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Crow Wing County Family Services Collaborative Service Worker Program Evaluation - A Parent's Perspective

Sandra Olson Larson

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Crow Wing County
Family Services Collaborative
Service Worker Program Evaluation –
A Parent's Perspective

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Submitted in partial fulfillment of
the requirement for the degree of
Master of Social Work

AUGSBURG COLLEGE
MINNEAPOLIS, MINNESOTA

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MASTER OF SOCIAL WORK
AUGSBURG COLLEGE
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ABSTRACT

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An evaluation of the Collaborative Service Worker Program from the parent's perspective was completed using a mixed method survey design. A sample of 202 families was drawn from referrals made to the Collaborative Service Worker Program in the past 18 months to receive a self-administered questionnaire. Results show that parents see this early intervention in a respectful, non-governmental based manner as beneficial to both the child and their families. The evaluation of the effectiveness of the Collaborative Service Worker Program added to the body of knowledge supporting the success of early intervention with "at risk" children and families and provided direction for a developing program.

TABLE OF CONTENTS

Acknowledgements.....	iii
Abstract.....	iv
Table of Contents.....	v
List of Tables.....	vii
List of Appendices.....	ix
CHAPTER ONE: STATEMENT OF PROBLEM	
Overview of the Problem.....	1
Current Situation.....	1
Purpose of Research.....	2
Significance of Research.....	3
Research Question.....	3
CHAPTER TWO: REVIEW OF THE LITERATURE	
Overview.....	4
Historical Background.....	5
System and Individualized Services.....	7
Theoretical/Conceptual Framework.....	15
Gaps in the Literature.....	17
Conclusion.....	17

CHAPTER THREE: METHODOLOGY

Overview.....	19
Research Question.....	19
Definition of Relevant Terms	19
Research Design.....	21
Conceptual/Operational Definitions.....	22
Study Participants.....	22
Sampling Procedures.....	22
Measurement Issues.....	23
Instrument Design.....	24
Data Collection.....	24
Data Analysis.....	25
Protection of Human Subjects.....	25
Conclusion.....	26

CHAPTER FOUR: PRESENTATION OF RESULTS

Response Rate	27
Demographics.....	27
Program Information.....	29
Satisfaction.....	32
Results of Involvement.....	35
Program Effectiveness.....	39
Conclusion.....	39

CHAPTER FIVE: DISCUSSION, LIMITATIONS AND SUMMARY

Discussion.....	41
Limitations.....	45
Conclusion.....	46

APPENDICES

REFERENCES

List of Tables

Table 1.....	Relationship to Child.....	Page 27
Table 2.....	Children Served.....	Page 28
Table 3.....	Referral Source.....	Page 29
Table 4.....	Length of Program Involvement.....	Page 30
Table 5.....	Location of Interactions	Page 31
Table 6.....	Services Were Easy to Access.....	Page 32
Table 7.....	Worker Provided Information About Resources... ..	Page 32
Table 8.....	Ability to Apply Information to Situation.....	Page 33
Table 9.....	Respondent Satisfied with Worker Relationship... ..	Page 34
Table 10.....	Felt Included as Team Member.....	Page 34
Table 11	Felt Actively Involved in Decision Making.....	Page 35
Table 12.....	Relationship with Child Improved.....	Page 35
Table 13.....	Child's Behavior at School Improved.....	Page 36
Table 14.....	Child's School Attendance Improved.....	Page 37
Table 15.....	Would Access Services Again.....	Page 37
Table 16.....	Would Recommend Services.....	Page 38
Table 17.....	Perceives Program as Effective.....	Page 39

List of Appendices

Appendix A – Parent Satisfaction Survey

Appendix B – Consent/Introduction Letter

Appendix C – Follow up Letter

Chapter One – Statement of Problem

Overview

Currently, families experiencing multiple problems are required to interact with several agencies when seeking help. Although there are many quality service providers in our communities, accessing these services is not always an easy task.

Current Situation

The Crow Wing County Family Service Collaborative is made up of community partners that include representatives from all 3 school districts in Crow Wing County, Crow Wing County Health Services, Crow Wing County Social Services, Community Corrections, Tri-County Headstart, Children's Mental Health Local Advisory County and a parent representative. The Collaborative Service Worker Program is an early intervention initiative sponsored by the Crow Wing County Family Service Collaborative, designed to assist families in innovative ways to improve family functioning in an effort to avoid a referral to child protection services.

Collaborative services ideally are family focused and consumer driven. They are flexible, comprehensive and involve major stakeholders who address the problems and solutions children and families face (Aguirre, 1995). These services must reflect a balance between

prevention, early intervention and protection of vulnerable high-risk populations.

Crow Wing County representatives started meeting in the early 1990's, receiving a planning grant in January, 1994 and were officially recognized as a Family Service Collaborative in 1996. The Collaborative has worked through many obstacles ranging from shifts in political philosophy to loss of key supporters. The progress has been slow but steady. Leaders at all levels are committed to a vision of seamless service delivery for children and families in our county that is respectful, choice based and strengthens and empowers all families. The Family Services Collaborative is designed to be an effective way of working together while still keeping the separate identities of the organizations involved. The groups come into a new structure with full commitment to the common mission of helping children and families of Crow Wing County.

Purpose of Research

The purpose of this study is to examine the effectiveness of the Crow Wing County Collaborative Service Worker Program from the parent's perspective. The findings will add to the existing body of knowledge regarding the effectiveness of collaborative efforts in early intervention activities with families and children at risk.

Significance of Research

The findings of this study will assist the Crow Wing County Family Services Collaborative in their effort to provide direction for the future of the Collaborative Service Worker Team. It will provide the necessary data for reports mandated by the Department of Children, Families and Learning. The study will also add to the existing body of knowledge on the significance of early intervention activities delivered to families in a collaborative approach.

Research Question

This study will address: 1) What are the strengths and weaknesses of the Collaborative Service Worker Program from the perspective of families utilizing services?; and 2) Do families perceive these services as effective in meeting their children's needs?

Chapter Two – Review of Literature

Overview

As resources become increasingly scarce, human service organizations are compelled to confront a long-standing problem – the lack of coordination among agencies (Hasenfeld, 1983). Good teamwork is an essential component of effective social work delivery and an integral ingredient of many aspects of social work practice (Iles & Auluck, 1990). In this Chapter, a review of the existing literature will be discussed, with a focus on the definition of terms, the historical background, and themes in the strategies of early intervention activities that use collaboration as their framework.

Out of concern for the well being of families and children with multiple problems, schools and human service organizations are beginning to direct more attention to the concept of collaboration (Adelman, 1996). Traditionally, human service organizations and school systems have coexisted in almost every community. Increasingly, schools and human service providers are being offered incentives to work together to fill the gaps in service, reduce duplication and make services more accessible (Greenberg & Levy, 1992).

