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Implementing Programs to Strengthen Unwed Parents' Relationship: Lessons from Family Connections in Alabama

Final Report

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CHAPTER I

INTRODUCTION

In response to the congressional mandate to promote two-parent families and marriage specified in the 1996 welfare reform legislation, the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services has embarked on an initiative to encourage healthy marriage in the broad population and especially within low-income groups. The mandate is supported by research showing that children who grow up with their own married parents are less likely to experience poverty and to fare better on a range of developmental outcomes compared with children in other family structures (McLanahan and Sandefur 1994; Amato 2001; McLanahan 1997). Congress has before it a proposal that would set aside funds for the purpose of developing and operating programs and services that help build relationship skills and strengthen and support healthy marriage. Much interest is emerging in developing programs that could target unmarried couples expecting a child. This growing interest is due largely to recent research showing that at the time of their child's birth, the vast majority of unwed parents are romantically involved and hope to marry, yet are at high risk of ending their relationship (McLanahan et al. 2001, Carlson 2002).

To support further progress in this area, ACF is sponsoring a large-scale, comprehensive demonstration and evaluation of programs designed to strengthen relationships and support the marital aspirations of unmarried couples expecting a child: the Building Strong Families project (BSF). To inform the design and development of strong BSF programs, Mathematica conducted a related project (titled Evaluating the Implementation of Programs to Strengthen Families with Children Born Out of Wedlock, or ESF) to identify and study existing programs that have aspects similar to those envisioned for BSF programs. A major purpose of that project was to identify design and implementation issues likely to arise in BSF programs and describe strategies that have been used to address them in similar programs.

One program that was deemed similar to BSF was Family Connections in Alabama (FCA). The FCA was a 12-month project conducted during 2003 that aimed to design, implement, and evaluate a program to provide family life education to low-income unmarried parents of young children. It was selected for study because it was one of very few newly emerging programs that included a focus on couple relationships among low-

income unmarried parents. Although some key aspects of the program differed from those of the BSF program model, several of the goals, approaches, and expected outcomes were similar enough to warrant examination for lessons that could inform the development and operation of BSF programs.

This report describes and develops lessons learned from the FCA program that are relevant for designing and implementing BSF programs. It first describes the overall program design and planning, and then discusses implementation in each of the study sites, focusing on staffing, participant recruitment, curriculum, structure and content of classes, and receptivity of staff and participants to the program. The final chapter discusses implications for developing and operating relationship/marriage interventions with unwed couples—the BSF target population—and discusses how the lessons learned may apply to future BSF program design and content.

This report is not an evaluation of the Family Connections in Alabama program. Rather, it focuses on what BSF program developers can learn from FCA given the underlying differences in program goals and design. A separate report presents findings of an evaluation of the FCA (Adler-Baeder et al. 2004).

A. BACKGROUND AND CONTEXT

Few opportunities currently exist for learning about the issues likely to be important in operating relationship or marriage programs for unmarried couples. An earlier Mathematica study found no programs or curricula that focus primarily on strengthening the relationships of unwed expectant couples (Dion et al. 2003)¹. While that study did identify many high-quality programs for low-income families that focused on strengthening either the mother's or father's role in their child's development, none of the programs centered on the parents' relationship and the implications of that relationship and marriage for their child's well-being. The project also found several research-based interventions that focused on strengthening the relationships of engaged or married couples around the time of their child's birth, but none that was designed or tested with unwed parents, most of whom are low-income. Organizations that are now beginning to develop and implement programs for this population are entering a new programmatic frontier.

The Building Strong Families project was initiated to further stimulate the development and evaluation of strong programs to serve the relationship needs of unwed parents. The project will help develop and test the impacts of six well-conceived and well-implemented programs to strengthen relationships and support marriage among unmarried couples expecting a child. Each of the programs will be based on a common model developed especially for this population. Substantial work has gone into developing a set of guidelines

¹ Since FCA was implemented, several efforts have begun to adapt existing relationship and marriage education programs and develop new materials for use with unmarried parents.

for implementing a BSF program (Hershey et al. 2003). The model continues to evolve, however, as new information surfaces.

To help develop and refine the BSF program model, the ESF project studied the implementation of emerging programs that were providing unwed parents with services that in some way address couple relationships among unwed parents. Family Connections in Alabama was such a program, providing instruction and information on relationships and marriage to an ethnically diverse population of low-income, mostly unmarried new parents in four pilot sites. The classes were embedded in community-based family services organizations and taught by existing staff to individuals and couples who were current or former clients of the organizations.

Sponsored by the federal Office of Child Support Enforcement (OCSE) within ACF through a grant from its Special Improvement Program (SIP), Family Connections in Alabama was designed primarily to address one of the announced SIP grant program priorities for 2002: encouraging new ways to approach unwed parents to emphasize the importance of healthy marriage to children's well-being. Consistent with OCSE goals, the program primarily aimed to increase the level of father involvement, raise the quality of the co-parenting relationship, and increase paternity establishment and child support payment rates. But as a SIP grantee, FCA went beyond these goals to also help low-income parents understand how their relationships affect their children, and consider whether marriage is appropriate for them.

The FCA program was funded through a grant to the Alabama Children's Trust Fund (CTF), awarded in early 2003. The Alabama legislature created CTF in 1983 with the purpose of funding community-based nonprofit organizations that aim to prevent child abuse and neglect. In 2003, it funded 255 such programs through competitive grants.² Through its SIP grant, CTF funded four local Alabama pilot sites—two rural and two urban—to enroll 30 individuals each to receive relationship-strengthening services. It also contracted with Auburn University to conduct a short-term evaluation of the impacts of the program on participants. The evaluation used a matched comparison design and measured a range of participant outcomes before, during, and just after classes were provided (Adler-Baeder, et al., 2004).

B. A COMPARISON OF THE FCA AND BSF APPROACHES

FCA provided an excellent opportunity to examine many of the implementation issues likely to be of importance to BSF programs. Both program models aim to strengthen relationships among low-income unwed parents, and both discuss marriage. Nevertheless they have several important differences that must be taken into consideration in understanding the extent to which lessons from FCA are applicable to BSF. The main

² CTF itself is funded through Alabama's general fund, education trust fund, welfare block grant, and tobacco settlement funds. See Appendix B for more information on CTF.

differences between the two models involve the primary goals of the intervention and the target population.

Although multifaceted, the primary goals of Family Connections in Alabama, according to CTF's application for federal assistance, were to increase the level of parental involvement and support of children, and to support and improve family relationships. To achieve these broad goals, FCA used a curriculum designed to help individuals gain skills for making healthy decisions about their relationship with the child's other parent (including the potential for marriage), and to teach skills that promote cooperation between parents—both those who are romantically involved and those who are not. The program aimed to convey the message that fathers are important in the lives of their children, whether or not couples live together.

In contrast, BSF aims primarily to promote child well-being by nurturing the development of existing couple relationships among unwed parents, and providing information and support to couples who aspire to marriage. BSF curricula will focus on teaching the skills associated with healthy couple relationships, and helping parents remove their barriers to a greater commitment and healthy marriage.

As a result of these differences in primary goals, FCA aimed to serve all types of unmarried parents, including those with romantic partners (regardless of whether they are a biological parent of the child), those without romantic partners, and noncustodial parents. The BSF model, in contrast, aims to serve unmarried couples who are romantically involved with one another and are expecting (or just had) a new baby. BSF targets this specific population because of research showing that the vast majority of unwed parents are in viable couple relationships around pregnancy and many have aspirations for marriage.

Thus, despite substantial overlap between the two program models in addressing couple relationships among low-income unwed new parents, the FCA and BSF models have subtle but important differences in the populations they target and their goals. It is important to bear these differences in mind when considering how the information in this report applies to BSF.

C. METHODOLOGY

We used various strategies, including site visits, telephone discussions, and document reviews (grant applications, background on CTF, quarterly progress reports, curriculum material, and evaluation instruments) to collect information about the FCA program. We conducted two rounds of site visits to the program—one in May 2003 just before the beginning of classes, the other in September 2003 to observe program operations and interview staff and participants.

During the initial visit, we conducted interviews with CTF staff, program evaluation staff from Auburn University, and local staff members in three of the four pilot sites. At this early stage, only one location (Mobile) had begun providing classes. We spoke with several couples participating in those classes. We also visited one of the rural sites (Sylacauga), which had trained its staff and was about to start classes.

The experience of FCA as described by program staff and participants during our contacts made it clear that a more comprehensive study of the program's structure, implementation, and experiences could provide valuable lessons for BSF-type programs. Therefore, we designed a second, more comprehensive visit to be conducted while the program was actively enrolling and serving participants.

In September 2003, we conducted visits to three of the four local program sites: two in urban areas and one in a rural area.³ During the visits, project staff conducted semistructured interviews with local agency administrators and program staff members. We collected and examined background information on the organizations operating the local pilot program, FCA recruiting brochures and intake forms, enrollment and program completion figures, and curriculum materials. We observed program classes in two urban sites and conducted group discussions with class participants at the conclusion of each session. In the third (rural) site, we conducted one-on-one interviews with several program participants and observed a class.

This report is based on all of the research activities described above. In all, we spoke with 25 FCA participants, 21 local program staff and agency administrators, and key CTF and program evaluation staff.

³ The one rural site we did not visit, Choctaw County, had experienced problems unrelated to FCA that prevented it from completing its program.

