicate needs to service provider(s)	4	3	2	1
Parental capacity for therapy	4	3	2	1
Parental ability to make personal change	4	3	2	1
Parental openness to recommended changes	4	3	2	1

	<i>Very Useful</i>	<i>Quite Useful</i>	<i>Somewhat Useful</i>	<i>Not Useful</i>
Extent to which family sees problems as solvable	4	3	2	1
A desire by the youth to improve	4	3	2	1
A desire by the family to improve	4	3	2	1
<u>H</u>				
Ability of family members to cope with stress as evidenced by overcoming past obstacles	4	3	2	1
Perseverance (not giving up hope)	4	3	2	1
Family knowledge learned from previous assessments	4	3	2	1
Family skills learned from implementation of strategies	4	3	2	1
<u>I</u>				
Family involvement in the community	4	3	2	1
Successful experiences of client through activities such as school or scouting	4	3	2	1
Effective social skills of family	4	3	2	1
<u>J</u>				
Availability of transportation to family	4	3	2	1
Common sense of parents	4	3	2	1
Insurance plans able to be utilized by family	4	3	2	1
Willingness to provide some payment to help offset costs of FAPT	4	3	2	1
Willingness to comply with court orders	4	3	2	1
No prior involvement with delinquent behavior	4	3	2	1
No prior involvement with alcohol or drugs	4	3	2	1
Average to above average intelligence of family members	4	3	2	1
Athletic ability of the client	4	3	2	1



**Your Round 2
response has been
received. Thank you
for your contribution
for Virginia's youth
and families.**

**I hope to send a
follow-up soon.**

- Randl J. Spear

**{Sal} {First Name} {Last Name}, {Title}
{Agency}
{Address}
{City}, VA {Zip}**

**Tables From
Final Study**

Table 10: Categories Created from Literature-Review Family Strengths

A HIGH FAMILY VALUES/IDEALS

Teaches respect for others
Develops a sense of trust
Exhibits a sense of shared responsibility
Teaches a sense of right and wrong

B RELIGIOUS/SPIRITUAL VALUES

Shares religious core
Spiritual wellness
Religious orientation

C FAMILY DISCIPLINE/STRUCTURE

Commitment to family
Mutual respect for individuality
Clear definition of roles
Has a sense of play and humor
Strong sense of family in which rituals and traditions abound

D COMMUNICATION/TIME TOGETHER

Communicates and listens
Good communication
Communicates effectively
Quality and quantity family time
Spend time together
Balance of interactions among family members
Fosters table time and conversation
Shares leisure time

E SUPPORT OF INDIVIDUALS

Affirms and supports one another
Respects one another's privacy
Provision for support, security, and encouragement
Sensitive to family members' needs
Expressions of appreciation
Appreciation for each other
Encouragement of individuals
Commitment to each other

F STABILITY OF FAMILY UNIT

Provides for needs: spiritual, emotional, and physical
Performs family roles flexibly
Family unity, loyalty, and interfamily cooperation

G PROBLEM-SOLVING SKILLS

Admits to and seeks help with problems
Self-help and receiving help
Coping ability and growth

H CONSTRUCTIVE GROWTH

Ability to adapt
Grow with and through children
Growth from crisis and bad experiences
Growth producing relationships
Flexibility in child rearing and discipline

I COMMUNITY/SOCIETY

Values service to others
Constructive community relationships
Social connectedness

Table 11: *Edited Round 1 Family Strengths by Number*

No.	<u>Family Strength</u>
<u>A</u>	
1	A socially acceptable value system
2	Parents' commitment to keeping the family together
3	Competitive temperament of family members
4	Strong will; determination of family members
<u>B</u>	
5	Strong spiritual faith within the family
6	Religious orientation; reliance on faith or church
7	Any Christian ties that may be utilized
<u>C</u>	
8	Mutual respect among family members
9	Willingness to keep child at home or close to home
10	Effective parental disciplinary techniques
11	Ability of adults in the family to properly parent the child(ren)
12	Consistency of parenting techniques
13	Level of parental formal education
<u>D</u>	
14	Constructive communication among family members
15	Open communication among family members
16	Positive relationships among family members
17	Positive interactions among family members
<u>E</u>	
18	Sense of shared responsibility among family members
19	Sense of family unity among family members
20	Family loyalty to each other
21	Family regard for one another
22	Family commitment to the welfare of the child(ren)
23	Loving relationships among family members
24	Emotional bonds within the family
25	Availability of immediate family members for support
26	Availability of extended family members for support
27	Willingness to use immediate family members for support
28	Willingness to use extended family members as support
29	Supportive involvement of extended family
30	Evidence of a support system available to the family
<u>F</u>	
31	Emotional stability of parents
32	Financial stability of the family
33	Financial management skills of the family
34	Parental awareness of the limits of what the family can do for the client