Through community meetings, the Crow Wing County Family Services Collaborative has identified three broad outcomes as their primary focus. These are: all children and families are healthy and well

nourished; families and communities provide a safe and stable environment for all children and youth; and children and youth make academic progress and achieve competencies in school. They have also identified five indicators to use as measurement tools to assess achievements. These are: rate of teen pregnancy (younger than 18 years old); number and proportion of children placed in out-of-home settings; percent of children who are immunized on an appropriate schedule; rate of school attendance; and rate of students dropping out of school.

The Collaborative Service Worker Program is an early intervention program developed to impact the identified outcomes. The findings suggest that the program is focusing primarily on one outcome. That outcome is to help children and youth make academic progress and achieve competencies in school.

Historical Background

Historic figures like Mary McDonald and Jane Addams were instrumental in early efforts at providing socialization and pre-education experiences for young children, building rapport with the parents, and providing parents with support (Trattner, 1979). Jane Adams and Hull House staff “promoted family-centered education and supports along with occupational and cultural preservation activities” (Bair-Lawson et al., 1997, p.138).

Around the turn of the century, the first workers, known as visiting teachers, recognized the importance of their role in linking the school with the home. This person provided support to the family by assisting them with access to available services in the community. The visiting teacher promoted school attendance as well as aided the parents (who frequently were immigrants that spoke little or not English) in understanding the public school system and other vital resources available to needy families in the neighborhoods. This was thought to be a way to promote social change regarding the conditions that poor families were faced with and the school policies that were adversely affecting the lives of children (Allen-Meares et al., 1986).

“School-linked integrated services are necessary to improve the education, health, mental health and social outcomes for children and their families” (Aguirre, 1995, p.221). In order to make the necessary changes in the system, all community members, including students, parents, businesses, human service providers, educators and legislators need to fully participate (Franklin & Streeter, 1995; Jehl & Kirst, 1992; Langford-Carter, 1994; Rossi & Stringfield, 1995). School linked programs to meet the social and emotional needs of students have been developing as a part of the trend of the 1990’s. This reflects the growing development of links between the schools, social services, mental health agencies and public health agencies (Adelman & Taylor, 1997; Lee, 1998).

System and Individualized Services

Creating a truly comprehensive system of individualized services entails building stronger alliances within the community, integrating multiple child and family services and ensuring that these services are responsive to the needs of children and families from a variety of cultural and ethnic backgrounds (Buysse, Wesley, & Skinner, 1999). Well-developed antisocial behavior patterns and high levels of aggression evidenced early in a child's life are among the best predictors of delinquent and violent behavior years later (Fagen, 1996; Hawkins & Catalano, 1992). Statistics suggest continuing growth in the rates of juvenile violence unless trends can be offset through a coordinated plan of prevention, early intervention and graduated sanctions (Walker, Irvin, & Sprague, 1997).

Collaboratives

Throughout the United States, collaboratives in human services have seen resurgence in popularity (Bardach & Lesser, 1996; Green, Mulvey, Fisher, Woratschek, 1996; Harbert, Finnegan & Tyler, 1997). One of the most significant developments for the well being of children and families is the effort occurring at levels of governance – to link education, health, social services and other supports that children need. Most often the school is the hub or at least, one necessary component. Not only is this an efficient way of delivering services, but it also affirms that children

are a part of families and families are a part of communities (School Linked Services, 1994).

The presence of collaboratives may be due to the renewed focus on strength-based approaches to human services. Collaboratives use existing agencies strengths to meet the needs of a community, rather than creating additional service providers (Barton, Watkins, & Jarjoura, 1997; Harbert et al., 1997). Partially, the rise in collaboratives may be due to the trend of reducing government spending; collaboratives are a means of reducing government involvement while continuing to support human service efforts (Bardach & Lesser, 1996). Perhaps the current rise in collaboratives is a response to environmental uncertainty (Meyers, 1993). This environmental uncertainty (changing funding, unpredictable client referrals, shifting demands for service and accountability, etc.) present today due to shrinking government and funding streams is a partial explanation for the focus on collaboration. Regardless of the reasons for their resurgence, their relatively recent presence in human services raises the question of their effectiveness (Bardach & Lesser, 1996).

The mission of the Crow Wing County Family Services Collaborative is to be an accountable partnership uniting families, schools, local government and community agencies empowering children and families to meet their needs as independently as possible within a healthy and productive county-wide community. Their vision is that by the year 2005,

Crow Wing County Family Services Collaborative will have in place for children and families; sustainable integrated funding, a simple, productive infrastructure, inclusive, innovative, strategic decision making process, results-driven accountability, "out of the box" thinking and open internal and external communication.

Early Interventions

Melaville, Blank and Asayesh (1993) state that an estimated 25% of the student population K – 12 is at risk of failing at school and later in life. Investigators suggest that the completion of school had direct and measurable outcomes with regard to the ability for young people to provide for themselves and their families in the future (Allen-Meares, 1990; Cervea, 1990; Melaville et al., 1993; Pennekamp, 1992).

There maybe many possible reasons that children fail. Battistich, Solomon, Kim, Watson and Schaps (1995) have identified predictors of dropping out of school that include poor school attendance, grade retention, poor academic achievement, behavior problems, low socioeconomic status (SES) and enrollment in schools with a high proportion of poor children. Frequently unmet needs of the family create conditions that contribute to a child's struggle to succeed. Issues such as personal and family stress, economic and cultural issues, health concerns, social and emotional health needs and legal complications all detract from a child's ability to thrive. Schools are witnessing the effects of these

stresses in the form of pregnancy, drug abuse, suicide, violence and varying emotional disorders. Many children and youth also experience isolation and exhibit a general sense of disregard for others (Chavkin & Brown, 1992).

Early-intervention programs developed for children at risk can have immediate and long-term success in helping children have positive school experiences, in building stronger self-esteem and in reducing the risk dropping out of school (Manning & Baruth, 1993). Baker (1992) asserts that studies have demonstrated prevention models focused on at-risk children have been shown to be effective when implemented at the preschool/elementary level. Bronfenbrenner (1979) wrote that “intervention programs that place major emphasis on involving the parent directly in activities fostering the child’s development are likely to have a constructive impact at any age, but the earlier such activities are begun and the longer they are continued, the greater the benefit to the child”.

The traditional system of established child services is often fragmented and confusing for families to access and school personnel alone are ill equipped to handle their problems (Kirst, 1991). Often services are available in the community to meet the needs of the family; but for a variety of reasons, these services are not being accessed by those in need. Families seeking services for multiple problems are often unable to access and use all the services available. In addition, these

families usually do not possess the skills necessary to coordinate the individual goals and treatment strategies recommended by the agencies (Bruner, 1992).

National Trends

The provision of integrated services represents a promising trend in a number of states, offering a coordinated approach to serving the needs of youth at risk and their families (Larson, Gomby, Shiono, Lewit, & Behrman, 1992). There is no one best model of an integrated service, but successful programs seem to have the following criteria: They are family focused, designed to meet community needs, and oriented toward prevention (Robinson, 1990). They also try to avoid duplication of services through the collaboration of the school staff and community service providers (Dryfoos, 1994).