CHAPTER II

PROGRAM DESIGN AND PLANNING

In a little under 12 months, the Children’s Trust Fund, in partnership with four local family services organizations, designed, planned, implemented, and completed an innovative program that provided relationship education and support services to more than 120 diverse rural and urban parents with young children—an impressive organizational accomplishment. This report focuses on lessons learned from FCA that have relevance for the design and implementation of Building Strong Families programs. To lay the groundwork for discussing these lessons, this chapter describes the design and planning activities that led up to the implementation of FCA. We first describe the program’s general design, including its target population and major components. We then describe the curriculum selected by the Children’s Trust Fund, the family service organizations chosen to implement the program, the program design decisions made at the local site level, and the training provided to program staff.

A. OVERVIEW OF FCA PROGRAM DESIGN

Working in collaboration with staff at Auburn University’s Human Development and Family Studies Department, CTF designed a program to address the child support and family relationships objectives of the Family Connections of Alabama program. Program design decisions consisted of defining the target population, selecting a curriculum, and planning for a case management function to retain participants for the duration of the program and refer them to needed services.

Target Population. Planners designed the FCA program to serve a balance of low-income, ethnically diverse prenatal or early postnatal nonmarried parents, as well as noncustodial parents. Because of concerns that sites would not be able to attract sufficient numbers of prenatal or early postnatal parents during the short period of program operations, the Children’s Trust Fund later extended the permissible age of the focal child from the early postnatal period to as old as three years. CTF thus envisioned that the program would be delivered to unmarried parents in various relationship situations—romantically involved couples as well as individuals no longer in a romantic relationship with their baby’s other parent. Moreover those who were in couple relationships or romantically

involved were not required to participate in FCA with their partners. CTF therefore designed the program to help parents learn to work together as a team regardless of the type of relationship they might have with one another, in order to ensure both parent's involvement with and support of the child. This included making relationship decisions, as well as negotiating multiple coparenting relationships for those who also had children from other relationships.

Family Life Education Component. To address the various types of relationship situations and issues program participants were expected to face, program planners selected the “Caring For My Family” (CFMF) curriculum. CFMF, described further below, is intended to address the relationships and family formation decisions of unmarried parents. The curriculum aims to help unwed parents: assess the health of their relationships, explore what kind of family they should form, including marriage, understand the importance of father involvement, and learn general relationship skills such as communication and conflict resolution.

Case Management Services. The potential need for services to address physical or mental health issues or substance abuse problems, along with the potential for inadvertently encouraging marriage among couples when abuse was an issue, were also of concern to program designers. To identify such needs and provide referrals for services, CTF encouraged that ongoing case management be provided to accompany the family life education component of the FCA program. Planned case management services also included recruiting participants into the program and monitoring their program participation. In particular, case managers were encouraged to identify program applicants or participants who might be experiencing or perpetrating intimate partner violence or abuse. CTF provided a domestic violence self-screening tool developed in conjunction with Alabama's Coalition Against Domestic Violence. Case managers were encouraged to use this tool to identify violent or abusive situations, so that staff could make appropriate referrals.

B. CURRICULUM SELECTION AND CONTENT

For the family life education component, FCA's evaluator at Auburn University recommended the CFMF curriculum, which was recently developed by Michigan State University Extension Services for mothers of infants receiving welfare cash assistance (see Appendix A for a description of the curriculum). Program planners expected that local sites would use key lessons from this curriculum for all participants, and be able to adapt the parts that were designed for single mothers for use with those who participated as couples as well. The curriculum content generally covers the following areas:

- **Module 1: Road Map to a Stable Family and Involved Father.** Ten lessons that explore the role of the father in the child's life and encourage participants to think about the type of family they want to form (including marriage), to make a choice about family type, and to create a plan and take action

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- **Module 2: *Caring for Myself.*** Five lessons concerned with creating a personal and family support system, building self-esteem, dealing with stress, managing anger, and establishing priorities
 - **Module 3: *Relating to Others.*** Four lessons on listening techniques, giving and receiving “positive strokes,” personal values and friendships, resolving conflict and anger, and improving situations through communication
 - **Module 4: *Caring for Our Family.*** Five lessons covering financial management, the characteristics of a strong family, the importance of family time, and coparenting

CTF selected this curriculum for several reasons. First, while it was familiar with standard marriage education programs,¹ staff believed that such curricula had limitations when applied to low-income unwed parents. In particular, staff judged that the standard curricula do not address some of the issues they felt were central to unwed parents, such as family formation decisions, recognizing unhealthy relationships, father involvement, and anger management. They also felt that the language, exercises, and activities found in standard curricula were not necessarily appropriate for people with lower literacy and educational attainment.

In addition, because the goal involved serving both unwed couples *and* individuals not currently in relationships with their child’s other parent, planners wanted to use a curriculum that could work for parents in both situations. Although the Children’s Trust Fund felt that healthy marriage can be an important and reachable goal for some unwed parents, planners also believed that a similarly important goal is to learn how to evaluate and recognize potential partners for a healthy marriage—whether the potential partner is the child’s other parent or someone else. Such a skill, project staff believed, could help individuals avoid unhealthy or abusive situations and improve the chances for a future healthy marriage with another person.

Finally, CFMF was selected because of its focus on father involvement and coparenting. Program planners expected that a significant number of unwed parents would be unable or uninterested in marrying their child’s other parent, and they did not want to miss the opportunity to teach the importance of coparenting and father involvement to those who do not become or remain a couple. By encouraging coparenting and continued father involvement among participants, CTF felt the program would increase the probability that parents would continue to provide child support even when their relationships with one another changed.

¹ For instance CTF has funded training in the Prevention and Relationship Enhancement Program (PREP), which aims to prevent divorce by teaching skills associated with successful marital adjustment before problems develop (Markman, Stanley and Blumberg, 1994).

C. LOCAL SITE SELECTION

To implement and test the program, CTF recruited local family support agencies whose clientele already included members of the target population. Staff sought providers that had worked with CTF successfully in the past, and that had existing personnel who could be trained to deliver the curriculum and provide case management and access to a range of services. Four agencies in different areas of the state that met these criteria and expressed strong interest in the program were selected and delivered the program. Of the four organizations, one was part of a local public health agency, and the others were private nonprofit organizations. Two served families from predominantly urban areas, and two served families in rural areas. All four agencies were community-based family resource centers. Each organization had been working with fathers for at least two years through CTF-funded fatherhood programs. Below we briefly describe each of the organizations chosen to implement the program.

Mobile County. The Mobile County Health Department’s TEEN (Teens Empowered Through Education and Nurturing) Center was established in 1998 as part of the Healthy Start Initiative. The center serves pregnant and parenting teen mothers, who must be between ages 10 and 19 when they first enter the program. The County Health Department Women’s Center, a federally funded maternity and family planning clinic, refers many young mothers to the center. Local public schools, the county juvenile court, a Mobile hospital, and the Alabama Department of Human Resources (public assistance) also make referrals from time to time. The center also serves young fathers, who must begin the program by the age of 19 but can participate until age 22, through the “Keeping It Real” fatherhood program. Participating fathers are primarily referred by the mothers of their children. The center clients are mostly African American.

Morgan County. Parents and Children Together (PACT), founded in 1978, is located in Decatur County and serves as the Morgan County Family Resource Center. Through 19 programs PACT provides group family life education, public awareness, one-on-one family services, and school-based services. It also operates a Healthy Families program and a welfare-to-work job readiness program. PACT clients in this community, which is surrounded by rural areas, are ethnically diverse, and the agency has a Spanish-speaking family life educator to meet the needs of a rapidly growing Spanish-speaking community.

Talladega County. The Sylacauga Alliance for Family Enhancement, or SAFE, was founded in 1996 to address the needs of vulnerable youth—mainly with drug and drop-out problems. Sylacauga is a rural town of around 12,000 in a county of 80,000. The population is predominantly Caucasian (70 percent) with the rest primarily African American. Many of the county’s families are deeply impoverished; the county’s unemployment rate is about 10 percent. Teen pregnancy is a serious issue in the community; Talladega County ranks 52 out of 57 in the number of teen pregnancies in the state. Located in a housing authority project area, SAFE provides case management, adult education, employment services, and 20 different programs directly or in partnership with other community groups. Services are delivered through several approaches, including home visitation, hospital visits, group education, and resource distribution programs. Most clients are referred by Alabama’s

Department of Human Resources, local medical and mental health providers, the courts, local police departments, and school districts, as well as through self-referrals.

Choctaw County. The Alabama Cooperative Extension Service (ACES) agency in Choctaw County is the outreach center for Alabama's land grant university system (which includes both Auburn University and Alabama A&M). The agency, located in an isolated rural area, offers three programs targeting low-income unwed parents: (1) a program for noncustodial fathers, (2) a program for resource-limited mothers of children from birth to two years, and (3) a school readiness and parenting program for limited-resource parents with children ages 2 through 5. Services are delivered through group sessions at remote locations throughout the county as well as through home visits. Most participants are referred to these programs by the Alabama Department of Human Resources, the courts, schools, through general outreach activities, and by word of mouth.

D. DESIGN DECISIONS AT LOCAL SITE LEVEL

Given the experimental nature of this initial attempt to include content on couple relationships to unwed parents, and the diverse perspectives of local sites, CTF permitted the four local providers to exercise their discretion in a number of areas. In particular, CTF did not mandate that local sites limit participation to those who fell strictly within the target criteria as initially defined (for example, one program enrolled families whose youngest child could be as old as 5 years; others did not want to turn away married couples who were also interested in the program). This flexibility also resulted in variation across sites in the following program design areas:

- Devising recruitment and retention methods
- Determining the program delivery mode (group sessions, individual sessions, home visits of various lengths and frequencies, or a combination of these modes)
- Determining the duration of the program (although sites were asked to include a minimum of 10 lessons drawn from CFMF)
- Selecting certain modules of the curriculum over others, reorganizing the sequence of lessons, and adding other material to tailor the curriculum to local participants
- Designing an incentive structure (which could include incentives such as family field trips, children's birthday parties, gift packets, and gift certificates)

CTF thus expected that the structure and length of program services and program content would vary across sites. Each site was expected to serve at least 30 participants, to achieve an overall total of 120 individuals.

