

Journal of Family Strengths

Volume 13 | Issue 1

Article 15

12-17-2013

Evolving Family Technology

Alvin Sallee

University of Houston - Downtown, jfs@childrenatrisk.org

Angelo P. Giardino

Texas Children's Health Plan, apgiardi@texaschildrens.org

Robert D. Sanborn

CHILDREN AT RISK, sanborn@childrenatrisk.org

Follow this and additional works at: <http://digitalcommons.library.tmc.edu/jfs>

Recommended Citation

Sallee, Alvin; Giardino, Angelo P.; and Sanborn, Robert D. (2013) "Evolving Family Technology," *Journal of Family Strengths*: Vol. 13: Iss. 1, Article 15.

Available at: <http://digitalcommons.library.tmc.edu/jfs/vol13/iss1/15>

The *Journal of Family Strengths* is brought to you for free and open access by CHILDREN AT RISK at DigitalCommons@The Texas Medical Center. It has a "cc by-nc-nd" Creative Commons license (Attribution Non-Commercial No Derivatives) For more information, please contact digitalcommons@exch.library.tmc.edu



Last month during my (Alvin Sallee) retirement party, a young student asked me if Microsoft Word was always in use during my career. After a large belly laugh, I explained that forty years ago we had just gotten electric typewriters. The growth in electronic technology, let alone computers, has been incredible – witness this online journal!

In addition, the technology and knowledge base for working with families has expanded and improved. Over the past five decades, we have advanced our work from lay workers applying white middle class values to a highly professional effort based on evidence informed practice supported by family strengths principles and ongoing evaluation data on best practices.

During the past twenty years, the goal of the *Journal of Family Strengths* has been to present theoretical, policy, practice, and evaluation articles on the strengths perspective in family centered practice to improve services that promote and sustain family systems. And a multitude of changes have accumulated in the production and dissemination of the Journal. For example, in 1994, this journal was hand-typed, bound, and snail-mailed to 500 individuals and libraries. Today, the *Journal of Family Strengths* is online and fully accessible with over 15,000 readers. Furthermore, 15 years worth of previous articles are available online for perusal and practice.

The state of research methodology and analysis of family strengths practice has evolved over time, as shown by the emerging scientific base within this issue over a variety of articles and commentaries. Readership spans across various professions and ranges from line workers to federal agency directors. The quality of the theoretical and applied work employing family strengths perspectives and practices is clearly developing from this rich scholarship.

One exciting example of the application of family strengths in practice is the new Texas Children's Health Plan's Center for Children and Women in Houston Texas. This center is a patient and family-centered medical home developed as an innovative, comprehensive, and coordinated primary care practice delivery site that sees the patient and family, and their experience, as the foundational element for design and implementation (American Academy of Pediatrics 2002). Through an inclusive planning process, the patients' and families' perspectives guide each detail. Contrast this with what would have occurred in a more traditional planning process where the professionals would have decided what the patients and families needed and then without the benefit of actual patients' and families' input, these professionals would have developed and implemented a plan. Now, the planning process unfolds

from day one with actual input from patients and families so that the people being served are actually consulted and have their perspectives sought out and included. This patient and family-center primary medical home focuses on an approach of comprehensive and coordinated that has the important but simple goal of assuring health and the delivery of excellent health care that reduced barriers to care and which eliminates financial disincentives the delivery of ideal care. Other innovations supported by the Affordable Care Act such as additional home visiting services, increased support for community health centers and the promotion of prevention over sick care are all reason for optimism and even more support for family strengths principles and practice.

We hope that we are turning a corner in regards to parenting and family strengths as public policy. We see significant evidence that a population focused, public health approach to parenting is needed and could be significantly cost beneficial, yet, we face the challenge of a society that regularly voices support of families but which often does not carry through on the support for the actual practice of these lofty ideals. From the burden of health care costs that result in the largest reason for family home foreclosures to school districts who are not coordinating vacations, providing subsidized meals and neglecting physical education requirements, we all too regularly see that other concerns seem to move ahead of supports and services to all families, especially those with challenges and vulnerabilities.

We need to assess the critical role leadership plays in supporting a family's strengths as well. Recently we read with dismay how in Arizona in the just the past few years, an outstanding family centered system may have gone from excellent practice to one that lost track of 6,000 children at high risk for abuse. A key difference is a change in leadership and priorities. We remain committed to providing a professional forum for placing a bright light on family strengths principles and the leadership and evidence base necessary to carry through on the promise that this approach can realize.

We wish to recognize and thank all of the leaders in family strengths that have and continue to contribute to the success of this Journal. To name a few, Dr. Marianne Berry, Dr. John Ronnau, Dean Katherine Briar-Lawson and the editorial board. Mr. Eddie Bowers of Eddie Bowers Publishing for publishing the Journal for 15 years and gave us permission to publish electronically all the back issues. Thanks to the University of Houston-Downtown's Center for Public Service and Family Strengths, CHILDREN AT RISK and the Center for Parenting and Family Well-Being, and the Texas Medical Center Library. And we offer our

thanks in advance to Dr. William Flores President of University of Houston-Downtown who despite a blistering schedule has joined the editorial team as a Co-Editor in Chief and to Dr. Chris Lloyd from the University of Arkansas for accepting the editorship chores of Alvin Sallee. So much accomplished and so much more to explore.

We invite you to contribute to this process, the stakes are too high for the children and families with whom we work to do anything less but to relentlessly pursue highly effective ways of supporting their growth, health and overall wellbeing, with them as the people we seek to serve as full partners in that noble endeavor.

P.S., with the writing of this editorial, Professor Sallee's retirement, we his two current co-editors (AG and RS), would like to recognize Alvin's persistent, single minded effort to serve children and families in our own community as well as throughout many communities across the US. Alvin is an effective scholar, educator and family strengths advocate who combines rigorous scientific acumen with the heart of a Peace Corp volunteer. He inspires those around him to see beyond the limitations of today and instead to pursue a world that could and should be for children and families . . . for this we are grateful for Alvin's leadership, vision and collegueship.

References

American Academy of Pediatrics. Medical Home Initiatives for Children with Special Health Care Needs Project Advisory Committee. (2002). Policy statement: Organizational principles to guide and define the child health care system and /or improve the health of all children. *Pediatrics*, 110 (pp. 184-186).
doi:10.1542/peds.110.1.184