Table 11: *Edited Round 1 Family Strengths by Number* continued

No.	Family Strength
35	Parental investment in the child's well-being
36	Evidence of a proper parent-child relationship
37	Positive attachment between parent(s) and child
38	Self-confidence of family members
39	Ego strength of family members
40	Parental ability to provide care for themselves
41	Parental ability to provide care for the family
42	Stable adult role models in the home
G	
43	Family members' understanding of the causes of the client's problem(s)
44	Parents' insight into the needs of their family
45	Parental ability to verbalize family needs at FAPT meeting
46	Parental initiative to seek services for help
47	Family access to needed resources for assistance
48	Family utilization of needed resources for assistance
49	Ability to pull resources from family, neighbors, or friends
50	Family willingness to take an active role in the development of a family intervention plan
51	Willingness to comply with interventions
52	Existing relationships with private counselors
53	Parental willingness to participate in counseling
54	Positive attitude of family members
55	Ability to manage aberrant behavior of child(ren)
56	Ability to communicate needs to service provider(s)
57	Parental capacity for therapy
58	Parental ability to make personal change
59	Parental openness to recommended changes
60	Extent to which family sees problems as solvable
61	A desire by the youth to improve
62	A desire by the family to improve
H	
63	Ability of family members to cope with stress as evidenced by overcoming past obstacles
64	Perseverance (not giving up hope)
65	Family knowledge learned from previous assessments
66	Family skills learned from implementation of strategies
I	
67	Family involvement in the community
68	Successful experiences of client through activities such as school or scouting
69	Effective social skills of family

Table 11: Edited Round 1 Family Strengths by Number continued

<u>No.</u>	<u>Family Strength</u>
J	
70	Availability of transportation to family
71	Common sense of parents
72	Insurance plans able to be utilized by family
73	Willingness to provide some payment to help offset costs of FAPT
74	Willingness to comply with court orders
75	No prior involvement with delinquent behavior
76	No prior involvement with alcohol or drugs
77	Average to above average intelligence of family members
78	Athletic ability of the client

Table 12: Means and Standard Deviations of Family Strengths Falling in the Upper Quartile by Respondent Group continued

‡	Juvenile Court Services (N=9)		Department of Health (N=8)	
	Family Strength *	Mean SD	Family Strength *	Mean SD
G: 50	Family willingness to take role in the intervention plan	3.78 0.4	C: 11 Ability of adults in the family to properly parent the child	3.88 0.3
G: 62	A desire by the family to improve	3.75 0.4	E: 22 Family commitment to the welfare of the child(ren)	3.88 0.3
C: 11	Ability of adults in the family to properly parent the child	3.67 0.5	G: 48 Family utilization of needed resources for assistance	3.88 0.3
E: 22	Family commitment to the welfare of the child(ren)	3.67 0.5	G: 50 Family willingness to take role in the intervention plan	3.88 0.3
F: 36	Parental investment in the child's well-being	3.67 0.5	G: 51 Willingness to comply with interventions	3.88 0.3
G: 59	Parental openness to recommended changes	3.67 0.5	G: 61 A desire by the youth to improve	3.88 0.3
J: 74	Willingness to comply with court orders	3.67 0.5	G: 62 A desire by the family to improve	3.88 0.3
A: 2	Parents' commitment to keeping the family together	3.56 0.5	J: 74 Willingness to comply with court orders	3.88 0.3
C: 12	Consistency of parenting techniques	3.56 0.5	G: 57 Parental capacity for therapy	3.83 0.4
D: 14	Constructive communication among family members	3.56 0.5	C: 8 Mutual respect among family members	3.75 0.4
F: 31	Emotional stability of parents	3.56 0.5	C: 10 Effective parental disciplinary techniques	3.75 0.4
F: 42	Stable adult role models in the home	3.56 0.5	C: 12 Consistency of parenting techniques	3.75 0.4
G: 51	Willingness to comply with interventions	3.56 0.5	D: 14 Constructive communication among family members	3.75 0.4
G: 58	Parental ability to make personal change	3.56 0.7	D: 16 Positive relationships among family members	3.75 0.4
C: 8	Mutual respect among family members	3.44 0.5	F: 31 Emotional stability of parents	3.75 0.4
C: 10	Effective parental disciplinary techniques	3.44 0.5	F: 36 Parental investment in the child's well-being	3.75 0.4
D: 16	Positive relationships among family members	3.44 0.5	F: 37 Positive attachment between parent(s) and child	3.75 0.4
D: 17	Positive interactions among family members	3.44 0.5	G: 53 Parental willingness to participate in counseling	3.75 0.4
E: 23	Loving relationships among family members	3.44 0.5	G: 56 Ability to manage aberrant behavior of child(ren)	3.75 0.4
E: 25	Availability of immediate family members for support	3.44 0.5	A: 2 Parents' commitment to keeping the family together	3.63 0.5
F: 36	Evidence of a proper parent-child relationship	3.44 0.5	D: 17 Positive interactions among family members	3.63 0.5
G: 61	A desire by the youth to improve	3.44 0.5	E: 23 Loving relationships among family members	3.63 0.5
			E: 25 Availability of immediate family members for support	3.63 0.5
			E: 30 Evidence of a support system available to the family	3.63 0.5
			F: 36 Evidence of a proper parent-child relationship	3.63 0.5
			F: 42 Stable adult role models in the home	3.63 0.5
			G: 47 Family access to needed resources for assistance	3.63 0.5
			G: 49 Ability to pull resources from family, neighbors, or friends	3.63 0.5
			G: 58 Parental ability to make personal change	3.63 0.5
			G: 59 Parental openness to recommended changes	3.63 0.5