E. LOCAL STAFF TRAINING

To support local program implementation, CTF developed and conducted a three-day training session for local staff members selected to facilitate FCA classes. Four staff members from each local provider attended the joint training session. Topics addressed at the training included an overview of the program model, eligibility requirements, the CFMF curriculum, and evaluation requirements and procedures. Training also included a half-day session on domestic violence. Auburn University staff involved in the program's evaluation, along with the developers of the CFMF curriculum, facilitated the training.

CHAPTER III

FCA SITE IMPLEMENTATION

The FCA project was developed and implemented expeditiously. The first 5 months of the 12-month grant period were devoted to staff training and local program planning. Curriculum training was completed in February 2003, client assessment and program evaluation training in March, and Institutional Review Board review for the evaluation at Auburn University by April. In May 2003, all four sites identified and recruited participants for initial program sessions, and three sites launched classes that month. Thus local providers had to select FCA staff members, design program activities and services, recruit participants, and adapt and implement the selected relationship curriculum to meet the needs and interests of their local participants—all within a few short months.

In this chapter, we describe the experiences of the local agencies that implemented the Family Connections program in Mobile, Morgan, and Talladega counties. As described earlier in this report, the purpose of our review of program operations was to describe lessons drawn from provider's experiences that may prove useful in developing and refining BSF programs. To that end, we discuss FCA program staffing and structure, participant recruitment and retention, local experiences using the selected curriculum, and staff and participant responses to the program.

A. PROGRAM STAFFING

Each site named an FCA program director and three to six class facilitators and/or case managers from existing organization staff. Class facilitators delivered the family life education curriculum in group sessions or one-on-one during home visits. Agency family support workers served as FCA case managers. Case managers followed up with participants on a regular basis, and helped link them to services by enrolling them in other agency programs, referring them to internal professional staff counselors, or making referrals to outside agencies, such as mental health providers, when necessary. FCA program directors supervised program staff.

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- **Existing agency staff—many of whom were experienced paraprofessionals—served as FCA facilitators and case managers.**

Local providers did not hire new staff members to operate FCA; given the project's small budget and short timeline, new staff hires would have been impractical. Instead, local agency directors at each site recruited a project director along with facilitators and case managers from their existing staff, all of whom worked part-time on FCA but also retained responsibility for other agency programs. One benefit of this approach was that FCA staff members were already familiar with agency clients and programs, as well as being experienced in delivering services to their target population. However, none had experience in delivering relationship education curricula, and most did not have professional training in counseling, psychology, or marriage and family therapy.

Local FCA program staff members across the four sites were diverse in their level and type of education, prior work and program experience, gender, and race/ethnicity. Of the 19 FCA program directors, class facilitators, and case managers in the three sites, 10 were described as “paraprofessionals” without college degrees. Some paraprofessionals had received certifications in various programs, such as Parents as Teachers. The remaining nine staff members held either bachelor's or master's degrees, in a range of disciplines from nursing to speech/language pathology. One staff member was a retired business executive. In terms of prior experience working with low-income families, several local FCA staff members were family service caseworkers who worked one-on-one with agency clients on various issues. Others conducted education or training activities for other agency programs, such as parenting, abstinence education, or fatherhood services. Six of the 19 program staff members were male. Fifteen of the 19 were African American, one was of Hispanic origin, and the other 3 staff members were white.

- **Program supervisors considered certain personal skills and experiences to be as important as professional background in preparing staff to facilitate FCA classes.**

Agency and program directors told us they did not believe that FCA facilitators or case managers had to be degreed professionals to perform their roles effectively. They felt that certain skills and experience could prepare staff for their roles just as well or better than a professional background. For example, these included a caring nature, knowledge of family support principles, and skills in personal development (in the words of one director, “working jointly to find out where participants want to be”). One agency's executive director felt that, to be effective, program facilitators needed specific, classroom-based experience such as presenting educational or skills-based materials; adapting their presentation approach and message to audiences with diverse interests, backgrounds, or cultures; and comfortably facilitating discussions of sensitive issues.

B. PROGRAM STRUCTURE

To provide the minimum 10 lessons from the selected curriculum, sites had to decide on the mode of service delivery, such as group versus individualized services, in-home classes, session length and number of sessions, and class days and times. The two urban sites, in Morgan and Mobile counties, delivered all FCA classes through group sessions held at their agency offices. The third site, in rural Talladega County, conducted some classes at its agency, but also offered the option of individualized at-home sessions.

- **Staff and participants expressed a preference for group sessions, but home visits appeared to boost rural participation, and to limit attrition in urban sites.**

SAFE, located in Talladega County, provided group relationship and marriage education classes at its Sylacauga facility for about half of its FCA participants, but conducted home-based classes for the remainder. Selection of home-based over center-based classes at SAFE depended in large part on participants' preferences. Several participants who received all services at their homes told us that they preferred the home visits for reasons of privacy and convenience, or, in a few cases, because they were unable to attend classes at the agency. However, most program staff in all three sites, and even some of the home-visit participants at SAFE, felt that group settings were, or probably would be, more interesting and effective. Many curriculum activities were designed for groups and relied on social interaction. Even group activities that could be adapted for single participants or couples were often not as lively, because this interactive aspect was missing. Another difference was that couples in groups learned from and supported one another and sometimes formed social bonds that endured after the program ended. In contrast, staff reported that in home settings, participants sometimes tended to become self-reflective and introspective.

When participants at urban sites failed to attend a group session, however, PACT or the TEEN Center often sent out case managers for a home visit, to ask why participants had not attended the session. Sometimes, home visitors learned that participants were experiencing employment, child care, or family problems, which case managers could help them address. Frequently, home visitors also delivered the curriculum content participants had missed, so that participants could keep current with their group and cover all required curriculum lessons. According to site staff, most who received a visit after missing a group session returned to the group the following week and continued with the program. The urban sites thus found home visits to be useful for identifying family needs and limiting program attrition.

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- **Participants preferred classes that were 1-2 hours in length and offered at times convenient to them.**

The number of individuals participating in groups or classes generally ranged from three to eight, so each site ran several cohorts of participants through the program during the operations period, in order to reach the goal of serving at least 30 participants.¹ For each cohort, all sites held classes once a week, but the length, number, and schedule of sessions varied both within and across sites.

PACT started by offering three-hour sessions for its first group of couples, but the participants felt the sessions were too long. For its next cohort of participants, staff shortened the sessions to two hours, from 6:00 p.m. to 8:00 p.m. once a week for six weeks. Daytime classes were then offered for later groups (which had more participants attending as singles rather than couples), running from 11:00 a.m. to 1:00 p.m., also for six weeks.

For each cohort, SAFE conducted one-hour sessions once each week for 10 weeks. Sessions delivered through home visits were sometimes around 30 to 45 minutes long rather than a full hour—probably because less time was needed for discussions, and some group activities were shortened or eliminated altogether.

Like SAFE, The TEEN Center in Mobile held 10 weekly one-hour sessions for 10 weeks, for every cohort. Because their clients were mostly youth, daytime hours were more suitable than in other sites. During the first round, classes were scheduled to begin at 9:00 a.m., but this proved too early for most participants, so the time was changed to noon. Subsequent cohorts also began classes at noon.

Some sites reported that classes could have run longer than 10 weeks, because many issues remained to be discussed and participants were reluctant to see the classes end. The TEEN Center, however, found it somewhat harder to sustain momentum for 10 weeks, perhaps because participants there were more likely than the older participants in other sites to have infants and be experiencing the stresses of transitioning to parenthood, making attendance more of a burden.

- **Sites liked using teams of male and female staff members, and one felt strongly that married individuals were better equipped to facilitate FCA classes.**

Sites had different approaches to facilitating classes. SAFE generally used a solo facilitator, sometimes male and sometimes female, for each FCA cohort. PACT relied on solo female facilitators for three cohorts, and a male and female co-facilitation team for a fourth. The TEEN Center assigned male and female co-facilitators for all FCA cohorts.

¹ Sites felt that 8 to 10 participants was an optimal number, and most felt that groups with fewer than 6 or more than 12 participants did not work well.

Facilitators across sites indicated that including male program staff made their male participants more comfortable. In particular, staff suggested that male participants identified more strongly with other men and therefore could benefit more from classes facilitated by male facilitators. Moreover, we were told and subsequently observed that male co-facilitators changed the dynamics of class sessions in ways that affected both male and female participants in positive ways. For example, we observed male staff readily challenge the views of male participants who made statements about such issues as harsh physical discipline of children or about the “proper” place of women in the family. Program staff speculated that female facilitators may be less comfortable making such challenges, and even if they did, they would not be taken as seriously by male staff.

Yet participants and staff also told us that relying on male staff to conduct home visits or classes without female staff also present had potential disadvantages. Though some female participants did not think the gender of program staff mattered, others said they felt more comfortable with females, particularly for home visits. Some male and female staff members felt that having both genders available to conduct home visits was best, at least in some situations. They cautioned that mothers—especially single mothers—might feel uncomfortable with solo male home visitors. For all these reasons, program staff suggested that male-female teams could most successfully facilitate sessions. Staff at one site suggested that program recruitment might also be more successful at engaging couples if carried out by male-female teams, for the same reasons.