Support for initiatives by federal agencies and foundations underscores the interest in exploring approaches. The U.S. Department of Justice's Office of Juvenile Justice and Delinquency Prevention provides support for the SafeFutures initiative. A federal interagency partnership, including the U.S. Departments of Commerce and Health and Human Services and Office of Juvenile Justice and Delinquency Prevention, supported Communities in Schools. The Annie E. Casey Foundation funded the New Futures initiative in five cities. A consortium of foundations, trusts and other organizations including two Department of

Justice agencies and the Office of Juvenile Justice and Delinquency Prevention supports the Children at Risk initiative. Another community-based collaboration supported by the Bureau of Justice Assistance is the Comprehensive Communities Program (Morley & Rossman, 1997).

Leaders in the implementation of collaborative initiatives around the country include Pennsylvania with the New Futures Project; New Jersey's School Based Youth Services Program; The Healthy Start Program in California and the state of Florida put collaboration in law.

Pennsylvania

In Pittsburgh, as part of the New Futures Project, which the Casey Foundation established, schools are cooperating to assist students at risk (Bucci & Reitzammer, 1992). Personnel involved are public school staff, health and social service providers, community and religious representatives, corporation leaders and foundation staff (Center for the Study of Social Policy, 1989). Through a case management system, case managers provide information to schools and service providers to help reduce the gaps and obstacles to the delivery of services. A case manager's role is unique in that it is responsible not for the delivery of services but rather for assessments, referrals, and service outcomes. Thus changes in the services provided to "at risk" children can be made more efficiently due to the greater amount of scrutiny each child receives. This project is designed to cross the traditional lines between schools,

nonschool institutions, neighborhoods and families. Much of the project activity takes place in the school, with the expectation that teachers and other school personnel will develop a closer working relationship with all other agency personnel.

New Jersey

The New Jersey Department of Human Services has developed models of integrated services at school sites entitled "The School Based Youth Services Programs", which are implemented at sites throughout the state (Levy & Shepardson, 1992). The state did not impose a single design, but rather required each of the sites to offer at least a core set of services and to operate during the school day, and also after school, weekends and vacations. The core services include mental health and family counseling, summer and part-time job development, academic counseling and referral to other health and social services not available on site. Recreation is offered by each site as a way to attract youth. Some sites offer other services, such as day care, services for teen parents, special vocational programs, family planning, transportation and hot-lines (Levy & Shepardson, 1992).

California

In 1991, the state of California established an integrated school services program called "Healthy Start" (Newman, 1995). Funds are given to schools for the development of collaborative agreements between the

schools, health and social services in California communities (Dryfoos, 1994). The initiative assumes that educational performance can be improved not through addressing students' educational needs directly, but also through meeting other needs that present barriers to learning, such as poor health, being hungry, or experiencing family stresses (Newman, 1995). The Healthy Start Support Service for Children Act authorized grants to local schools and public and private organizations, who collaborate, to implement strategies to integrate services for children and families which would be provided at or through the schools. The ultimate goal of this collaboration of resources is to ensure that children, youth and families receive the services that they need to improve the outcomes of "at risk" children (Newman, 1995). Healthy Start reflects the view that " a community must develop and approach and tailor program design to capitalize on its unique combination of need and expectations" (Levy & Shepardson, 1992, p 51).

Florida

In Florida, legislation was passed that requires the State Board of Education and the Department of Health and Rehabilitation to jointly establish programs to serve high-risk students in need of medical and social services. Among the services provided are nutritional services, basic medical services, assistance in applying for public benefits, parenting skills, counseling for children and adult education. The range of

services reflects the needs of local communities and schools (Dryfoos, 1994). School districts with a high incidence of medically under-served children, low-birth-weight babies, infant mortality or teen pregnancy were targeted as having the greatest priority (Dryfoos, 1994).

This full service concept provided an incentive for Florida schools and social service agencies to develop more Interagency Collaborative Initiatives located in schools. In 1994 more than \$30 million was spent on collaborative school-based projects of varying service mixes. The expectation is that all Florida schools will be full-service with the gradual additions of childcare, vocational educations and mental and other health services (Dryfoos, 1994).

Theoretical / Conceptual Framework

The rising interest in service integration coincides with a shift of focus in organizational theory from intra- to inter-organizational issues. The theoretical approaches differ a lot in comprehensiveness, consistency and generality. The social service community has identified collaboration as the primary strategy for addressing system delivery problems (with service integration as the goal). Research suggests that building collaboration is a highly complex task that involves the application of wisdom from the disciplines of political theory, organizational theory and behavior, small group theory, leadership, administration, dispute

resolution, adult education, program evaluation and technology assessment as a start (O'Looney, 1994).

Since children, families, neighborhood and communities have needs that are interdependent, an ecological perspective encourages change strategies that will be supportive and empowering for families, neighborhoods and community organizations (Bair-Lawson et al., 1997).

The shift in the level of analysis from a single to a collection of organizations is completed in the population-ecology theory. The emphasis is on a population of organizations, which means that they; share a common dependence on the material and social environment; have a similar structure and their structure and other characteristics are quite stable over time (Hannan & Freeman, 1988). Hasenfeld (1992) asserts the theory is concerned with three fundamental issues; rates of organizational founding, disbanding and change in a given population. Within these cycles we observe the rise of new organizational forms followed by a period of stagnation or inaction. Population ecology attempts to account for these patterns.

An ecological perspective also provides a framework that encourages looking at strengths and the positive capacities of children (Kilpatrick & Holland, 1999). The ecological model suggests that interaction between individuals and their environments is a constant process of adaptation. When an individual interaction with the environment

results in opportunities for enhancement of competence, self-reliance, and growth, adaptation is possible and there is a “goodness of fit” between the individual and the environment (Germain, 1979). According to Bronfenbrenner (1979) and others, good fit produces good outcomes. In contrast, poor fit between the individual and his or her environment weakens the adaptation process and poor outcomes are observed (Germain, 1979, 1991). Understanding the relationship within the environment provides a tool for connecting the family, the school and the community for mutual support.

Gaps in Literature

The effectiveness of collaboration is easily measured in a corporate, quantitative setting but becomes more difficult when dealing with human beings and the subjectivity of quality of life issues. Longitudinal studies are essential in the effort to evaluate collaborative early intervention programs.

Conclusion

Collaboration is a process to reach goals that cannot be achieved acting singly (or at a minimum, cannot be reached as efficiently). As a process, collaboration is a means to an end, not an end in itself. The desired end is more comprehensive and appropriate services for families that improve family outcomes (Bruner, 1991). Research suggests that Collaboratives goal is service integration in an effort to reduce

duplication, foster family driven service plans, encourage and teach independence across generations often using early intervention school-linked services.

Chapter Three – Methodology

Overview

This chapter reviews the study's research question and design, conceptual and operational definitions, describes the study participants, sampling procedures, measurement issues, instrument design, data collection and analysis and protection of human subjects.