Rating Codes: 4=Very Useful; 3=Quite Useful; 2=Somewhat Useful; 1=Not Useful

* Items 11 and 50 have been abbreviated to fit the table. ‡ Category and Number

Table 12: Means and Standard Deviations of Family Strengths Falling in the Upper Quartile by Respondent Group continued

Parent Representative (N=6)		Public Schools (N=11)	
‡	Family Strength *	Mean	SD
C: 8	Mutual respect among family members	3.83	0.4
F: 42	Stable adult role models in the home	3.83	0.4
G: 47	Family access to needed resources for assistance	3.83	0.4
G: 48	Family utilization of needed resources for assistance	3.83	0.4
E: 22	Family commitment to the welfare of the child(ren)	3.80	0.4
F: 35	Parental investment in the child's well-being	3.80	0.4
G: 54	Positive attitude of family members	3.80	0.4
G: 56	Ability to communicate needs to service provider(s)	3.80	0.4
G: 58	Parental ability to make personal change	3.80	0.4
G: 59	Parental openness to recommended changes	3.80	0.4
G: 61	A desire by the youth to improve	3.75	0.4
G: 62	A desire by the family to improve	3.75	0.4
H: 63	Family members cope by overcoming past obstacles	3.75	0.4
H: 64	Perseverance (not giving up hope)	3.75	0.4
C: 10	Effective parental disciplinary techniques	3.67	0.5
G: 44	Parents' insight into the needs of their family	3.67	0.5
C: 9	Willingness to keep child at home or close to home	3.67	0.7
C: 12	Consistency of parenting techniques	3.67	0.7
D: 14	Constructive communication among family members	3.67	0.7
D: 15	Open communication among family members	3.67	0.7
D: 16	Positive relationships among family members	3.67	0.7
D: 17	Positive interactions among family members	3.67	0.7
G: 50	Family willingness to take role in the intervention plan	3.82	0.4
G: 51	Willingness to comply with interventions	3.82	0.4
C: 8	Mutual respect among family members	3.73	0.4
C: 10	Effective parental disciplinary techniques	3.73	0.4
C: 11	Ability of adults in the family to properly parent the child	3.73	0.4
C: 12	Consistency of parenting techniques	3.73	0.4
D: 16	Positive relationships among family members	3.73	0.4
F: 31	Emotional stability of parents	3.73	0.4
G: 59	Parental openness to recommended changes	3.73	0.4
D: 15	Open communication among family members	3.64	0.5
G: 58	Parental ability to make personal change	3.64	0.5
G: 62	A desire by the family to improve	3.64	0.5
F: 35	Parental investment in the child's well-being	3.64	0.6
D: 14	Constructive communication among family members	3.55	0.5
A: 1	A socially acceptable value system	3.55	0.7
A: 2	Parents' commitment to keeping the family together	3.55	0.7
G: 61	A desire by the youth to improve	3.55	0.7
F: 42	Stable adult role models in the home	3.55	0.8
J: 74	Willingness to comply with court orders	3.50	0.7
E: 22	Family commitment to the welfare of the child(ren)	3.45	0.5
E: 23	Loving relationships among family members	3.45	0.5
G: 54	Positive attitude of family members	3.45	0.5