In the site that served African-American urban youth, staff felt strongly that FCA program staff members should be married. Program staff we interviewed told us that they considered married staff members—especially married African-American men—to be important role models for participants of both genders who often grew up without married parents or even a father residing in the home. Program staff at this site felt that the staff members who were married had more credibility because they could speak about marriage from their own personal experience, yet still relate to the participants.

C. RECRUITING PARTICIPANTS

Program recruitment and enrollment procedures in all sites consisted of two steps. First, FCA or other agency staff identified potential clients from among their own past or current clients or through referrals from other programs within their agency. Most of these clients were approached in person while they were at the agency for another reason. Second, FCA staff members contacted or met with referrals, then asked those who expressed interest in participating in FCA to complete a preprogram questionnaire developed by Auburn University staff as part of the program evaluation. Sites offered a \$10 incentive for completing the questionnaire.

- **Staff found that emphasizing benefits to children was an important theme in program recruitment.**

Once engaged in the FCA program, couples and single parents told staff members and us that they enjoyed the class sessions and felt that they benefited from the opportunity to

focus on their relationships and personal needs. Staff felt, however, that the most effective way to bring couples or single parents into the program initially was to emphasize the potential benefits to their child. Mainly, recruiters discussed the benefits that accrue to children when parents adopt more cooperative parenting strategies and reduce conflict, even if the mother and father have ended their romantic relationship.

Although all sites used small incentives to maintain participation once parents enrolled in the program (as described below), they did not always mention the incentives in the recruitment message. The decision to mention incentives up front or later varied across sites and sometimes by recruitment staff within sites.

- **Staff reported that a lengthy preassessment questionnaire deterred some clients from participating in the FCA program.**

As part of the evaluation of the FCA program, staff asked all participants, both men and women, whether or not they were participating together as a couple or individually, to complete pre- and postprogram questionnaires. The purpose of the questionnaires was to measure changes in participants' relationship status, in the quality of their relationships, and in their intentions toward their child's parent or other relationship partner, along with changes in communication practices, relationship conflict, or other skills and characteristics. All of the sites indicated that the preassessment questionnaire was a significant problem and, in many cases, deterred enrollment. Participants were asked to complete the paper and pencil questionnaire on their own. Sites pointed to problems with the length of the preprogram questionnaire (which usually required one to two hours to complete), the confusing nature of some of the questions, and problems related to participants' literacy levels.

- **The majority of FCA participants were individuals rather than unwed couples, and most were women.**

As reported by Adler-Baeder et al. (2004), a total of 162 participants enrolled in FCA. Although the vast majority of enrollees (86 percent) reported being in some kind of relationship, less than one-third (31 percent) attended FCA sessions as a couple. A sizable number (32 percent) of the total sample reported being married at enrollment. More than three-quarters of all participants were female. As these statistics indicate, sites easily recruited mothers but were less successful in recruiting couples, especially unmarried couples who would attend together, and men. Success in recruiting couples and men varied considerably by site, however, and likely depended on a number of factors including recruitment methods and focus.

Unlike BSF, Family Connections of Alabama was intended to serve the full range of unmarried individuals with a young child—noncustodial parents, individuals in relationships, and individuals not currently in any intimate relationship, regardless of whether they attend the program with a partner. Therefore, programs did not make a strong push to recruit romantically involved couples who would be likely to attend the program together. Nevertheless, several factors may explain the lower rate of couple participation, and could be important for BSF program planners to consider.

First, agency staff did not often have direct contact with both parents of a given child, because most of the programs operated by the three agencies were targeted to the mother only or the father only. Staff generally enrolled one parent in FCA, usually the mother, and then relied on her to engage the other parent in the program. Couple participation might have been somewhat higher had program staff included both parents in their direct outreach efforts.

Second, men may have been less likely to participate because of the schedule or setting of classes. Classes were often held in the middle of the day when men were more likely to be at work or in school. At the Mobile TEEN center, staff surmised that some fathers who were not teenagers were probably put off by the name of the center. Mothers and program staff reported that men said they did not have the time to participate. Some reported that men were wary because they were uncertain as to what the program was about. At one site, a few mothers were reluctant to invite their partners for fear that the men would not like the sessions or might become emotional and angry.

Third, unwed parents are most likely to be involved in romantic relationships with their child's other parent when they are still expecting or have recently had the child. Many FCA participants were not new parents but rather had children who were older—making it less likely that the parents were still involved in romantic relationships with their baby's other parent, perhaps making them less likely to participate in FCA as a couple.

Finally, even when participants were involved with a partner, some sites may not have consistently encouraged couple participation to either staff or potential participants. During discussions at one site, a participant mentioned that she “had not even thought of inviting her partner” but considered it an excellent idea. Other participants said that they brought their partners occasionally and believed that they could share the information from the sessions with their partner later at home.

- **Owing to time constraints and a desire to be inclusive, sites had difficulty turning away participants who did not meet eligibility guidelines.**

With only a few months to meet their enrollment targets, sites were reluctant to be overly selective. Since they had little or no experience in recruiting unwed couples for agency services, local administrators were uncertain whether they could meet their targets within the available time frame without broadening enrollment criteria. In addition to the practical difficulties of recruiting unmarried couples and concerns about filling program slots rapidly, agency staff and FCA facilitators were reluctant to exclude anyone interested in the FCA program. Thus, some sites also enrolled low-income married parents, parents attending with a non-partner adult (such as a mother or other relative), and parents whose youngest child was well beyond age 3.

While staff at some sites said they would have preferred to adhere to more narrow eligibility criteria (for example, only couples and, among couples, only those with children under age 2), others disagreed with such an approach. Some facilitators felt that, when class groups included couples or even married couples and solo parents, participants in different

relationship situations learned from one another. Others simply felt that everyone could potentially benefit from general information about healthy relationships.

- **Agencies recruited from existing clients to fill planned program slots, but program staff felt it would be imperative to conduct outreach in order to expand the program.**

As planned, all sites recruited participants primarily (or exclusively) from among those already involved in other activities at the site. The specific programs from which participants were recruited within centers varied across sites, however. Some sites recruited from Healthy Start, from fatherhood programs, or from welfare-to-work services. For reasons explained above, however, agencies were less successful than they had hoped in finding potential FCA participants who fit the eligibility guidelines among their current clients. By the end of the program, each site we visited had concluded that the recruitment of additional participants would have required expanded outreach to external referral sources. Sites suggested that they would have approached local hospitals or clinics, community-based organizations, low-income housing projects, and welfare offices as possible referral sources.

D. RETAINING PARTICIPANTS

- **Programs felt it was useful to offer practical help and small incentives to motivate program completion.**

Agency staff told us they felt that the provision of on-site child care, transportation assistance, and snacks or meals during their FCA classes all significantly improved FCA attendance. PACT and the TEEN Center operated on-site child care facilities that FCA parents used at no charge during class sessions. FCA program staff at the three sites also provided transportation assistance for some participants—bus passes where possible, but sometimes rides to classes. When dedicated agency vans with drivers were unavailable, some FCA staff members picked up participants themselves. Staff members said they found that providing snacks or meals during group sessions was a strong draw, and at two of the sessions we observed, participants expressed enthusiastic agreement.

Sites implemented different incentive structures and sometimes even allowed participants to decide how they preferred to receive incentives. One site gave participants \$15 for attending each session. Another paid \$10 at enrollment and \$90 upon completion of the entire course and satisfaction of the hourly requirements. Participants in a subsequent FCA cohort at the same site voted to receive a small cash incentive for each session instead of a lump sum at the end of the program.

Even though the TEEN Center found incentives useful, it was reluctant to provide cash incentives to teenagers and instead included FCA participants in an incentive system already established for other clients. Through the Baby Bucks system, FCA participants earned points for enrolling, attending meetings and class sessions, or completing other FCA program requirements. Accumulated points could be “cashed in” for baby and child supplies, such as disposable diapers, bottles or nursing supplies, clothing, toys, or car seats.

The TEEN Center maintained a supply of purchased and donated items in a small room at the facility that became known as the Baby Bucks store. As the agency had learned through its fatherhood programs, fathers as well as mothers expressed enthusiasm about accumulating and spending points. Fathers purchased items themselves or, more often, gave their points to their baby's mother as a way of helping provide for their babies. Both mothers and fathers expressed their enthusiasm about the system to program staff, and to our site visitors.

Though they were supportive of these types of services, some FCA sites and staff members were initially uncomfortable about providing other types of incentives for participating in the FCA program. However, all came to feel that doing so was appropriate, and that incentives boosted attendance and retention. Incentive amounts were small, but participants we spoke to said that the amounts were enough to keep them going when attending a session or meeting with a facilitator at home was inconvenient or difficult, or when their enthusiasm lagged. Some program staff also indicated they felt strongly that incentives should be small so as not to become the main motivation for program participation. Clients we spoke with said that small cash incentives, snacks, or meals, while appreciated, would not have been enough to keep them enrolled and active if they had disliked or lost interest in the program.

E. IMPLEMENTING THE CURRICULUM

CTF encouraged the use of the Caring For My Family curriculum but also granted local sites permission to make necessary modifications in the sequence, emphasis, and even content, in order to adapt it to local circumstances and the type of participants attracted to the program. In this section, we discuss the content and adaptations local sites made and describe staff experiences and thoughts about how the curriculum worked.

- **Local sites selected different parts of the CFMF curriculum for implementation, and adapted and supplemented it with additional materials.**

CTF urged local sites to consider Module 1 of the CFMF curriculum—"Road Map to a Stable Family and Involved Father"—as the core material to be covered in FCA. Module 1 includes 10 lessons that lead participants through an exploration of the role of the father in the child's life and consideration of what type of family is best for them (such as marriage or a coparenting arrangement). The lessons are intended to help participants make a choice and then create a plan of action to help them reach their goal. Thus, the skills taught in the first module focus on how to recognize a good partner and how to keep fathers involved with their children regardless of whether the father would make a good mate.