Research Question

What are the strengths and weaknesses of the Collaborative Service Worker Program from the perspective of families utilizing services? Do families perceive these services as effective in meeting their children's needs?

Definition of Relevant Terms

Interorganizational collaboration - Bryson and Einsweiler (1991) have labeled interorganizational relationships according to the level of coordination. The categories include micro relationships or linkages. These can be both informal and formal. Meso-models are distinguished by having some type of structure. This could be as simple as having an identified coordinating unit. Macro-models are more evolved than meso-models and are more action/implementation oriented. The highest level of coordination is the meta-strategies models identified by Bryson and Einsweiler (1991) to characterize the coordination related behavior or structure of interorganizational fields or systems.

In contrast of totally structural model, Bailey and McNally-Koney (1996) identify 8 inter connected core components: leadership, membership, environmental linkages, strategy, purpose, tasks, structure and systems that are essential in developing interorganizational collaboration. A change in one component creates corresponding challenges in other components. Therefore, it is imperative that workers understand the components individually but assist in focusing appropriate attention on acknowledging the inter-dependence among all 8 of them. All of the concepts mentioned above are being used throughout the education and human service fields in effort to provide the best possible services. However, as the needs of families and children are becoming more complex, the solutions must also become more sophisticated and interrelated.

Family Services Collaborative Service Worker Team - is an initiative by Crow Wing County Family Services Collaborative designed to inform families of formal and informal services available to them in the community, to provide group and individual skills training to children and their families, to assist in crisis situations and work closely with school staff to help provide resources and strategies that assist them in meeting the needs of children and families. The team currently consists of a group of 11 professionals housed in Crow Wing County elementary and middle schools and 1 team coordinator. This coordination of services in the school

and community increases student's readiness to learn and improve family participation and satisfaction with the school system.

Children at risk - are those children not expected to graduate from high school and those expected to leave school with an inadequate level of basic reading, math, problem-solving skills and interpersonal skills.

School-linked services – are those services operated in the school, owned by the school, or by a community-based organization or owned by both (Adelman & Taylor, 1997).

Research Design

The study is a survey design using a mixed method with both quantitative and qualitative data. By combining qualitative research methods with survey research methods there is a benefit from the strengths of survey research while offsetting its weaknesses regarding superficiality, missing social context, inflexibility, artificiality and questionable validity (Rubin & Babbie, 1997).

Self-administered surveys make large samples feasible. They also permit anonymity and privacy to encourage more candid responses on issues. Because surveys make large samples feasible, their findings may be more generalizable. This advantage in external validity, however, is offset by the limited internal validity of surveys, particularly cross sectional surveys. Surveys do allow for the analyzing of multiple variables simultaneously (Rubin & Babbie, 1997).

Conceptual/Operational Definitions

The dependent variables in this study are the child's relationship with parent or guardian, the child's behavior at school and the child's school attendance. The independent variable is the child's involvement with the Collaborative Service Worker. The program evaluation variables are access to services, information about community resources, satisfaction of relationship with Collaborative Service Worker, parent or guardian feeling like a team member and being involved in the decision process regarding services provided to their child. This study is based on the perceptions of the parent or guardian. Perceptions are defined as; attitudes, beliefs and satisfaction about the services provided.

Study Participants

A sample of 202 families was drawn from referrals made to the Collaborative Service Worker program in the past 18 months. Those families selected were mailed a self-administered questionnaire with a self-addressed return envelope.

Sampling Procedures

The Collaborative Service Workers identified 202 families that had three or more contacts with a Collaborative Service worker in the past 18 months. The Collaborative Service Workers addressed the envelopes that contained the cover letter, questionnaire and self-addressed stamped envelope to these identified families.

Measurement Issues

It is important to understand how overall evaluation validity differs from the usual more narrow conception of validity in scientific research. Validity is usually focused entirely on data collection procedures, design and technical analysis, that is, whether measures were valid or whether the design allows drawing inferences about causality. An evaluation is perceived as valid in a global sense that includes the overall approach used, the stance of the evaluator, the nature of the process, the design, data gathering and the way results are reported (Patton, 1997).

Another means to assess the validity and reliability of the instrument was suggested by Henerson et al. (1987). As each question will be reported "question-by-question", each one will represent an "individual measure" of an attitude, and an instrument in itself. A few items, which aim at gauging the same attitude within a single instrument, can be combined to form an index of an attitude. Thus, the level of satisfaction with the services provided by the Collaborative Service Worker Program was combined into an index for 'satisfaction', this index could then be compared or perhaps correlated with the respondents performance on the other measures which are indicative of the same attitude, or degree of satisfaction. Additionally, the open-ended responses were coded and used to corroborate and add dimension to the closed-ended response patterns.

Instrument Design

The questionnaire was developed and written based on an understanding of the literature by the researcher conducting this study. The questions were developed to get information on the strengths, weaknesses and effectiveness of the Collaborative Service Worker Program. The Collaborative Service Worker program coordinator and the researcher's thesis advisor reviewed the questionnaire. The questionnaire was then pre-tested on eleven colleagues and fellow MSW students for ease of completion and an attempt to reduce any human service jargon. The pre-test subjects were also asked for their reactions to the survey as a whole, hoping to identify areas that were ambiguous, or were perceived as offensive. Through the Microsoft Office Suite, readability statistics, using the Flesh-Kincaid Grade Level assessment the language used in construction of the questions was comprehensible at a sixth grade level.

Data Collection

A self-administered questionnaire using a Likert type scale and two open-ended questions was used to collect the data. The written questionnaire along with a cover letter was mailed to 202 families selected from referrals made to the Collaborative Service Worker program in the past eighteen months. Respondents were asked to complete their survey and return within 10 calendar days in the stamped envelope provided. A follow-up letter, another copy of the questionnaire and

another stamped envelope was mailed four weeks later. Respondents were again invited to fill out and return questionnaire if were unable to complete the first mailing.

Data Analysis

Upon receipt of a returned survey a number was assigned, which was used to identify a particular respondent throughout the analysis process. Findings are presented in a question-by-question format and illustrated with tables and figures in the following chapter. Descriptive statistics were used to analyze the quantitative data and content analysis was conducted on the open-ended question on the survey questionnaire.

To conduct the content analysis, the responses for the open-ended question were indexed and then subdivided according to key themes, patterns and categories that emerged from the data.

Protection of Human Subjects

An application was submitted to Augsburg Institutional Review Board (approval # 2001-13-1). The potential participants were asked to voluntarily participate in the research project and recruited through a cover letter attached to the questionnaire. They were given the option of not responding if they had reservations about participating. In order to assist with anonymity, participants were not asked their name, only their gender and relationship with the child/children. The surveys were not numbered or marked in any way that would identify them from one

another. This was done to eliminate potential participant concerns that responses can be tracked back to them. The raw data will be destroyed at the end of the research project.

Conclusion

This chapter addressed the study design and methods employed to conduct this study. In the next chapter, findings are presented.