Rating Codes: 4=Very Useful; 3=Quite Useful; 2=Somewhat Useful; 1=Not Useful

* Items 11 and 50 have been abbreviated to fit the table. ‡ Category and Number

Table 13: Round 2 Upper Quartile Family Strengths by Item Number and Respondent Group																																		
Family Strength Category:	A		B		C		D		E		F		G		H		I		J		K		L		M		N		O					
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32		
Item Number:	1	2																																
Respondent Group																																		
Composite (N=70)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x		
Community A (N=9)																																		
Community B (N=16)																																		
Community C (N=5)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Community D (N=5)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Community E (N=3)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Community F (N=7)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Community G (N=17)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Community H (N=4)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Community I (N=4)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Total:	6	7	6	9	8	7	7	4	7	7	7	7	7	8	4	6	6	1	7	2	1	3	6	3	3	5	1	3	2	1	3	6	6	5
Juvenile Court (N=9)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Department of Health (N=8)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Social Services (N=14)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Community Services (N=9)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Parent Representative (N=6)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Public Schools (N=11)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Private Provider (N=7)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Other Public Agencies (N=6)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Total:	1	6	7	5	8	7	7	8	4	6	6	8	4	6	6	1	7	5	1	4	2	3	2	1	3	6	8	6	5					
Key:	x	An upper quartile item for the respondent group																																
	X	An upper quartile item unique for only one respondent group																																
	X	An upper quartile item unanimous for common respondent groups																																
	X	An upper quartile item unanimous for all 17 respondent groups																																

Table 13: Round 2 Upper Quartile Family Strengths by Item Number and Respondent Group continued

Family Strength Category:	F		G							H			J													
	41	42	44	47	48	49	50	51	53	54	55	56	57	58	59	60	61	62	63	64	66	70	71	74		
Respondent Group																										
Composite (N=70)		x					x	x						x			x									
Community A (N=9)		x					X	x									x									
Community B (N=16)		x					X	x									x								x	
Community C (N=5)		x					X		x								x								x	
Community D (N=5)							X	x						x											x	
Community E (N=3)							X	x						x											x	
Community F (N=7)							X			x				x											x	
Community G (N=17)		x					X																			
Community H (N=4)							X																			
Community I (N=4)		x					X																		x	
Total:	3	8	1	2	2	9	6	3	4	3	2	1	4	5	1	7	8	3	1	3	1	1	1	6		
Juvenile Court (N=9)	X					x	x							x			x								x	
Department of Health (N=8)	X					x	x							x			x								x	
Social Services (N=14)	X					x	x																			
Community Services (N=9)	X					x	x																			
Parent Representative (N=6)	X					x																				
Public Schools (N=11)	X					x																				
Private Provider (N=7)	X																									
Other Public Agencies (N=6)	X					x																				
Total:	8	1	3	2	1	6	5	2	3	2	1	1	4	4	2	7	8	1	3	1	3	1	1	4		
Key:	x	An upper quartile item for the respondent group																								
	X	An upper quartile item unique for only one respondent group																								
	X	An upper quartile item unanimous for common respondent groups																								
	X	An upper quartile item unanimous for all 17 respondent groups																								