The program planners felt that Module 1 of the curriculum could have potentially different uses depending on the relationship status of participants. For a single mother participating alone, the module could be used to encourage the mother to consider involving the father more in the child's life and to evaluate whether the baby's father would be a good marriage partner. For participants who attended as couples, CTF expected local sites to modify the curriculum as needed. Such adaptations were often made "on the fly" during

class sessions. For example, facilitators asked participants to engage in discussions as if they were not already married or committed to one another.

Sites made different choices in their selection of lessons from Module 1 and other modules of the curriculum. Some sites also enhanced or replaced parts of the material. The material most frequently added was on the topic of father involvement and co-parenting. One facilitator included research findings from his agency's fatherhood materials on the importance of fathers. Another enhanced the coparenting module with material used in other agency programs. The Mobile site incorporated materials from the National Fatherhood Institute, Advocates for Life Planning Education, and the Child Welfare League of America's Florence Crittenton program. For their young urban population, they added topics on sexual abstinence or monogamy and the prevention of sexually transmitted diseases. Several sites substituted CFMF modules on budgeting and dealing with stress with other materials they felt covered those subjects more effectively.

Facilitators also reported that they adapted CFMF materials to the culture and language level of participants and made some of the materials more interactive and experiential. In addition to incorporating more culturally sensitive language, examples, and exercises, facilitators suggested rewriting the handouts at a lower literacy level to make them more accessible to participants, especially teen parents, some of whom had dropped out of school.

- **Serving all relationship types with a core curriculum designed for single mothers presented problems for some facilitators and participants.**

As described earlier, the CFMF curriculum was developed mainly for single mothers receiving public assistance, largely to help them make decisions about the role of their baby's father in the mother and child's life. Though the curriculum does include information on the importance of fathers, several facilitators felt that most of the curriculum materials assumed that the father was not in the picture. Similarly, although the curriculum discusses marriage, it seemed to assume that most participants are not in romantic or committed relationships. FCA program staff told us that these assumptions created some awkwardness when fathers were in fact involved, or when participants were a couple. For example, in the lesson on the importance of coparenting when parents are no longer together, class participants in one site, all of whom were in romantic relationships with their child's other parent (though not necessarily participating together), seemed offended when asked to imagine that their relationships had fallen apart. To these participants, the lesson's emphasis seemed to imply a lack of confidence in their ability to stay together as a couple.

Some facilitators also felt that leading partners to evaluate each other as marriage prospects created problems when couples were already together. For example, one module suggests that participants should be alert to "yellow flags" or "red flags"—problems in their partners that could spell trouble for relationships—such as poor mental health or unemployment. One facilitator described a participating married couple that included a woman suffering from a mental health disorder. The couple was upset by the implication that the wife was an unsuitable marriage partner and parent.

- **Staff and participants liked many CFMF activities, but some staff felt that the take-away point could be made more clear or concrete.**

The CFMF curriculum includes several activities and exercises for participants to undertake during or outside of class; site staff reported that the activities were for the most part engaging and interesting for participants and served as useful tools for exploring relationships and other issues. Class sessions included activities such as writing a “time line” of historic, cultural, and personal events that occurred during their lifetimes so far, and talking about the most memorable aspects of having a new baby. One favorite activity was the creation of a “family memory book,” three-ring binders decorated by participants and used to store completed worksheets and handouts, along with family or baby pictures and other mementos.

Staff suggested several reasons that the books were popular with participants. First, the activity gave a couple something concrete to do together or as individuals. Couples sometimes started out working on separate memory books but then began to work together to create a single, shared book. Second, the books provided a “safe way” for participating fathers to express their feelings without resorting to sensitive language or sharing their intimate thoughts with the group. Third, creating their memory books was similar to “scrap-booking,” a popular hobby for some participants. Staff pointed out that creating the memory book was also similar to journaling, a useful therapeutic technique.

Although the activities were interesting, several facilitators questioned whether participants were able to absorb the various lessons and ideas implicit in some of the exercises. Some characterized the CFMF curriculum as lacking concreteness or substance, or suggested that the lessons were not fully developed or supported by materials the facilitators could use in preparing sessions, guiding discussions, or dealing with issues raised during activities. To address this, sites added other role-playing or communication activities to make the lessons more experiential.

F. PARTICIPANT AND STAFF RESPONSES TO FCA

During our site visits, we spoke to program staff members, including agency executive directors, FCA program directors, class facilitators, and case managers. We also spoke with participants at each site, sometimes as a group and sometimes individually. We asked staff and participants to share their opinions of the FCA program and how, if at all, it had affected them.

- **The new emphasis on including fathers and discussing couple relationships required considerable discussion among program staff as well as an evolution in their thinking and attitudes about the potential for marriage in the target population.**

To implement FCA, local agency leaders needed to seek buy-in to the program from sometimes skeptical staff members. One agency director said this was her most difficult implementation challenge. To gain support and understanding, agencies spent a great deal of time discussing healthy relationships, the concept of healthy marriage, and potential

resistance to the new program among clients and agency stakeholders. They worked to clarify program goals and refine the program's message. One agency manager explained, "For years our perspective was that the adults that support you in your life are your 'family,' and you can be proud and respectful of all family types, like stepfamilies, foster homes. Now it feels like we are suddenly focusing on one type of family."

Staff expressed additional concerns about their ability to address this new program area, and about clients' reactions. Some said they were just becoming comfortable encouraging unmarried or noncustodial fathers to be involved with their children. The prospect of working with couples and explicitly discussing not just parenting or coparenting, but also relationships and marriage, was therefore disconcerting. Some worried that discussing marriage would exclude or stigmatize those outside of marriage.

- **Initial staff skepticism faded when clients responded favorably to class sessions.**

To the initial surprise of some staff, clients who enrolled in the program generally responded favorably to the information and activities presented during class sessions. Participants we interviewed during our site visits reported that the program had helped them communicate with their partners, deal with anger and conflict, and build their parenting skills. Participants welcomed the opportunity to talk about relationships, and many found the sessions to be interesting and fun. As one couple put it, "Other classes at the center fill us in about the baby, but that's not really about the mother and father. This program is about *us*." A recently married participant said that the program was helping her "get better acquainted" with her new husband. She thought the program would help their baby know that "my father and mother love me."

Participants in group sessions said that they enjoyed their classes. Couples found it "kind of exciting to have the mom and the dad in the same classes," and participants attending without a partner enjoyed their involvement in a "coed" program that allowed men and women to interact with each other and discuss relationship issues. Participants appreciated learning from other class members. One said, "It gives us a chance to see what others are dealing with." Some class groups were sorry to see the classes come to an end. Those who received services through home visits appreciated the connection with staff and to services. One home-visiting participant who was involved in an abusive relationship said, "This program probably saved my life."

Facilitators credited the program with numerous benefits. They felt that participants had improved their ability to communicate with each other. They said that some participants changed their attitudes about their relationships and about coparenting their children. Staff found that participants did not react negatively when the classes addressed marriage—in fact, many participants welcomed such discussions. Facilitators thus became more comfortable with the program's content. One facilitator said that the FCA program had become the most rewarding class she has taught. Several providers were exploring the possibility of integrating relationship and marriage skills into ongoing agency services.

Nevertheless, some staff concerns remained. Staff members worried that the program might prove controversial in their communities. Others doubted that a few class lessons

alone could change a lifetime of behaviors and difficulties among fragile families. They stressed the need for participants to receive ongoing support and input to develop parenting skills and to deal with personal and family problems. Some felt that the program would be more successful if it were better targeted to involved but unwed couples around the time of a child's birth. Others, however, felt that there were important reasons that relationships should be discussed more widely with single parents, whether or not they are currently in relationships, and even with older teens and high school students.

- **Facilitators and case managers were sometimes confronted with situations that caused them concern or discomfort or for which they felt unprepared.**

Program staff reported that discussions of relationships and personal histories sometimes elicited strong emotions among participants, which made facilitators and case managers uncomfortable. For instance, when discussing how they had been raised by their own parents, participants sometimes expressed feelings of abandonment, anger, sadness, or regret, or even described memories of childhood abuse. Facilitators and case managers sometimes felt that these situations raised issues that went beyond their training.

Staff members reported that such problems were more likely to arise during home visits than group sessions. One FCA program director with a psychology degree said, "When you go into the home, you get it all." She expressed concern that in the home setting it was too easy to get into therapeutic issues that require professional counseling, background that her facilitators did not have. Because of this, she and the agency's executive director agreed that paraprofessional staff could only deliver the program with supervision and support by individuals with more training, who could advise staff members or work with participants when needed. Another program director said that program facilitators had expressed a desire for additional training to learn how to respond after one person in a couple re-lived a traumatic experience during class.

A few potential instances of mental illness, substance abuse, and child or partner abuse also surfaced during the FCA program—but less often and in different ways than might have been anticipated. For example, possible instances of abuse that did come to the program's attention tended to surface over time and through group and one-on-one discussions, rather than during initial screening procedures. One organization brought in a specialized counselor to provide a session on mental health and drug and alcohol usage, but other sites did not see much evidence of these problems among FCA participants. At another site, facilitators indicated that they thought they saw signs of partner conflicts, mostly involving mutual pushing or shoving, or locking each other out of the home, though usually not violent situations. When staff observed these problems, they allowed participants to remain in classes but referred them to a specialized counselor on their agency staff for additional services. One participant who was interviewed for this study indicated that she was unable to attend classes at the center because her partner did not want her to leave the house. She was grateful that the facilitator was able to accommodate her with home visits. It is unclear to what extent this situation was representative of other participants' experiences or whether it was an isolated case.