Chapter Four – Presentation of Results

Response rate

Two hundred and two surveys were mailed out to families involved with the Collaborative Service Worker Program. Fifty-two surveys were returned a response rate of 25.7%. Rubin and Babbie (1997) state as a rule of thumb a response rate of at least 50% is usually considered adequate for analysis and reporting. A response of at least 60% is good. And a response rate of 70% is very good. However, these are only rough guides; they have no statistical basis, and a demonstrated lack of response bias is far more important than a high response rate.

Demographics

Who are the families served by the Collaborative Service Worker Program?

Table 1.

Count		Relationship to child	
		gender	
		male	female
Relationship to child	parent	5	38
	step-parent		1
	grandparents	1	4
	other	1	2
Total		7	45

All respondents except one were related to the child. The relationship most often reported was parent. Eighty percent (n=52) of the study participants described themselves as parents. Other relationships included aunts, uncles, grandparents and great-grandparents.

Who are the children the Collaborative Service Worker Program serves?

Table 2.

Count	Children served		
	Children		Total
	male	female	
grade 1	4	4	8
grade 2	3	2	5
grade 3	2	4	6
grade 4	4	6	10
grade 5	2	5	7
grade 6	2	1	3
grade 7	2		2
grade 8	2		2
grade 9	1	1	2
grade 10		1	1
kindergarten	3	3	6
Total	25	27	52

The Collaborative Service Worker Program is currently designed to serve children in elementary, middle and junior high school grades. The

study found grade 4 was the most frequently reported at 19%, with first grade the next highest at 15%, closely followed by fifth grade at 13%. All grades were represented in the study with six kindergarten children and one tenth-grader.

Program information

Who informs families about the Collaborative Service Worker Program?

Table 3.

Referral Source		
	Frequency	Percent
Teacher	20	38.5
Other	14	26.9
County social worker	9	17.3
Principal	6	11.5
No answer	3	5.8
Total	52	100.0

Just fewer than forty percent (n=52) of referrals came from classroom teachers. Nearly 27% of referrals came from other sources such as school counselors, Special Education professionals, mental health professionals and self-research. County social service agencies referred just over 17% of respondents, with school principals following with slightly over 11%.

How long are families involved with the Collaborative Service Worker Program?

Table 4.

Length of involvement with program

Count		How long involved with Collaborative Worker			
		up to one month	between one and three months	between three and six months	other
Grade of child	grade 1		4	1	3
	grade 2		1	2	2
	grade 3		1	3	2
	grade 4	1		2	7
	grade 5	2	2		3
	grade 6	1	1		
	grade 7	1		1	
	grade 8		1		1
	grade 9			1	1
	grade 10				1
	kindergarten		2	1	3
Total		5	12	11	23

Families reported being involved with the Collaborative Service Worker Program from as little as two weeks to as long two years. Twenty-two percent responded they were involved between one and three months. A participant wrote, "Provide summer activities/involvement to keep child on track, or just so child still felt "connected" with the worker.

Where do interactions with Collaborative Service Worker occur?

Table 5.

Count		Location of interactions		
		Met most often with Collaborative Worker		
		school	your home	other (restaurants, phone, etc)
Met first with Collaborative Worker	school	29	1	2
	your home	1	8	2
	social service agency		1	
	other	1	1	5
Total		31	11	9

Interactions with the Collaborative Service Worker took place most often in schools. Fifty-nine percent (n=52) met with the worker at school first, of those, 91 percent continued to meet most often at school. The most often reported “other” were phone calls between workers and study participants.

Satisfaction with services

Table 6.

Easy to access		
	Frequency	Percent
Agree	46	88.5
Disagree	3	5.8
Doesn't apply	2	3.8
No answer	1	1.9
Total	52	100.0

Most families agreed that services were easy to access. Over eighty-eight percent (n=52) thought services were accessible without difficulty. One participant wrote, "It started off working well then into the program the worker took a different job and I have not been notified of anew one and when they will be starting."

Table 7.

Worker provided information about resources		
	Frequency	Percent
Agree	39	75.0
Disagree	7	13.5
Doesn't apply	5	9.6
No answer	1	1.9
Total	52	100.0

The majority of the families agreed that they were provided with community resources. Three-quarters (75%) of the families surveyed agreed the worker informed them about resources. One participant wrote; "I never realized how much more the schools can help families until the Collaborative Worker told us our rights and all the programs out there." Another remarked, "Please let us know of any training, videos, etc if possible."

Table 8.

Able to apply information to family situation		
	Frequency	Percent
Agree	40	76.9
Disagree	6	11.5
Doesn't apply	4	7.7
No answer	2	3.8
Total	52	100.0

Nearly all families agreed they were able to use the information learned from the worker. Roughly seventy-seven percent (n=52) agreed they were able to apply information learned to their family situation. Slightly more than 10% felt they could not apply the information. "I never realized how helpful the worker could be until now. They helped me find a counselor for my family and gave several options to help improve our family situation" acknowledged one respondent.

Table 9.

Respondent satisfied with worker relationship		
	Frequency	Percent
Agree	46	88.5
Disagree	2	3.8
Doesn't apply	3	5.8
No answer	1	1.9
Total	52	100.0

On the whole study participants were satisfied with the relationship with their worker. Not quite ninety percent agreed their relationship was satisfactory. “ I feel the worker is doing all they can for us. I am grateful for the worker”, commented a respondent.

Table 10.

Felt included as team member		
	Frequency	Percent
Agree	47	90.4
Disagree	1	1.9
Doesn't apply	2	3.8
No answer	2	3.8
Total	52	100.0

Most study participants felt included as a member of their child's team. Ninety percent (n=52) of respondents agreed they felt a part of the

team. One participant did suggest more updates, progress reports and including parents in sessions when appropriate.

Table 11.

Felt actively involved in decision making		
	Frequency	Percent
Agree	44	84.6
Disagree	4	7.7
Doesn't apply	3	5.8
No answer	1	1.9
Total	52	100.0

Nearly all families felt they were actively involved in the decision making process for their child. Just under eighty-five percent (n=52) of respondents agreed they felt actively involved in the decision-making process regarding services provided to their child. One study participant did write, " Don't assume what the family wants, ask the family."

As a result of involvement with the Collaborative Service Worker Program

Table 12.

Relationship with child improved		
	Frequency	Percent
Agree	37	71.2
Disagree	7	13.5
Doesn't apply	6	11.5
No answer	2	3.8
Total	52	100.0

Families felt that the relationship with their child had improved. More than seventy percent (n=52) agreed the relationship with their child had improved. A participant contributed, "It improves relationship between parent and child, addresses needs of the child, improves communications with child and parent". " With the grandson participating in the program, he is easier to talk to", observed a respondent.

Table 13.

Child's behavior at school improved		
	Frequency	Percent
Agree	34	65.4
Disagree	9	17.3
Doesn't apply	7	13.5
No answer	2	3.8
Total	52	100.0

A substantial number of participants thought their child's behavior at school had improved. Slightly more than 65 percent (n=52) of participants felt their child's behavior at school had improved. "Our child realizes that they cannot use the family vs. the school. Now the school and the family are working more as a team," remarked one participant.