Table 14: Number and Percentage of Upper Quartile Items by Category

UQ No.	Respondent Group	Family Strength Categories:															
		A		C		D		E		F		G		H		J	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
20	Composite	1	5	5	25	3	15	1	5	5	25	5	25	0	0	0	0
20	Community A	0	0	2	10	3	15	8	40	3	15	4	20	0	0	0	0
22	Community B	0	0	4	18	4	18	4	18	5	23	4	18	0	0	1	5
26	Community C	1	4	5	19	3	12	4	15	5	19	7	27	0	0	1	4
20	Community D	1	5	4	20	4	20	3	15	1	5	6	30	0	0	1	5
26	Community E	1	4	3	12	1	4	5	19	4	15	10	38	1	4	1	4
21	Community F	1	5	5	24	0	0	1	5	2	10	10	48	1	5	1	5
20	Community G	1	5	5	25	4	20	1	5	6	30	3	15	0	0	0	0
27	Community H	0	0	4	15	4	15	5	19	3	11	10	37	1	4	0	0
21	Community I	1	5	5	24	2	10	2	10	5	24	4	19	1	5	1	5
22	Rep. Area JC	1	5	4	18	3	14	3	14	4	18	6	27	0	0	1	5
30	Rep. Area DH	1	3	4	13	3	10	4	13	5	17	12	40	0	0	1	3
20	Rep. Area SS	1	5	4	20	4	20	3	15	5	25	3	15	0	0	0	0
27	Rep. Area CS	0	0	5	19	2	7	5	19	5	19	7	26	1	4	2	7
22	Rep. Area PR	0	0	4	18	4	18	1	5	2	9	9	41	2	9	0	0
22	Rep. Area PS	2	9	4	18	3	14	2	9	3	14	7	32	0	0	1	5
27	Rep. Area PP	1	4	5	19	4	15	8	30	5	19	3	11	0	0	1	4
20	Rep. Area OT	1	5	4	20	1	5	3	15	4	20	5	25	2	10	0	0

UQ No. represents the number of upper quartile family strengths for the respondent group. This number was extended beyond 20 for some respondent groups because the mean score or standard deviation for these items was tied with the 20th item.

Outlined cells indicate which category responses were 25% or more of the total upper quartile for that respondent group.

Rep. Area: Representative area letters designate the following:

- JC - Juvenile Court Services
- DH - Department of Health
- SS - Department of Social Services
- CS - Community Services

- PR - Parent Representatives
- PS - Public Schools
- PP - Private Provider
- OT - Other Public Agencies

Table 15: Family Strength Themes Derived from Common and Category Family Strengths

<p><u>Providing Proper Adult Leadership in the Home</u></p>	<p><u>Maintaining a Loving and Supportive Family Unit</u></p>
<p>(9) Willingness to keep child at home or close to home (10) Effective parental disciplinary techniques (11) Ability of adults in the family to properly parent the child(ren) (12) Consistency of parenting techniques (31) Emotional stability of parents (41) Parental ability to provide care for the family (42) Stable adult role models in the home (44) Parents' insight into the needs of their family (55) Ability to manage aberrant behavior of child(ren)</p>	<p>(8) Mutual respect among family members (21) Family regard for one another (23) Loving relationships among family members (24) Emotional bonds within the family (25) Availability of immediate family members for support (26) Availability of extended family members for support (27) Willingness to use immediate family members for support (28) Willingness to use extended family members as support (29) Supportive involvement of extended family (30) Evidence of a support system available to the family (54) Positive attitude of family members</p>
<p><u>Focusing on the Welfare of the Youth</u></p>	<p><u>Utilizing Resources and Assistance</u></p>
<p>(14) Constructive communication among family members (22) Family commitment to the welfare of the child(ren) (35) Parental investment in the child's well-being (36) Evidence of a proper parent-child relationship (37) Positive attachment between parent(s) and child (60) Extent to which family sees problems as solvable (61) A desire by the youth to improve (62) A desire by the family to improve</p>	<p>(47) Family access to needed resources for assistance (48) Family utilization of needed resources for assistance (49) Ability to pull resources from family, neighbors, or friends (50) Family willingness to take an active role in the development of a family intervention plan (51) Willingness to comply with interventions (53) Parental willingness to participate in counseling (56) Ability to communicate needs to service provider(s) (57) Parental capacity for therapy (58) Parental ability to make personal change (59) Parental openness to recommended changes</p>

Table 16: Family Strengths Not Found In Any Upper Quartiles

<u>No.</u>	<u>Family Strength</u>
<u>A</u>	
3	Competitive temperament of family members
4	Strong will; determination of family members
<u>B</u>	
5	Strong spiritual faith within the family
6	Religious orientation; reliance on faith or church
7	Any Christian ties that may be utilized
<u>C</u>	
13	Level of parental formal education
<u>E</u>	
18	Sense of shared responsibility among family members
<u>F</u>	
32	Financial stability of the family
33	Financial management skills of the family
34	Parental awareness of the limits of what the family can do for the client
38	Self-confidence of family members
39	Ego strength of family members
40	Parental ability to provide care for themselves
<u>G</u>	
43	Family members' understanding of the causes of the client's problem(s)
45	Parental ability to verbalize family needs at FAPT meeting
46	Parental initiative to seek services for help
52	Existing relationships with private counselors
<u>H</u>	
65	Family knowledge learned from previous assessments
<u>I</u>	
67	Family involvement in the community
68	Successful experiences of client through activities such as school or scouting
69	Effective social skills of family
<u>J</u>	
72	Insurance plans able to be utilized by family
73	Willingness to provide some payment to help offset costs of FAPT
75	No prior involvement with delinquent behavior
76	No prior involvement with alcohol or drugs
77	Average to above average intelligence of family members
78	Athletic ability of the client