G. SUMMARY

In summary, our study identified several implementation lessons experienced during the FCA pilot project. These lessons included issues related to staffing, service delivery format, recruitment and retention, and curriculum use. They also include staff and participant impressions of various aspects of the program, including responses to the overall program objectives.

To staff the program, sites employed a mix of professionals and paraprofessionals. Site directors indicated that a caring approach, skills in relationship development, experience in teaching skills-based materials and adapting delivery to diverse populations, and comfort in facilitating discussions of sensitive issues were essential qualities. Most staff preferred using co-facilitator teams of men and women, and some felt that married couples provided a special benefit. In general, group sessions were preferred over home visits, though the latter was seen as a useful strategy to reduce attrition.

To recruit participants, staff reported that emphasizing the benefits to children of participating in the program was often an effective strategy. Site staff recruited from among their existing clients and were sometimes reluctant to turn away participants who did not meet eligibility guidelines. Site staff felt that small incentives and practical help in getting to sessions were useful in motivating program completion.

Although more than 86 percent of participants indicated that they were in a relationship with someone, only 31 percent attended sessions with their partners. Moreover, the vast majority of participants were women; only 22 percent all participants were men. It is unclear whether these participation outcomes were the result of recruitment approaches that did not focus strongly on engaging men or couples (such as leaving it up to the women to bring their partners into the program), whether sessions were held at times that were inconvenient for most men, whether the curriculum was less relevant for men and couples than for single women, whether men were resistant or difficult to engage, or whether the resulting diversity of participants was exactly what the program planners had in mind.

Sites varied in their choice of modules from the selected curriculum, and sites supplemented it, most often with materials on the topic of father involvement and coparenting. Staff reported adapting the selected curriculum to make the take-away points more concrete and the material more experiential. Some facilitators reported awkwardness in serving the varied types of unwed parents (such as couples) with a curriculum designed primarily for single mothers.

The new focus on the importance of fathers and a two-parent family evoked considerable discussion among program staff who were accustomed to primarily empowering mothers. Yet initial skepticism faded when staff saw the receptivity and favorable responses of participants.

CHAPTER IV

LESSONS LEARNED AND IMPLICATIONS

The purpose of this study was to describe a program with aspects similar to those of the Building Strong Families program model and to identify potential lessons that may inform the continuing evolution of that model. This chapter draws out those lessons and discusses how they apply to the design and implementation of BSF programs. Some examples of the type of questions facing BSF program developers include:

- Will program staff accustomed to serving single mothers or fathers buy in to the concept of focusing on couples?
- How receptive will unmarried parents be to a program that focuses on their adult relationships?
- Can paraprofessionals be effectively used as program facilitators or will professionals with background in mental health or counseling be necessary?
- How important will it be to use male as well as female facilitators?
- Will it be feasible to recruit and enroll large numbers of romantically involved unmarried couples, and will these couples be willing to participate together?
- What strategies will be useful in retaining program participation over a sustained period?
- What service delivery formats will be most effective—home visits, large classes, small groups?
- To what extent will curriculum content need to be tailored specifically for unwed couples who are romantically involved and interested in marriage?

The FCA pilot project alone cannot definitively answer these questions because of its limited scope and somewhat differing goals and target population. However, it may shed some light on these issues, as discussed below.

***Implication 1.** Organizations planning to implement BSF programs may need to build in significant up-front training and opportunities for staff to process and develop the understanding that viable relationships among unwed parents often exist, have the potential to be strengthened, and that healthy marriage is desired by and may be possible for many of them.*

FCA program staff reported being initially confused and needed time to absorb the healthy marriage message and evolve their thinking. During and following the three-day curriculum training, local staff struggled to understand how to fit the mission of FCA, particularly the healthy marriage message, into their existing views about the needs of low-income parents. As is the case with many programs for low-income families, most staff were accustomed to serving disadvantaged mothers and had only recently begun to embrace the important role of fathers in their children's well-being. For a variety of reasons (they often work with clients who are no longer in couple relationships, rarely see healthy marriage in the population they serve, or believe that most unwed relationships involve abuse), healthy marriage did not seem to many staff to be an immediately obvious or potentially viable goal for many of their families.

As program staff gained experience discussing relationship issues with participants through FCA, however, they found that many were indeed in active relationships with their child's other parent and were open and receptive to learning and talking about relationship issues and marriage. Thus, with experience and time, most FCA program staff came to view couples and marriage as a legitimate focus with low-income families. Program facilitators became more confident that they would not offend or stigmatize non-coupled unwed parents and realized that the majority of participants valued, and many aspired to, marriage. Thus, the positive response of participants encouraged and affected the attitudes of FCA facilitators. One program director acknowledged reluctance in the initial stages of preparing to offer the classes, but over the course of program operations came to believe that it was the most important program she had ever provided.

Programs like BSF, which intend to focus primarily on couple relationships and marriage, would do well to consider how to build in opportunities for facilitators to gain this understanding prior to full program operations and evaluation. For example, facilitators could be provided more in-depth and comprehensive training, facilitators with background and experience providing marriage education could be hired to join existing staff, or a period of pilot operations could be implemented to give facilitators direct experience working with the target population around marriage and couple issues, prior to full-scale operations.

Implication 2: *The openness and receptivity of the low-income unwed parents who participated in FCA should give BSF program planners greater confidence that it will fill a need not currently being met in most programs for low-income families.*

Despite “bugs” in the pilot program, most FCA participants responded positively and enthusiastically to material that focused on their couple relationships, including discussions about marriage. The majority of participants reported that they enjoyed and appreciated the opportunity to talk about their own relationships and how they affect their children. At one site, the program was so popular that staff had to create a waiting list. Participants at another site requested additional sessions, or even for the opportunity to repeat the classes. Although FCA was not focused exclusively on the BSF target population of romantically involved expectant couples, the receptivity of unwed parents to programs that include some focus on their relationships and marriage is promising. This receptivity is also consistent with reports from other emerging program efforts, data from recent state surveys on marriage and relationships, and findings from focus groups conducted for the BSF study.

Implication 3. *It seems likely that at least some BSF participants will need special counseling or other clinical treatment for longstanding serious issues that can affect their relationships. BSF programs should consider strategies for meeting this need when it arises.*

Although the FCA evaluation report (Adler-Baeder et al. 2004) does not indicate that staff saw significant levels of domestic violence or other serious issues such as unresolved feelings from past traumatic events, a few staff voiced concerns about their ability to address such relationship problems within the context of the intervention. Some staff indicated that participants sometimes related histories of abuse as a child or as an adult, and these issues surfaced particularly in one-on-one situations. The site that relied heavily on home visits and enrolled many more individuals than couples observed these problems more frequently than other sites.

Additional research is needed to determine the extent to which experiences of abuse or other traumatic events are more prevalent among non-romantically involved single parents compared with the unwed couples who are the target of BSF programs. Focusing enrollment on couples who are willing and interested in attending together might reduce the number of participants who are actively involved in abusive relationships due to self-selection. Nevertheless, from other research we know that low-income families are more likely than others to have a history of difficult experiences that may impede their ability to form positive and long-lasting relationships. Low-income and unwed couples are also more likely to experience stressful life situations that can lead to the escalation of what otherwise might be common conflicts.

If these issues are prevalent in the BSF target population, programs could address them in several ways. For example, programs could employ a greater number of professionals with background in emotional and mental health as class facilitators. Alternatively, they could include a therapeutic component that would be available to those participants who need it. This could take the form of professionally led group therapy, or one-on-one counseling.

The potential presence of these issues also highlights the importance of including curriculum material on how to avoid the escalation of conflicts, which can arise in the context of high levels of stress or depression, and employing systematic assessments and training to detect abusive situations and address them.

Implication 4. *The experiences of the FCA pilot project suggest that BSF programs should include male staff and facilitators. Male-female co-facilitator and recruitment teams may be effective. When available, married staff may be desirable because they can bring valuable experience and role modeling.*

FCA facilitators felt most confident in male-female teams and some felt marriage was an important credential. Staff preferred a co-facilitator approach to delivery of the relationship/marriage information because they felt that male-female teams were more effective in engaging men and couples. The FCA site that served almost exclusively African Americans emphasized the importance of selecting staff that could readily relate to the participants but that also had credibility in the areas being discussed. For them, that meant ensuring that most or all staff, who had backgrounds similar to those of participants, were in stable marriages themselves, so that they could speak from direct experience. Given the even more clear focus on couple relationships and marriage that will be central in BSF programs, it seems wise to include male program staff and provide mixed-gender facilitation teams whenever possible. Using married staff whenever possible is likely to increase facilitators' credibility and also provide exposure to models of healthy marriage, which may prove important for some BSF participants.

Implication 5. *BSF programs will need to make serious, strong, and creative efforts to bring both partners into the program. As suggested by one FCA staff member, male-female teams may be essential in reaching out to and engaging couples.*

Encouraging unwed parents to bring their partners to class was not a highly effective strategy in terms of recruiting unwed couples to FCA—many fewer couples participated than individuals. Although more than 86 percent of participants indicated that they were in a relationship with someone, less than one-third attended sessions with their partners. Moreover, only 22 percent of participants were men. It is also unclear how many of those who did attend the program as a couple were actually unmarried—according to the evaluation report, 32 percent of all participants reported being already married at the preprogram assessment (Adler-Baeder et al. 2004).