Table 14.

Child's school attendance improved		
	Frequency	Percent
Agree	23	44.2
Disagree	6	11.5
Doesn't apply	22	42.3
No answer	1	1.9
Total	52	100.0

Many participants thought their child's attendance had improved but almost the same number felt attendance problems didn't apply to their families. Approximately forty-four percent (n=52) agreed that their child's attendance had improved while slightly more than 42 percent of participants felt it didn't apply. "My son has improved in school and at home in most aspects of his learning and attitude as well as attendance", remarked one parent.

Table 15.

Would access services again		
	Frequency	Percent
Agree	48	92.3
Disagree	2	3.8
Doesn't apply	1	1.9
No answer	1	1.9
Total	52	100.0

Nearly all families agreed they would access services again if necessary. Over ninety-two percent (n=52) of participants said they would be comfortable accessing services again. “Wonderful service! Please keep up the great work! In a time of such violent incidents in schools across the country – these services are more important than ever “ commented a respondent.

Table 16.

Would recommend services		
	Frequency	Percent
Agree	49	94.2
Disagree	1	1.9
Doesn't apply	1	1.9
No answer	1	1.9
Total	52	100.0

The majority of families would recommend services to friends or family. Around ninety-four percent (n=52) agreed they would recommend services to family and friends. A participant wrote, “ help other families they way they have helped our family.” Another commented, “ I know parents who are having problems with a child and I tell them to give a call to the worker in their school.”

Is the Collaborative Service Worker Program effective?

Table 17.

Perceives program is effective		
	Frequency	Percent
Yes	46	88.5
No	1	1.9
No answer	5	9.6
Total	52	100.0

Most families surveyed felt the Collaborative Service Worker Program was effective. Close to eighty-nine percent (n=52) stated they considered it effective. Comments included, "It taught my child responsibility, reinforced that consequences are related to actions." "Was always ready to help in situations, if unable to help would find services that could." "Teachers do not have enough time to spend one on one with students or even just spend time talking with students that have problems." "This program was needed for a long time. Anything that helps children is effective."

Conclusion

The results indicate that overall parents are very satisfied with the services provided by the Collaborative Service Worker Program. Although being a new service offered to parents and students, it appears to be perceived as beneficial by parents. Those who reported areas of

dissatisfaction were dissatisfied with availability issues, rather than specific components of the program.

Chapter Five – Discussion, Limitations and Summary

Discussion

While most participants described themselves as parents, almost eleven percent of participants stated they were grandparents caring for elementary and middle school aged grandchildren. This may indicate a need to research and develop kinship/elderly caregiver education opportunities. Children having a kinship/elderly caregiver may experience added issues around value conflicts and abandonment that workers will need to be able to address effectively.

Nearly 63% of program referrals came from professionals involved with the educational system. This high percentage implies that school personnel are comfortable with the service provided by the Collaborative Service Worker Program. However, the low percentage of referrals from other disciplines may suggest that other professionals are either unaware or uncomfortable with the program. Teachers are less able to tolerate problem behavior in the classroom for many reasons including the safety of other children in the classroom. Also, teachers see children on a daily basis and are in a position to notice recurring problematic behavior. One possible reason for fewer referrals from County social service workers is that they see children less frequently. Their interactions are more often one to one visit with the child allowing for a higher situational tolerance for problem behavior.

One of the goals of the Collaborative Service Worker Program is to bridge the gap between home and school. The findings suggest this area needs development, as several parents reported not ever meeting with the Collaborative Service Worker. One participant suggested the workers send home reports of the meetings the workers have with the child. Another stated, "The only reason I know my daughter meets with the worker is because my child tells me. I trust that if I need to be involved I will be notified, I do not hear from the worker." Most interactions with the Collaborative Service Worker were done at the child's school or by phone. While the workers presence in the school is certainly positive, studies indicate that meeting families in their own environment is essential to an ecological approach to providing services. Some parents may find meeting at school a convenience and the school building is often seen as neutral ground. Also the social economic status of families could impact where interactions are occurring, as middle class families are typically seen as needing less in home interventions than poor families.

Removing the barriers to services is critical to a successful program. Eighty-nine percent of families felt services were easy to access and approximately 76% were given information about community resources and were able to apply the information. One participant wrote, "She gave me a lot of community phone numbers and names, which proved to be very helpful to my son and me. Without her help I would have spent

a lot of time on the phone and probably wouldn't have got half the help my son needed!" Successful workers will need to develop a network of other professionals in the community in an effort to keep abreast of new and developing resources. Workers will also be a critical component in the identification of current and future gaps in services for children and families.

On the whole families were satisfied with their relationship with workers and felt involved as part of the decision making team. Almost eighty-nine percent were satisfied with their relationship with the worker. These high percentages indicate that the individual workers are relating positively to children and families. The identified problems may be more of a systemic nature rather than direct services. An individual commented, " Just need to keep better track of things, or if a worker has too many families to contend with get more workers".

Families were asked about improvement of child's relationship, school behavior and school attendance. Over seventy percent felt their relationship had improved. Only 17% disagreed that their child's school behavior had improved. However, a significant number reported that improved school attendance "doesn't apply" or "disagree", which suggests that school attendance problems are not an issue for most families served by the Collaborative Service Worker Program. The Collaborative Service Worker Program may be focusing on a need that is

not as pressing as others present in the community at these grade levels. However, if collaborative partners felt strongly that attendance was a problem for a specific segment of students, interventions for those identified segments could be developed and those outcomes tracked.

When it came to accessing services again or recommending Collaborative Service Worker Program over 90% of families stated they would use the service again. The findings indicate that from the family's perspective this program was a comfortable system to be involved with, which is not often the case with the child protection system. This could be in part be because involvement with the Collaborative Worker Program is voluntary and those responding to the questionnaire may have had a positive experience with the program.

Over eighty-eight percent of participants surveyed perceive the program effective. "Yes, my child experienced improve grades, improved self-respect/esteem and I experienced better involvement with my child's education," recorded one participant. Statements about the workers being available to assist families more than they realized was a common theme in the data collected. Families are being served before the level of needing the child protection system and with these services will encouragingly avoid entering the system at all.

The program is designed to support families to improve family stability, nurture positive parent/child and home/school relationships. This

program coordinates services in the school, community and private sector to increase students' readiness to learn and improve family involvement.

The impact of early intervention has been well documented through studies by Aguirre, Brair-Lawson et al and other researchers in many disciplines, including health, education, corrections and social work. Programs like the Collaborative Service Worker promote the Ecological theoretical framework perspective using a holistic approach to providing services at both the organizational level and individual level which is central to social work practice.

Limitations of the study

The focus of this evaluation study was to evaluate the effectiveness of the Collaborative Service Worker Program from parents' perspective. This study is limited in that the findings cannot be generalized to other stakeholders, such as school administration, health, community corrections, the collaborative services workers or county social service agencies.