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- Curriculum Vita -

- Associate of Liberal Arts and Associate of Science: 1975
Kellogg Community College
- Bachelors of Education: 1981
Liberty University
- Masters of Education, Administration and Supervision: 1985
University of Virginia
- Certificate of Advanced Graduate Studies; Educational Administration: 1994
Virginia Polytechnic Institute and State University
- Doctorate of Education; Educational Administration: May, 1996
Virginia Polytechnic Institute and State University
- Who's Who Among Students in American Universities and Colleges: 1981
- Teacher Of The Year: 1984
- Phi Kappa Phi Honor Society: 1995
- Who's Who Registry: 1995-96
- Association of Christian Schools International: Professional Teaching Certificate, Elementary;
Principal Endorsement
- Postgraduate Professional Certificate: 4-7 Elementary, General Mathematics, Secondary
Principal, Elementary Principal

- Teaching Experiences -

- Elementary School: * Remedial math, grades 1-6
 * Gifted math, grades 1-6
 * Math curriculum coordinator, grades 1-6

- Junior High School: * Math 7, Junior High School
 * Class sponsor, 7th grade
 * Math 8, Junior High School
 * Class sponsor, 8th grade
 * Pre-algebra, grades 7 & 8
 * Bible 7, Junior High School

- High School: * Math tutor, residents of Family Life Services Home
 * 9th grade Bible
 * 10th grade Bible
 * 11th grade Bible
 * Careers Class, grades 9-12

- School Administrative Experiences -

- Director of Guidance, Middle School (650+ students):
Second half of the school year was given the additional responsibilities of assistant principal
for 7th grade (230+ students)

- **Lead Assistant Principal, Elementary School, (660+ students):**
Principal's designee responsible for assisting the principal in all daily operations of the school including short range and long range planning, supervision of licensed and non-licensed staff, curricula design and implementation, accreditation review, and other related duties and responsibilities.

- Youth Related Experiences -

- **Outreach Detention Caseworker for Juvenile and Domestic Court:**
Individual and family counseling with documentation and recommendations for court disposition.
- **Consultant to a county public school system:**
Developed and implemented county-wide drug abuse program requiring needs assessment, student surveys, grant writing, community seminar, administration and faculty training. Worked in two high schools and one middle school counseling students and coordinating student, parent and community resources for student assistance program.
- **Developed, conducted and analyzed a number of school and county-wide assessments:**
- Parent satisfaction study
 - Teacher expectations versus student achievement
 - Meta-analysis of 13 successful high school drop out prevention programs
 - School assessment comparisons for standardized testing effectiveness
 - Identification and analysis of an effective school's policies and procedures
 - Assessment of state agencies' mandated compliance and implementation

- Philosophy of Life -

Matthew 7: 22-29:

Not everyone who says to Me, "Lord, Lord", shall enter the kingdom of heaven; but he who does the will of My Father in heaven.[see John 3:17] Many will say to Me in that day, "Lord, Lord, have we not prophesied in Your name, cast out demons in Your name and done many wonders in Your name?" And then will I declare to them, "I never knew you; depart from Me, you who practice lawlessness!"[see John 3:18-21] Therefore whoever hears these sayings of Mine, and does them, I will liken him to a wise man who built his house on the rock: and the rain descended, and the floods came, and the winds blew and beat on that house; and it did not fall, for it was founded on the rock. [see John 3:14&15] Now everyone who hears these sayings of Mine, and does not do them, will be like a foolish man who built his house on the sand: and the rain descended, and the floods came, and the winds blew and beat on that house; and it fell. And great was its fall.

And so it was, when Jesus had ended these sayings, that the people were astonished at His teaching, for He taught them as one having authority, and not as the scribes.

John 3:16: "For God so loved the world that He gave His only begotten Son, that whoever believes in Him should not perish but have everlasting life."