Yet from this study we cannot conclude that recruiting unwed couples and men to BSF programs will be highly unlikely. Recruitment efforts varied from site to site in FCA, and did not strongly seek to enroll couples, because this was not a primary goal of the program. Furthermore, sessions were often held during times that were likely to be inconvenient for most men, such as during the day. The main strategy used to encourage the attendance of couples was to invite unwed mothers or fathers into the program, and advise them that they could bring their partners if they had one. FCA staff rarely approached both partners of a given couple, perhaps because only one was usually a client at the local site.

One staff member (one site's fatherhood program director) suggested that future programs that do seek to recruit primarily couples should consider direct outreach to the partner not involved in center's activities. He suggested a male-female team strategy that would involve a two-step process. The female team member would work to recruit the mother (who participates in other services at the center), and upon learning that there is a partner, ask her permission to approach him. The male team member would then be dispatched to directly reach out to the father. The facilitator pointed out that men may have special concerns about participating in a program that they may view as more appropriate for women or for teens, and may be more likely to discuss such concerns with another man. In centers that serve men with employment or fatherhood services, for example, the same recruitment strategy could be used, only in reverse.

***Implication 6.** Recruitment and retention are likely to be important aspects of BSF programs. FCA's experience suggests that BSF programs should consider taking steps to make it easier and more convenient for couples to attend sessions such as providing child care, transportation, and hot meals. The use of incentives may also provide an effective way to retain participants, and could be designed to appeal to both mothers and fathers.*

FCA sites used two methods to promote the retention of participants. First, making attendance easier in practical ways increased the chances that participants would show up at each class. These included facilitating transportation to the agency and providing free child care during classes. Offering refreshments or even meals at group sessions also eliminated the need for families to eat before coming to class, while also providing a socializing element that fostered the development of friendships and rapport among participants. Second, incentives were useful in motivating continued participation. These included small cash payments of around \$10 for each session attended, paid either on the spot or at the conclusion of the class series. Staff emphasized the importance of keeping cash incentives small so as not to encourage attendance just for the sake of the money, yet it is unknown whether larger incentives would have produced different outcomes. Another successful strategy that was especially attractive was a system whereby parents—both mothers and fathers—collect coupons (or “baby bucks”) that could later be cashed in for baby items like clothing, car seats, or other equipment. According to staff, fathers especially enjoyed this system because they could feel they were contributing to their child's care in a material and concrete way.

***Implication 7.** The experiences of FCA staff and participants suggest that BSF programs may want to consider small classes or groups as the primary means of delivering relationship/marriage education, with home visits as a backup.*

Most FCA participants and staff preferred small group sessions. Most staff across all sites considered the group setting to be more interesting and effective because it afforded an opportunity for participants to learn from and support one another. The classroom or group format also encouraged participants to focus on learning and practicing skills rather than bringing up sensitive personal issues that go beyond the scope of the lesson and the training of the facilitator.

Nevertheless, home visits were useful in reaching those in rural areas and as a strategy to minimize attrition. Individual visits allowed facilitators to check up on those who miss sessions and catch them up, and to identify issues that may have led to their absence such as employment, child care, or family problems. Home visits were also useful in the more rural sites, where some participants had more difficulty getting transportation to the center.

***Implication 8.** The curriculum content for BSF programs should be tailored to the relationship goals, circumstances, and interests of unmarried but romantically involved couples who are becoming parents together. These circumstances and relationship goals are not necessarily the same as those of unattached single parents.*

It is likely that all types of unmarried parents can, at least to some extent, benefit from learning relationship skills and exploring the meaning and importance of marriage. Yet the relationship needs and interests of unwed parents who have no partner may differ in several important ways from those who do have a romantic relationship that they want to last.

For example, unwed parents who are no longer in a relationship with their child's other parent may benefit from learning (1) ways to identify more suitable partners for future relationships, (2) the importance of cooperating or getting along with their child's other parent so that their involvement with the child and payment of child support is maximized, and (3) information about how family instability and future unwed pregnancies can affect their child's well-being. Relationship and marriage skills can also be taught to unattached individuals, though some aspects will be less salient for them in light of their circumstances. Having no intimate partner with whom to practice skills or consider marriage may make the material less experiential and thus less likely to be retained or used at some future point, especially with a partner who has not been exposed to the same information and skill building exercises.

Unmarried parents who are romantically involved and having a child together, on the other hand, may have different needs and goals due to their different circumstances. Unwed parents who attend with partners have the opportunity to not only practice relationship skills but also to deepen their commitment and develop the emotional intimacy necessary for healthy marriage. Other unwed couples may already be actively considering marriage, but something has so far held them back from taking that step, and helping them explore and resolve these barriers so they can achieve their aspirations for a stable family may be what these couples need most. In other words, the best way to increase father involvement in the context of romantically involved fragile families who envision a future together may be to show confidence in their aspirations for healthy marriage, and assist them in moving toward that vision—rather than settling for the goal of simply cooperating in raising the child, whether within marriage or not.

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APPENDIX A



*Caring
for my
Family*

Family Formation and Fathering Curriculum

Introduction

“Caring for my Family” helps mothers and fathers of newborns to learn about building healthy relationships with each other and their children through a series of interactive educational experiences. The purpose of the program is to equip unmarried mothers and fathers with skills for making healthy decisions and to explore future options for their relationship including the potential of getting married. New parents will learn skills for parenting together and strengthening their family unit. The program consists of 4 modules; each module contains from four to ten lessons that are best offered as a series. Lessons on specific topics can be selected and tailored for one-on-one or group education. Each lesson reinforces at least one of the family formation principles outlined on the matrix following the Table of Contents.

Our Mission

To teach, encourage and support families and those who work with them to promote the formation of healthy families and the positive involvement of fathers. The project strategies focus on the development of practical knowledge and skills about decision-making that help participants form and sustain healthy family relationships.

Our Philosophy

All families have strengths and assets. They begin their family journey at the birth of their child with high hopes for the future. However, some families are more “fragile” because of economic, social and emotional distress that places them at risk. Support and education can help these parents learn to make healthy decisions about themselves, their relationships, and their children. As a result, these families will demonstrate more strength and resilience in the face of everyday stressors and problems.

The educational strategies incorporated into this guide focus on helping women and men make responsible decisions about their relationships and their future. Deciding not to marry may be as much of a success story for an individual or couple as getting married. Equipping individuals with the knowledge and skills to make the right choices will lead to stronger marriages and families in the long run.

In addition, participants will learn practical techniques to help them improve stress management, communication and listening skills, and other interpersonal skills. They will demonstrate and practice these skills in a supportive and experiential learning environment. Each lesson gives parents at least one skill to take home to use and share with others.

Sessions provide an opportunity for new mothers and fathers to build support networks with other new parents, and with the facilitators who coordinate the group and give follow up services. Strategies are designed to be used in a culturally-sensitive learning environment.

What Family Research Tells Us About Family Formation

The overall goal of this curriculum is to encourage family formation. There are several paths one might take to family formation: marrying one's baby's other parent or involving the father in raising one's child. However, the primary outcomes of the curriculum are not these ends but of building new parents' knowledge, skills and attitudes. The curriculum is designed to support and equip participants to build and sustain healthy family relationships and to provide a secure environment for their children. Family research has shown that unhealthy family relationships and environments are prevalent among young families due to a lack of skill and knowledge.

How the Curriculum Defines Family

This curriculum uses a broad definition of family to include people who are related by blood, marriage, and adoption. In addition, a family includes people who share common goals and resources, and are committed to each other over time. These definitions of *family* from family studies literature were used to develop this focus:

- *Fragile Families* are families that consist of poor children born outside of marriage whose two natural parents are working together to raise them, either by living together or through frequent visitation (Sorensen, et al., 2000).
- *Contextual Families* are defined as an on-going system of interacting persons who are bound together by shared rituals and rules more than by shared biology (Boss, 2002).
- An *inclusive perspective* defines families as being composed of persons related by blood, marriage or adoption, but also sets of interdependent but independent persons who share common goals, resources, and commitment to each other over time (Bubolz and Sontag, 1993).

Barriers to Family Formation

Based on current research, seven barriers to a stable, healthy family for unmarried, new parents have been identified. The curriculum incorporates strategies that target these barriers to a healthy, stable family:

1. Unstable environments where distressed families are unable to manage stress, adapt to conditions, and/or recover from a crisis (e.g., Boss, 2002).
2. Lack of parental involvement in their children's lives regardless of marital status (e.g., Sorensen, et al., 2000).
3. Vulnerability of unwed parents due to distress from poor marital, emotional and economic statuses (e.g., Sorensen, et al., 2000).
4. Poor relationships between the parents of children, lack of father's ability to provide economic support, and the lack of father's involvement in the life of the child (e.g., Johnson, 2001).
5. No motivation for marriage such as affordability, respectability, trust, and control (e.g., Edin, 2001).
6. Communications breakdown, mutual decreased feelings, background differences (e.g., Meredith & Holman, 2001).
7. Marital unreadiness of couples related to misconceptions, no knowledge of alternatives, no appreciation for the benefits of marriage (e.g., Stanley, 2001 and Doherty, 2000).

Strategies to Overcoming Barriers

The strategies to overcome these barriers include building the unmarried parents':

- Decision-making skills
- Interpersonal communication skills
- Economic stability
- Self-efficacy
- Family support systems

Expected Outcomes

As a result of learning these strategies, unmarried parents will:

- Increase involvement of both the mother and father
- Remove barriers to effective co-parenting
- Increase skills to ready them for marriage
- Improve family and parenting relationships

Strategies for Encouraging Family Formation

Building decision-making skills

Decision-making refers to the kinds of choices unwed parents make to benefit themselves and their child. Parents need to understand the importance of the involvement of both the mother and father. When parents know more about the developmental needs of their children, they will choose to become involved with them. Parents will remove barriers, change childrearing practices, and become more involved in their children's lives. New parents must decide whether to continue in the current romantic relationship or to terminate it in the best interest of the child and/or themselves. Parents will also make choices regarding new or potential partners that may impact the child. Lifestyle choices have many dimensions that include social and economic well-being, legal issues, and life planning in general.