The low response rate is also a limitation to the study. There is no data from or about the 150 families who didn't return the survey and what their experiences were with the Collaborative Service Worker Program.

The questionnaire is lacking a clear definition of effectiveness. It is vague if effectiveness means the program is fiscally sound, or outcomes are being measured and impacted or another of several other definitions.

Respondents were left to each use their own explanation of what they thought effective to mean.

And lastly, while the program works to increase the likelihood of school success it does not claim to be the sole cause of success or failure for any child it serves. There are many uncontrollable variables when working with human beings.

Conclusion

The study of parents' opinions about the effectiveness of the Collaborative Service Worker Program can serve to provide a starting point for continued evaluation of the program. It can assist the Crow Wing County Family Services Collaborative to provide concrete direction to an evolving program and style of service delivery for families, schools and communities. Family Service Collaboratives, although not new, represent a promising direction for efforts to generate continued early interventions with at-risk children. This study adds to the evidence that early intervention programs have led to positive changes in families.

The Collaborative Service Worker Program is in an excellent position to continue to evolve into an effective early intervention program through defining clear outcomes, strategies and continued evaluation. This study demonstrates that the program has the support of families in Crow Wing County. One grandparent participant succinctly confirmed what we all

know when they wrote, " Sometimes we forget they are our future. When they are small and tender they will listen. Love conquers all."

Reference

Adelman, H. S., & Taylor, L. (1997). Addressing barriers to learning: Beyond school-linked services and full-service schools. American Journal of Orthopsychiatry, 67(3), 408-421.

Allen-Meaures, P. (1990). Elementary and secondary school improvement amendments of 1988 and the future of social services in schools. Social Work in Education, 12(4), 249-260.

Allen-Meaures, P., Washington, R. O. & Welsh, B. (1986). Social Work Service in Schools. New Jersey: Prentice Hall.

Bailey, D., & McNally-Koney, K. (1996). Interorganizational community-based collaborative: A strategic response to shape the social work agenda. Social Work, November. 41(6), 602-611.

Bardach, E., & Lesser, C. (1996). Accountability in human services collaboratives—For what? And to whom? Journal of Public Administration Research and Theory, 6(2), 197-224.

Barton, W. H., Watkins, M. & Jarjoura, R. (1997). Youths and communities: Toward comprehensive strategies for youth development. Social Work, 42(5), 483-491.

Battistich, V., Solomon, D., Kim, D., Watson, M. & Schaps, E. (1995). Schools as communities, poverty levels of student populations and students' attitudes, motives and performance: A multilevel analysis. American Educational Research Journal, 32, 627-658.

- Briar-Lawson, K., Lawson, H. A., Collier, C. & Joseph, A. (1997). School-linked comprehensive services: Promising beginnings, lessons learned and future challenges. Social Work in Education, 19(3), 136-146.
- Bronfenbrenner, U. (1979). The Ecology of Human Development Experiments by Nature and Design. Cambridge, MA: Harvard University Press
- Bruner, C. (1992). Thinking Collaboratively. Washington, D. C.: Education and Human Services Consortium.
- Bryson, J. M. & Einsweiler, R. C. (1991). Sharing Power Among Organizations: Coordination Models to Link theory and Practice. University Press of America. Hubert H. Humphrey Institute of Public Affairs.
- Bucci, J. A., & Reitzammer, A. F., (1992) Collaboration with health and social service professionals: Preparing teachers for new roles. Journal of Teacher Education, 43(4), 290-295.
- Buyse, V. & Wesley, P. W. (1993). The identity crisis in early childhood special education: A call for professional role clarification. Topics in Early Childhood Special Education, 13, 418-429.
- Center for the Study of Social Policy. (1989). New Futures: Plan for assisting at-risk youth in five cities. Washington, DC: Author.
- Cervera, N. J. (1990). Community agencies in schools: Interlopers or colleagues? Social Work in Education, 12(1), 118-133.

Chavkin, N. F. & Brown, K. (1992). School social workers building a multiethnic family-school-community partnership. Social Work in Education, 14(3), 160-164.

Dryfoos, J. G. (1994). Full-Service Schools – A revolution in health and social services for children, youth and families. San Francisco: Josey-Bass.

Fagen, J. (1996). Recent perspectives on youth violence. Paper presented at the Northwest Conference at Youth Violence, Seattle, WA.

Franklin, C. & Streeter, C. L. (1995). School reform: Linking public schools with human services. Social Work, 40(6), 773-781.

Germain, C. (1979). Social work practice: People and environments. New York: Columbia University Press.

Germain, C. (1991). Human behavior in the social environment: An ecological view. New York: Columbia University Press.

Green, B. L., Mulvey, L., Fisher, H. A. & Woratschek, F. (1996). Integrating program and evaluation values: A family support approach to program evaluation. Evaluation Practice, 17(3), 261-272.

Greenberg, M. & Levy, J. (1992). Confidentiality and collaboration: Information sharing in interagency efforts. Denver, CO: Education Commission of the States.

Hannan, M., & Freeman, J. (1988). Density dependence and the growth of organizational populations. In G. Carroll (Ed.), Ecological Models of Organizations (p. 7-32). Cambridge, MN: Ballinger.

Harbert, A. S., Finnegan, D., & Tyler, N. (1997). Collaboration: A study of children's initiative. Human Services Integration, 21(3-4), 83-107.

Hasenfeld, Y. (1983). Human services organizations. Englewood Cliffs, NJ: Prentice-Hall.

Hasenfeld, Y. (1992). Human services as complex organizations. Newbury Park, CA: Sage

Hawkins, D. & Catalano, R. (1992). Communities that care. San Francisco: Jossey-Bass.

Herbert, V. (1989). School-based collaborations in dropout prevention: The New York City Experience – NASSP Bulletin, 73, 84-88.

Iles, P., & Auluck, R. (1990). Team building, inter-agency team development and social work practice. British Journal of Social Work, 20, 151-164.

Jehl, J., & Kirst, M. W. (1993). Getting ready to provide school-linked services: What schools must do. Education and Urban Society, 25(2), 153-156.

Kilpatrick, A. C. & Holland, T. P. (1999). Working with families: An integrated model of level of need. (2nd ed.). Needham Heights, MA: Allyn and Bacon.

Kirst, M. W. (1991). Improving children's services. Phi Delta Kappan, 72, 615-618.