Building interpersonal skills

The lack of interpersonal skills is one of the primary causes of family distress and marital breakdown. Interpersonal communication skills are essential for positive relationships to develop between parents. Improved relationships between parents will help to remove barriers to adequate parental involvement. This is true whether or not the parents are living in the same home. Interpersonal skills will also increase the parents' ability to create a safe environment for their children through establishing healthy relationships.

Building economic stability

Economic stability is very important for strengthening families. Being able to meet basic needs for food, shelter, clothing, transportation, and health care are critical and often require work with adequate wages and benefits and/or other supports. Many of the children's parents are in relationships that put themselves and the child at risk because they are not able to meet their basic needs. Economic stability and/or success will enable individuals to meet their basic needs and escape from an unhealthy relationship. Stable employment with a livable wage and benefits will enable both residential and non-residential parents to contribute time and financial resources for their child's well being.

**Building
self-efficacy**

Many unmarried parents are likely to feel disempowered and overwhelmed by the challenges of their current situation. Possible ways to increase self-efficacy include building employment skills, job training, personal budgeting skills, self-help resources, and life planning and management skills. These strategies help new parents to improve self-concepts and build the confidence needed to overcome personal life challenges. Empowered individuals will be more likely to involve themselves in healthy relationships. By developing personal life skills, individuals become more independent and believe that they can achieve and deserve healthy relationships.

**Building
family support
systems**

All families require support systems (including fragile and distressed families). Support involves hearing community-based, positive messages about the institution of marriage. The system includes legal and public assistance in securing child support and a social support group. Support systems reinforce community values, foster meaningfulness, provide resources for immediate relief, and give valuable feedback for single parents. Non-residential fathers and fathers who live with women outside of marriage are encouraged to participate by a supportive network and incentives. Fathers who attend this program or other programs may be motivated to provide the needed parental support.



Curriculum Outline

Module I: Road Map to a Stable Family and an Involved Father

- Getting Started
- Building a Strong Family
- Dads are Important, Too
- Is Marriage in our Future?
- Making Healthy Choices
- Making Your Choice
- Preparing for Action
- Planning and Preparing for My Choice
- Staying the Course
- Planning the Rest of the Trip: 18-Year Parenting Plan

Module II: Caring for Myself

- Creating a Personal and Family Support System
- Building My Self-esteem – Self-Talk Skills
- Dealing with Stress
- Managing Anger
- Powerful Priorities

Module III: Relating to Others

- Listening
- Words Matter – Positive Strokes
- Values in Friendship
- Resolving Conflicts and Anger – Improving Situations through Communication

Module IV: Caring for Our Family

- Making Our Family Strong
- Family Time Together Can Be Fun!
- How to Parent Together – Tips for Co-parenting
- Balancing Work and Family
- Managing our Money

Principles Guiding the Use of the Curriculum

Overview: How to Use this Curriculum

The purpose of the section is to assist the program manager and facilitator in implementing the program with the target group.

Stages of Change

The lessons and activities are based on a framework developed by James Prochaska on the stages of change. Participants assess their stage of change related to family formation and father involvement and set goals to move to the next stage(s). The model supports healthy decision-making that minimizes risk as new mothers and fathers make decisions about their relationship and their family.

The Stages of Change model was developed by J. O. Prochaska, J. Norcross and C. DiClemente (for more information see www.prochange.com). Although the model focuses on self-improvement related to healthy behaviors, there seems to be enough flexibility and adaptability to use it to guide change in interpersonal relationships and other social issues like child abuse and domestic violence.

According to the Stages of Change model, change is a process and not a one-time event. It also cycles, and is not a linear process. The model proposes that people go through five distinct stages when making personal changes:

- **PRECONTEMPLATION (Have not thought about this)** – The individual is not convinced that a change is needed, now or later. Although others may repeatedly urge one to take action, the individual is deaf to their concerns. If forced to take action, the individual will perceive change as imposed.
- **CONTEMPLATION (Have thought about this, but that's all)** – The individual is convinced, but not committed, to making change. One may procrastinate changing because of fears, amount of resources needed to change, and the difficulties of learning something new.
- **PREPARATION (Need help to make this happen or Need to do better)** – The individual is currently making a plan for change. The individual is convinced that the benefits of changing outweigh the costs. There is a risk of becoming demoralized or doubting that change is a good idea.
- **ACTION (Can do, and intend to do or Have started doing this)** – The individual is beginning to make visible changes. The person is actively changing. There is cause for celebration but it is too early for the individual to relax and think he or she is over the hump.

- **MAINTENANCE (Do on a regular basis)** – The individual is sustaining the change efforts and the new behavior patterns eventually become automatic. The risk of relapse is present, in particular during times of stress.

Most people “relapse” and return to earlier stages but will eventually succeed in achieving and maintaining the change (in our case, creating a stable family environment and healthy relationships over time). Relapse is a part of the change process that can be represented as a spiral. Most people can be helped to learn from their relapses rather than going around in circles and making no progress.

The model applies to the Encouraging Family Formation project in that it helps people learn about the change process and apply it to forming and maintaining a strong family and healthy relationships. At a minimum, new moms and dads who are not married will be helped to understand that “relapse” is not failure and can be learned from. Relapse in this context can include a crisis in the relationship or learning to avoid negative patterns.

Reference

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Target Audience

The curriculum is designed to help new mothers and fathers (if participating) make healthy decisions about their relationships. The educational strategies in this curriculum are primarily designed for new mothers with infants age 7 to 12 weeks and who are receiving cash assistance. Most of these mothers, in order to maintain their benefits, need to participate in a program offered by their county Family Independence Agency. However, new fathers can also benefit from participating. Some learning activities will need to be adapted. In addition, program planners will want to address the unique needs of non-residential fathers.

Research shows that mothers play an important role in determining the level and nature of involvement of their children's fathers in their family life. One of the primary factors that inhibit or support father involvement and healthy co-parenting is the attitude of the mother. If she does not value the father's contribution or serves as the gatekeeper to the child, father involvement will be limited or non-existent. Alternatively, if the father puts a child at risk of child abuse and neglect due to drug or alcohol abuse, illegal activities or other factors, the mother plays a critical role in assuring her child's safety (Edin, et al., 2001).

Going Further

Participants are encouraged to develop a family scrapbook or memory book to document their learning in the sessions. This book can then be added to and shared with children as they grow older. At the end of many lessons, additional resources and complementary lessons are identified. Facilitators can put more emphasis on high-need areas if time permits. Facilitators and program managers often will identify participants' needs that are beyond the scope of the program. These needs might include job training and placement, substance abuse treatment, domestic violence counseling, or mental health counseling. Program staff will want to identify community support services and resources that participants can be referred to.

APPENDIX B

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CHILDREN'S TRUST FUND OF ALABAMA

History. The Alabama Legislature established the Children's Trust Fund (CTF) in 1983 to address child abuse and maltreatment in Alabama. The State Child Abuse and Neglect Prevention Board, an autonomous agency of the state government, allocates funds received by CTF to local prevention programs and child abuse prevention councils. CTF funds public organizations and agencies that deal with problems of child abuse and neglect; and encourages the development of community prevention programs.

Mission. The stated mission of the State of Alabama Child Abuse and Neglect Prevention Board (the Children's Trust Fund of Alabama) is "the elimination of child abuse and neglect through the funding of community-based child abuse prevention programs; providing statewide education and public awareness campaigns for all citizens in Alabama; encouraging professionals to recognize and deal with the problems of child abuse and neglect."

Governance. Members of the Child Abuse and Neglect Prevention Board are a chairman, eight public citizens, and several state department heads, including the departments of Education, Human Resources, Mental Health/Mental Retardation, Public Health, and Public Safety. CTF is administered by an executive and a deputy director, six administrative staff members, six program directors, and seven field directors.

Funding. CTF is funded through a variety of state sources, including Alabama's General Fund, Education Trust Fund, TANF funds, and tobacco industry settlement funds. State taxpayers can make direct contributions to CTF through the state's Income Tax check-off campaign. CTF also receives money through various federal grants, and from earnings on trust investments. In FY 2003, CTF's budget was \$7.2 million.¹

¹ The budget has been reduced to \$5.3 million for FY 2004, however, due to state fiscal shortages that necessitated and across the board budget cutbacks by the state.

Programs. CTF currently provides funding to four types of programs: “traditional” child abuse and neglect programs, fatherhood programs, family resource and support programs, and at-risk youth programs.

- ***Traditional programs.*** CTF grants in this program area support educational programs in schools, hospital based programs, parenting and prenatal support classes, child abuse-related “awareness” announcements in the media, support for teenage parents, and programs for families, youth or children.
- ***Fatherhood programs.*** These programs address the needs of fathers, particularly non-custodial fathers. Programs provide services such as pregnancy prevention, character development and life skills classes, parenting classes, home visitation, mediation regarding visitation and custody issues, and education on the rights and responsibilities of fatherhood.
- ***Community-Based Family Resource and Support Programs.*** Ten programs are funded through a federal Child Abuse Prevention and Treatment Act grant. The programs include family resource centers, home visitation, parent education and support programs, a community alliance network, and respite care programs.
- ***At-Risk Youth and Family Support Programs.*** These programs serve individuals ages 8 through 17 who are experiencing problems such as truancy, school suspensions, violent behavior, crime, neglect, or lack of resources.

Contact. For more information about CTF or its programs, including the Family Connections of Alabama program, contact:

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