- Larson, C. S., Gomby, D. S., Shiono, P. H., Lewit, E. M. & Behrman, R. E. (1992). Analysis. The Future of Children, 2, 6-18.
- Lee, W. C. (1998). Balancing the educational needs of students with school-based or school-linked services. Social Work, 43(1), 65-66.
- Levy, J. E. & Cople, C. (1989). Joining forces: A report from the first year. Alexandria, VA: National Association of State Boards of Education.
- Levy, J. E. & Shepardson, W. (1992). A look at the current school-linked services. The Future of Children, 2(1), 44-55.
- Manning, M. L. & Baruth, L. G. (1993). Students at risk. Boston, MA: Allyn & Bacon.
- Melaville, A. I.; Blank, M. J. & Asayesh, G. (1993). Together we can. Chevy Chase, MD: PrismDAE.
- Meyers, M. K. (1993). Organizational factors in the integration of services for children. Social Service Review, 67(4), 547-575.
- Newman, L. (1995). School-agency-community partnerships: What is the early impact on student school performance? San Francisco: California Healthy Start/Comprehensive Integrated School Linked Services Evaluation, 1995.
- O'Looney, J. (1994). Modeling collaboration and social services integration: A single state's experience with developmental and non-developmental models. Administration in Social Work, 18(1), 61-86.
- Patton, M.Q. (1997). Utilization-focused evaluation: The new century

text., (3rd Edition). Newbury Park, CA: Sage Publication, Inc.

Pennekamp, M. (1992) Toward a school-linked and school-based human services for children and families. Social Work in Education, 14(2), 125-130.

Robinson, S. (1990). Putting the pieces together: Survey of the state systems for children in crisis. Denver: National Conference of State Legislators.

Rubin, A. & Babbie, E. (1997). Research methods for social work. (3rd Edition). Pacific Grove, CA: Brooks/Cole Publishing.

School Linked Services, (1994). School Linked Services for Children and Families. Office of Educational Research and Improvement (OERI).

Shadish, W. R. Cook, T. D., & Leviton, L. C. (1991). Foundations of program evaluation. Newbury Park, CA: Sage.

Trattner, W. I. (1974). From poor law to welfare state. (2nd ed.). New York: The Free Press.

Walker, H. M., Irvin, L. K. & Sprague, J. R. (1997). Violence prevention and school safety: Issues, problems, approaches and recommended solutions. OSSC Bulletin.

APPENDIX A
Parent Satisfaction Survey
Crow Wing County Family Service Worker Program

You were randomly selected to share your opinions to improve the Crow Wing County Family Service Collaborative Service Worker Program. Thank you for taking the time to participate in this project.

Instructions: this quick questionnaire will take a few minutes to complete. Upon completion, please mail the questionnaire back in the enclosed self addressed, stamped envelope by March 10, 2001.

General information ("child" pertains to the child that was referred to a Collaborative Service Worker)

1. Your gender: female male

2. Your relationship to child: parent step-parent grandparent

 other/specify _____.

3. Child's gender: female male

4. Child's grade at time of service: K 1 2 3 4 5 6

 7 8 9 10 11 12

Program Questions -

1. Who informed you of the Collaborative Service Worker program available at your child's school?

 teacher principal county social worker other/specify _____

2. Where did you first meet the Collaborative Service Worker?

 school your home social service agency other/specify _____

3. How long were you involved with the Collaborative Service Worker program?

 up to one month between one and three months between three and six months

 other/specify _____

4. Where did you meet with Collaborative Service Worker most often?

 school your home other/specify (phone calls, restaurants, etc.) _____

5. In general, how do you feel about your involvement in the services you received? Please indicate whether you: strongly agree, agree, disagree, strongly disagree or doesn't apply, by checking one box per statement.

When meeting with the Collaborative Service Worker.....	Strongly Agree	Agree	Disagree	Strongly Disagree	Doesn't Apply
a) The services were easy to access.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) I was provided with information about community resources, to further assist with my situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) I was able to apply the information I learned to my family situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) I was satisfied with the relationship I had with the Collaborative Service Worker.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) I was included as an important member of the team that helps my child.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) I was actively involved in making decisions regarding the services provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As a result of the Collaborative Worker Services...					
f) I feel my relationship with my child has improved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) I feel my child's behavior at school has improved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) I feel my child's school attendance has improved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If necessary...					
i) I would feel comfortable accessing Collaborative Worker services again.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) I would recommend the collaborative services to friends and family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. If the Collaborative Service Worker could do one more thing for you and your family, what would it be?

7. In your opinion, is the Collaborative Service Worker program effective? Yes No
Why or why not?

Your comments and your time are appreciated. Please return the completed questionnaire in enclosed envelope. Thank you.

APPENDIX B

Crow Wing County Family Service Collaborative Satisfaction Survey

Dear Parent/Guardian:

My name is Sandy Olson Larson. I am a graduate student in social work at Augsburg College. I am currently doing an internship with the Crow Wing County Family Service Collaborative. Part of my duties is to assist in the evaluation of the Service Worker Program. The study I am conducting is part of the thesis requirement for the Augsburg MSW program. You are invited to take part in a satisfaction survey. You were selected as a participant because your family and/or child participated in services during the 1999-2000 or 2000-2001 academic school year.

PURPOSE

The purpose of the study is to receive important feedback on how satisfied you are with the services you received. The information from the survey will then be used to evaluate the program as my school thesis project. Your decision to fill out the survey is voluntary and will not affect your current or future relationship with Collaborative Service Worker Program or your school.

CONFIDENTIALITY

The surveys will be returned to the Crow Wing County Family Service Collaborative (return in the self addressed stamped envelope). The survey is completely anonymous, I will have no way of knowing who is returning the survey. Please do not put your name on the survey. Crow Wing County office personnel will open the returned surveys, the envelopes will be disposed of and the completed survey will be given to me. While I am collecting the data, all records will be kept with me. The summarized results will be shared with the Crow Wing County Family Service Collaborative. They will not identify individual responses. After the results have been tabulated, I will be destroying the individual response forms.

IMPORTANCE

There are not any risks to you for participating nor are there any direct benefits, such as money. You do have the benefit of knowing your individual response is important and can make a difference in the quality of services provided to children and families. I request that you take a few minutes to answer the questions and return the survey in the enclosed envelope.

If you have any questions, you may contact me at (218) 824-1202 or my thesis advisor, Laura Boisen at (612) 330-1439. I thank you for your time, cooperation and input.

Sincerely,

Sandy Olson Larson, MSW Student
Crow Wing County Family Service Collaborative Intern

APPENDIX C

March 27, 2001

Dear Parents/Guardians:

This is a reminder with regard to the Crow Wing County Collaborative Service Worker Survey which was mailed to you earlier. In case you have misplaced or lost the original survey, I have enclosed another copy along with a stamped envelope for you to return the survey in.

Because the survey is anonymous, I have no way of knowing if you have already returned your survey. If you have already returned it, please accept my thanks for your help and cooperation to improve the Collaborative Service Worker Program.

You do have the benefit of knowing your individual response is important and can make a difference in the quality of services provided to children and families. I request that you take a few minutes to answer the questions and return the survey in the enclosed envelope.

If you have any questions, you may contact me at (218) 824-1202 or my thesis advisor Laura Boisen at (612) 330- 1439. I thank you for your time, cooperation and input.

Sincerely,

Sandy Olson Larson, MSW Student
Crow Wing County Family Service Collaborative Intern

Augsburg College
Lindell Library
Minneapolis, MN 55454